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Understanding the Impact of Elevated Potassium on Kidney Patients' Quality of Life and Treatment Experience from a Nephrology-Based Office Survey

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Topic/Problem: Hyperkalemia (HK) is a common complication of chronic kidney disease (CKD) and its pharmacologic treatment. However, little is known about the impact of HK from the patients' (pts) perspective.

Approach: Using the Renal Physicians Association Kidney Quality Improvement Registry, adults with CKD and HK were recruited from 11 US nephrology practices. Inclusion criteria: serum potassium (K+) ≥ 5.2 mEq/L within last 2 years, diagnosis of CKD, English proficiency. Exclusion criteria: chronic dialysis, kidney transplantation, dementia. A 37-item survey was developed and administered to pts via the web or in office. It queried awareness and experience with HK and related treatment.

Results: The survey was completed by 302 pts (response rate: 85%). Although 71% recalled discussing high K+ with a physician, only 57% understood the term "hyperkalemia." While 6% of pts were directed to an ER for HK, 32% reported more frequent blood draws, and 48% reported feeling worried about the diagnosis. The most common treatment recommendations followed by pts were diet changes (72%), medication start (38%), medication stopped or dosage change (28%). Pts reported improvement with dietary change (48%) and new medication starts (K+ lowering) (33%). Sixty percent of pts reported that improved K+ levels had a positive mental or physical impact on their lives.

Implication: Understanding of HK in adults with CKD experiencing this condition is relatively low despite conversations and a variety of intervention strategies used in partnership with their physicians. An occurrence of HK negatively impacts their mental health and increases the need for more frequent diagnostic testing, yet its treatment improves their self-reported perceived quality of life.

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