

Abstract

Background: Chronic disease of kidney is an important cause of global mortality & morbidity. It has become a fast expanding global problem related to health in all the nations. Patients with end stage renal disease prefer kidney transplantation as the treatment over dialysis due to increased expectancy & quality of life but a costly choice in developing countries. Therefore, strict adherence to therapy and lifestyle modification is required for improved graft survival.

Objectives: To determine the effectiveness of nurse led intervention on self care behaviour, psychological symptoms and quality of life among kidney transplant recipients.

Materials and Methods: A prospective randomized controlled with time series design was adopted for the study. The study was carried out according to Consolidated Standards of Reporting Trials (CONSORT). The consecutive sampling technique was used to recruit 120 kidney transplant recipients attending transplant clinic who had completed three months after transplantation and fulfilling the eligibility criteria. The subjects were randomized to receive either standard care (N=60) or standard care plus nurse led intervention (N=60) by concealed randomization. The nurse led intervention included the components of formal health education, relaxation therapy, counselling and telephonic reinforcement. The intervention comprised of three sessions of 45 minutes each and telephonic reinforcement weekly for two months. Sociodemographic

and clinical data was collected using structured questionnaire, self care behaviour was assessed by self care practice checklist and Morisky Green Levine adherence scale. Psychological symptoms & quality of life were assessed by DASS 21 and WHO-QOL Bref respectively. The outcome measures were assessed at baseline and at six months and nine months post kidney transplant.

Results: The mean age of participants was 40.05 ± 10.91 years in experimental and 39.45 ± 10.09 years in control group. Baseline characteristics in the groups were comparable. There was statistical significant difference in the total self care practice scores between experimental & control group ($p=0.001$). Adherence to immunosuppressive therapy scores showed there was statistical significant difference between experimental and control group in Posttest 1 ($p=0.03$) and Posttest2 ($p=0.001$). There was statistical significant difference for psychological symptoms of stress ($p=0.001$), anxiety ($p=0.01$), and depression ($p=0.001$) between the experimental and control group. No significant differences were seen in QOL except in physical domain.

Conclusion: Nurse led intervention was effective in improving self care behaviour, decreasing psychological symptoms and improving physical domain of quality of life among kidney transplant recipients. Nurse led intervention is a cost effective and feasible intervention to practice in developing countries.

Key words: kidney transplant recipients, self care, adherence to immunosuppressive therapy, quality of life, psychological symptoms