ELICITING CKD PATIENTS' PREFERENCES FOR DIALYSIS CHOICE

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OBJECTIVES

A key element that makes the difference between providing patients with purely information and a shared decision making process for treatment choice is the fact of helping them to elicit their own preferences so they can identify which treatment option adapts closer to their values and lifestyle.

We analysed the concordance between the preferences elicited by the patients and the modality chosen by them in 72 consecutives CKD patients.

METHODS

One of the tools we use to guide the patients to elicit their preferences is a set of value cards that contains statements (i.e. 'Autonomy', 'Home treatment', 'Hospital treatment', 'Impact on family', 'Work full/part time', 'Needle required', etc.). The patients are requested to select the most important cards for them and to finally choose just two among them: the ones the modality treatment should fulfil as much as possible. Those cards must be visible on the table during the explanation and discussion of the different treatment modalities so that the patients are able to continuously challenge which treatments fit more their preferences.

RESULTS

Mean Age 67 y (41-89). Female, 47%. Treatment choice: PD, 37 patients; HD, 35 patients. The distribution of the main cards selected by patients according to their treatment choice was as follows:

Cards statements selection	PD choice (N=37)	In center-HD choice (N=35)
Autonomy	44%	33%
& be independent		
Home treatment	38%	6%
Healthcare professionals responsible for the	16,4%	54.5%
treatment		
Hospital treatment	5,4%	33%
Leisure activities (hobbies, sports, friends)	5,4%	0%
Frequency of hospital visits	5.4%	0%
Work full/part time	2,6%	0%
Needles required	8,2%	0%
Fixed treatment schedule	0%	3%
Others caring for you	0%	6%
Transportation time to treatment center	2,7%	3%
Travel for holiday	5,4%	6%

CONCLUSIONS

Although most of the patients' preferences seem to be in clear concordance with the characteristics of the chosen dialysis modality, other statements don't seem to be treatment-related. Values and preferences are specific to each individual and may vary over time. For this reason, additionally to provide them with clear and comprehensible information on treatment options, we consider that implementing structured activities that guide patients to recognize and identify their own values and preferences, may help them to clarify which choice fits more their own values and preferences.







