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"QUALITY OF LIFE IN ELDERLY PATIENTS IN ESRD AND DIALYSIS: A NEW BIOCHEMICAL APPROACH NEUROPSYCHOLOGY."

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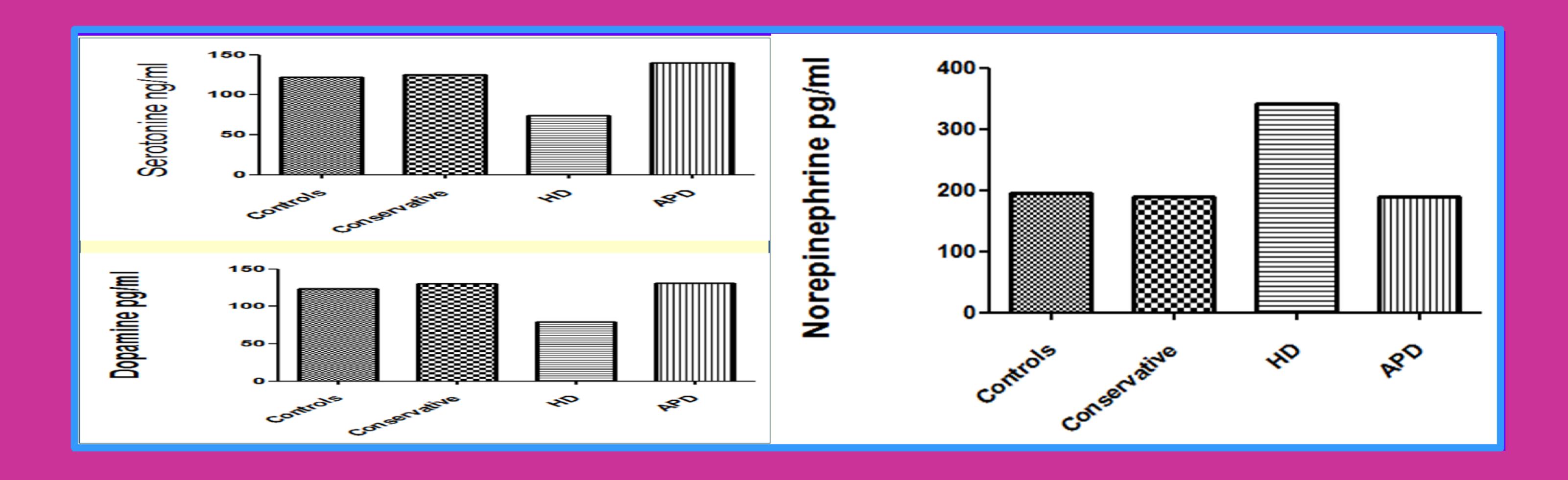
INTRODUCTION AND AIMS:

In the medical field we are witnessing the gradual aging of the general population and with it, a statistically significant increase in age-related pathologies. In particular, we are creating the conditions to speak of a real emergency nephrology in patients older than 75 years. These patients have an increase of comorbidities such as cardiovascular disease, diabetes, cancer, but also social difficulties, loneliness, poverty and depression. It appears, therefore, a need in the context of primary care and even more in the specialist to have a standardized way to approach the treatment of this type of patient in full respect of the right of every individual to have the best care and a life and dignified death. Therefore, a biochemical approach psychodynamic could support the clinician who has to deal with this type of patient.

Methods:

The study population is divided as follows: three patient groups of 10 subjects each (4 M, 5 F) with CKD stage V . Group A patients in conservative treatment group B hemodialysis patients, group C patients on peritoneal dialysis. Each of them was given the CGA (Comprehensive Geriatric Assessment). For each subject was performed the assay of dopamine, serotonin, adrenaline, at time T0 (clearance \geq 15ml/min), the T1 (clearance \leq 10 ml / min) and T2 (after 1 week of treatment replacement / to 1 week after the decision to continue conservative therapy) T3 (after 1 month of starting treatment replacement / to 1 month from the choice of continuing conservative therapy).

The data were evaluated by statistical analysis.



Results:

The correlation of data bio-humoral and score the test CGA showed the presence of anxiety depression in 40% of the study population. In patients on dialysis outside the body has shown a lower percentage of psycho-physical rehabilitation and social attitudes cyclothymic correlated with higher levels of adrenaline and noradrenaline. Patients treated conservatively and DP have levels of serotonin, dopamine and norepinephrine comparable to healthy controls

Conclusions:

Conservative therapy and home dialysis (PD) represent a better approach to the ESRD population, due to the lower socio-psychological and an early program of physical and social rehabilitation compared to extracorporeal dialysis. The correlation between psychological data and biohumoral allows to highlight a better clinical approach to improve the quality of life of these patients.



