Prevalence of pain in chronic hemodialysis patients in the frame of the "Program for the attention of terminal renal disease pain in dialysis units"

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AIM

It's estimated that pain is a very frequent symptom among hemodialysis patients; in some instances it is present in at least 50% of the cases. Furthermore, pain constitutes the symptom with the greatest impact in health-related quality of life. The purpose of this study was quantifying, identifying and measuring its presence in the hemodialysis population.

METHODS

Multicenter transversal study in a total of 17 dialysis units in Spain: 6 hospitals and

11 centers.

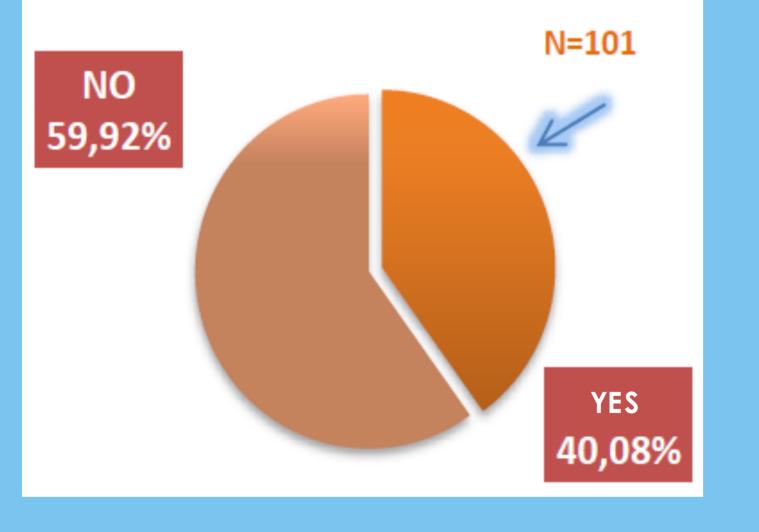
The sample was calculated with a pain prevalence of 70%, an error margin of 5,74%, and an alpha value of 0,05. They were stratified by center and sex on a population of 755 patients.

Exclusion criteria were the lack of knowledge of the Spanish language and severe cognitive deterioration, and participation in the study was accepted through informed consent.

The presence, type and intensity of the pain were determined through the McGill-SV questionnaire, which includes the analogical visual scale (EVA). Comorbidity was determined with the Charlson index.

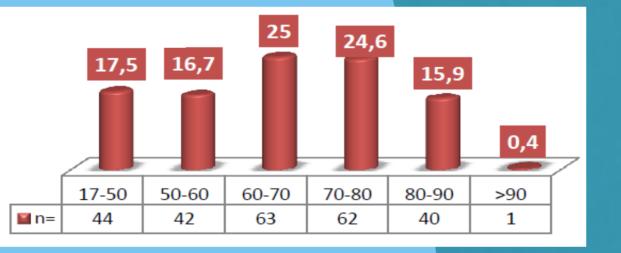
RESULTS

The examined sample was of 252 patients with an average age of 65.1 years. The pain prevalence found was of 101 cases (40,1%); as for the intensity, 47 (46, 5%) quantified the pain as moderate-severe, while 27 (26, 7%) quantified it as severe. The pain was described as weak in 10 cases (10, 4%), bearable in 46 cases (47, 9%), intense in 24 cases (25%), and terribly bothersome in 16 cases (16, 7%).

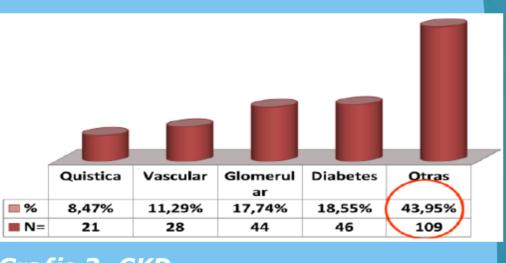


Grafic 1. Prevalence

Among the men, 61 (59%) suffered some kind of pain along with 40 (41%) women, while 24 (18%) men and 23 (23%) women suffered from moderate pain, odds ratio 1, 66 (IC 95% from 0, 88 to 3, 15).

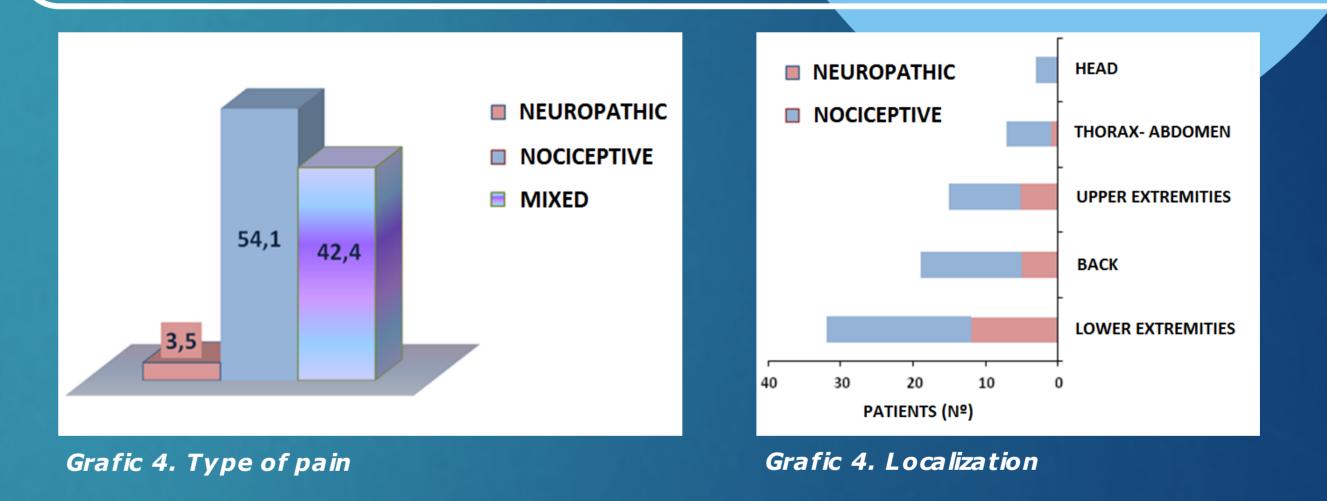


Grafic 2. Age distribution



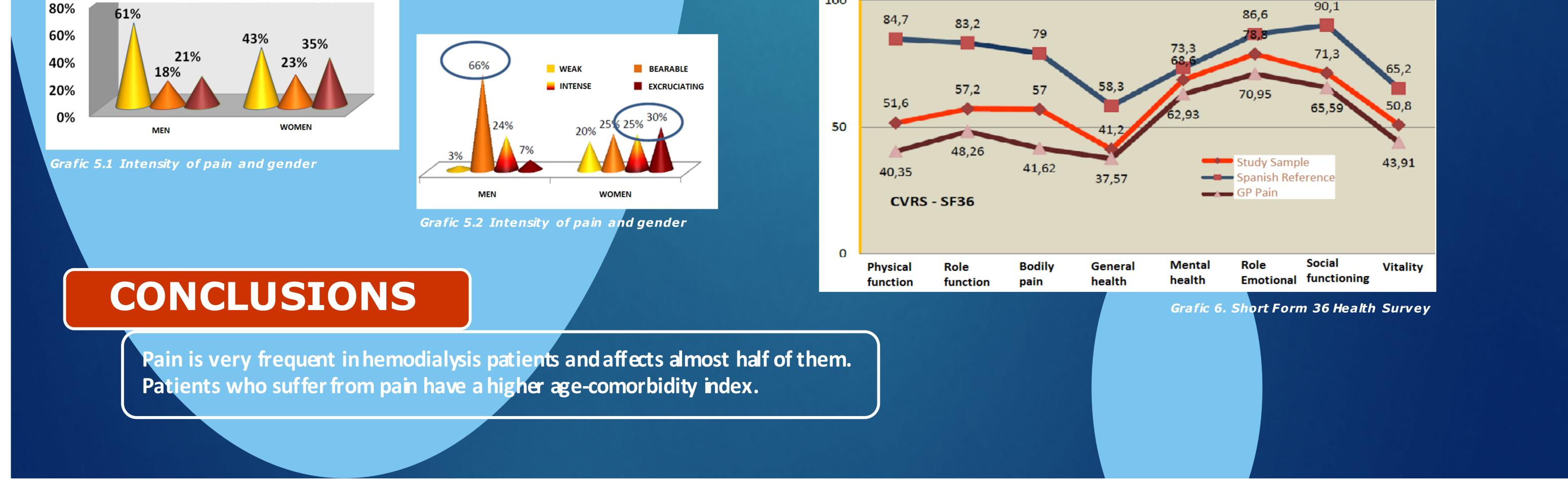
Grafic 3. CKD

Regarding the type of pain, the nociceptive was the most frequent (54, 1%), followed by the mixed type (42, 4%), and the neuropathic type (3, 5%).



There was a non-significant tendency toward greater pain frequency with higher ages. For EVA <5 the average Charlson age-comorbidity index was 7, 81; and for EVA >5 it was 9, 38 with a difference of 1, 58 (IC 95 % from 0, 61 to 2, 54).

MILD MODERATE SEVERE



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