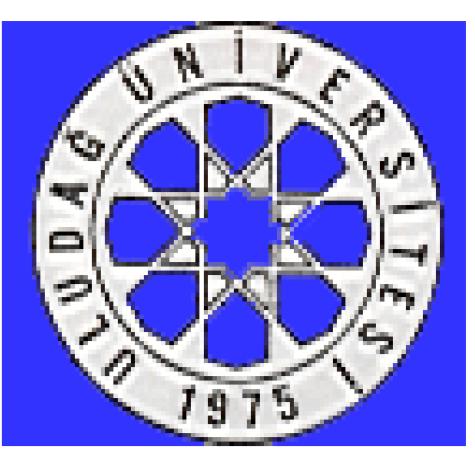
## THE EFFECT OF ANXIETY, DEPRESSION AND QUALITY OF LIFE ON HAND MANIPULATION EDUCATION IN HEMODIALYSIS PATIENTS

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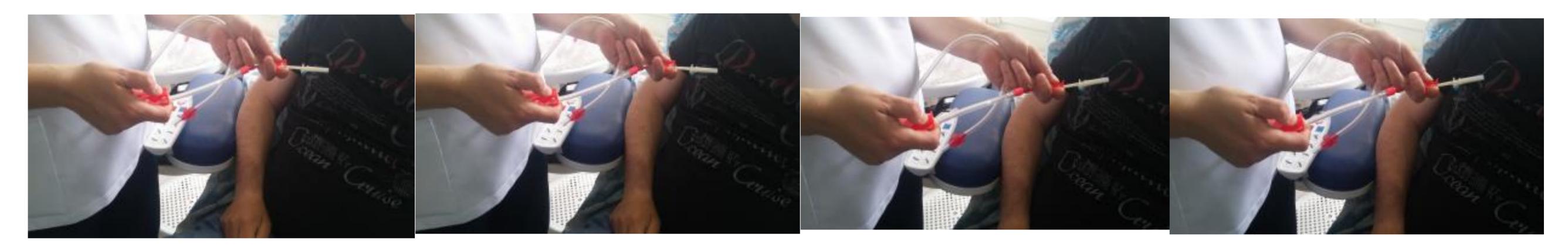


#### **Introduction**

Factors such as dialysis three times a week, fatigue after dialysis, presence of fistula and lack of education affect the quality of life in dialysis patients. Anxiety and depression are prevalent among these patients. Patients with low levels of anxiety or depression had better quality of life. Home hemodialysis patients perform the clamping process itself. It may be useful to teach the use of clamps under the supervision of the dialysis nurse at the beginning and end of the dialysis process in patients who have undergone hemodialysis in the center. In this study, we aimed to investigate the effect of anxiety, depression and quality of life on hand manipulation education in hemodialysis patients.

### **Materials and Methods**

Sixty-one patients who underwent routine hemodialysis treatment in our dialysis unit were evaluated. Catheter or graft presence, older age (over 70 years), congenital anomaly that prevented hand skill, general condition disorder and neurological diseases were causes of exclusion from the study. Theoretical and practical training was given to 31 patients with A-V fistula for 1 month. The evaluation of the training was done with likert type scale using blind observer method. Hospital anxiety and depression scale and SF-36 quality of life scale were used in the study.





# **Results**

The mean age of 31 patients (19 males, 12 females) was  $51.9\pm14$  years. The mean duration of dialysis was  $6\pm5.4$  years. Nine of the patients (29%) were diabetic and 5 (16.1%) were hypertensive. 3.2% of the patients were illiterate. High school and university graduation ratios were 29% and 25.8%, respectively. Ten patients had a history of using clamps. The pre-training evaluation score was  $2.09\pm0.97$ . The post-training score significantly increased to  $3.83\pm0.37$  (p<0.001). The clamping skill of all patients increased except 2 patients. The depression score was  $5.09\pm3.6$  and the anxiety score was 5.3 3.7. The ratios of depressive and anxious patients were 22.6% and 6.5%, respectively. There was no difference between pre- and post-training scores of patients with depression and anxiety. Patients' SF-36 scores were  $63\pm25$  for physical function,  $42\pm42$  for physical role,  $61\pm25$  for pain,  $53\pm23$  for general health,  $50\pm12$  for vitality,  $78\pm26$  for social function,  $38\pm37$  for emotional role and  $53\pm12$  for mental health. Changes in education skills did not correlate with education level, anxiety, depression, and SF-36 scores.

#### **Conclusion**

As a result, we observed that education level, psychological status and quality of life had no effect on hand manipulation education in hemodialysis patients. It is possible for the patients to perform simple manipulations by themselves during the dialysis procedure. Even in those with experience in the past, training can increase skills.

