

Shared Decision Making for dialysis access in hemodialysis patients

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Abstract Introduction

The choice of decision on vascular access to patients, with Stage 4 to 5 Chronic Kidney Disease, is often deferred until the kidney function becomes urgent. The delay decision results in an emergent situation through a central venous catheter for urgent dialysis. Research shows that Hemodialysis (HD) patients usually prefer AV fistula for treatment, which is directly suggested by Nephrologist in Taiwan. However, patients who take Nephrologist's advice are rarely understood how the choice would change their lives.

Methods

This study involved 20 volunteers with a medical background for pre-test and 30 patients in the real test. We designed Patient decision aids (PDAs) "How making a choice in selecting a dialysis access? A decision coach will provide further information for patients during CKD stage 4 to 5 and introduce how the AV fistula and catheter work. With 5 step dialogue to confirm patients' preference of decisions, the coach can compare the decisions conflict after the decision making process.

Results

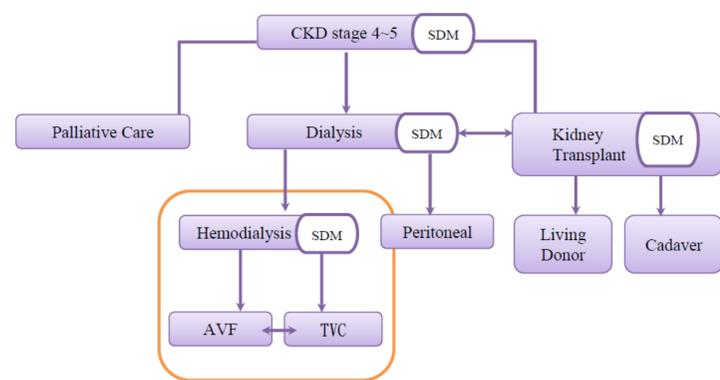
Participants who are at CKD stage 4 to 5 volunteers (10 men and 20 women) could select three options (Option one: AV fistula, Option two: catheter and Option three: not sure yet). After the SDM process, female patients at option three (not sure yet) go from 50% to 25%. Male patients go from 30% to 20%. The score (dislike level total 15 points) that patients' concern about influencing to the catheter shows (13.9), higher than AV fistula (12.9).

Conclusions

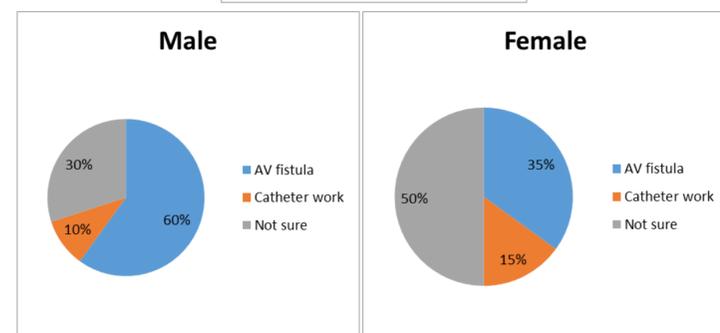
We use a radar chart to compare multiple quantitative variables on a decision making process. 20 medical volunteers indicate that patients after SDM process can understand the pros and cons with selecting AV fistula or catheter for dialysis access. Study results indicate that the SDM process also can help patients clarify the conflict zone for their selection. Moreover, patient still not used to recognize that decision must be made by themselves with the suggestion from medical support.

Comments

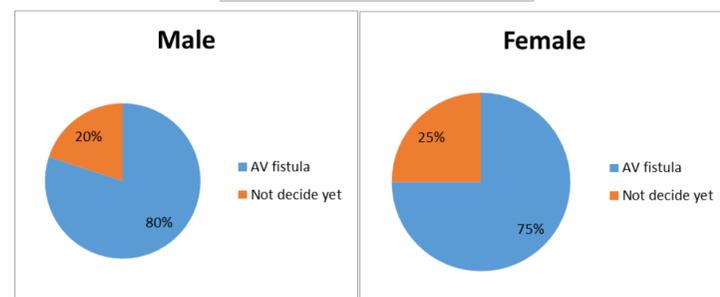
This before and after study aimed to evaluate the difference of the decision making process. Through the teamwork of health promoting, the Hospital can organize multiple coach groups for patients by the shared decision making process, and improve services and health outcomes. This study suggests that patients are encouraged to play an active role on their own. Engaging patients in medical care planning and decision-making can improve the planning of care and patient satisfaction.



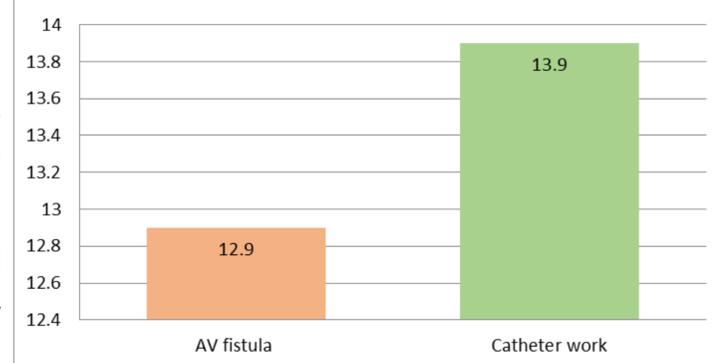
Options wanted Before discuss



Options wanted After decision



Satisfaction with Life index



The medical worker considers that share decision-making tool (SDM) could help patient

