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P276 -Patients' attitude towards access for haemodialysis.

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Introduction:

Well-functioning vascular access (VA) is a necessity to perform efficient haemodialysis. The two most commonly seen types of access are: native arteriovenous fistula (AVF) and tunnelled haemodialysis line (THL). Many studies in recent years have highlighted the advantages of AVF over THL, including its associated 10-fold lower risk of infection¹, which are often severe, require long hospital stays and can cause disability and death².

Despite the known advantages of AVF, there are still a considerable number of patients who prefer THL access., therefore we aimed to understand the patient's reasons for low adherence to clinical recommendations.

Methods:

The project was registered as multi-centre quality improvement project at Bartshealth and data was collected from patients undergoing haemodialysis. A questionnaire was developed to address reasons for low adherence both to clinic attendance and refusal to undergo the surgical procedure. The questionnaire was completed following an interview and the data was collected prospectively.

Results:

A total of 211 patients were included, 54% of which had AVF access and 46% of which had THL. Our results highlighted low involvement of the patient in the decision-making process and showed that the vast majority of patients got their information about VA from hospital staff with minimal influence from other resources such as leaflets when deciding which access to have. We also showed that an alarming 28% of patients did not understand the risks of their route of VA.

An overwhelming majority (60%) of AVF patients also considered reduced risk of infection to be the most important factor to consider prior to access decision, compared to only 35% of THL patients. A concerning 32% of THL patients interviewed considered pain to be more important than risk of infection, resulting in refusal to choose AVF.

Conclusion:

Our results highlighted the need for greater patient education and led to significant changes to the access pathway. This resulted in a notable reduction in failed appointments for clinic and surgery. Furthermore, our results have assisted the development of a patient information leaflet aimed at improving patient understanding of haemodialysis.