Treatment Times

When patients miss treatments, it affects numerous areas of their lives (e.g. issues with the immune system, nutritional status, elevated plasma levels of pro-inflammatory cytokines, cardiovascular problems, or mortality, etc.). Likewise, it has many implications for the Nephrology team that serves the patient. As a result, there is often a dilemma as to how to influence these patients to keep their treatment schedule and maintain sensitivity to the patient’s situation.

Spheres of Influence
Cukor, D. et al. (2007) in the Journal of the American Society of Nephrology suggests that we as professionals have minimal effect on patients because we are so far removed (Figure 1.0).

What can be done?
Ma & Li (2016) recommend the following: “Frequent haemodialysis [sic] may have beneficial effects on a patients’ physical and mental well-being, although it cannot and should not be viewed as a treatment of depression” (pg. 640) or any other barrier to non-compliance. Therefore, in addition to advising the patient to keep scheduled treatment times, the Nephrology team should employ other techniques. These methods include the following:

- Rapport building
- Motivation interviewing (discussed in another issue of THRIVE found at http://www.esrdnetwork.org/professionals/social-worker-tools-resources)
- Consistent mental health assessment and treatment, and
- Most importantly, follow up on identified barriers to treatment times

References