

## Depressive symptoms and pain may affect health outcomes in dialysis patients

July 31 2014

Depressive symptoms and pain in patients on dialysis may have serious negative consequences for patients' health and increase the need for costly medical services, according to a study appearing in an upcoming issue of the *Clinical Journal of the American Society of Nephrology* (*CJASN*). The findings indicate that studies should evaluate the potential of anti-depressant and analgesic therapies to improve patient outcomes and reduce costs.

Depressive symptoms and pain are common in <u>kidney failure</u> patients receiving chronic hemodialysis, but their effects on patients and their health are not completely known. Steven Weisbord, MD, MSc (VA Pittsburgh Healthcare System) and his colleagues assessed these symptoms using questionnaires that 286 dialysis patients completed monthly over a period of up to 24 months between 2009 and 2011.

Among the major findings during follow-up:

- Moderate to severe depressive symptoms were identified on 18% of monthly assessments and pain was reported on 79% of monthly assessments.
- Patients with depressive symptoms were 21% more likely to miss dialysis treatments, 24% more likely to visit the emergency department, 19% more likely to be hospitalized, and 40% more likely to die.
- Patients with severe pain were 16% more likely to undergo abbreviated <u>dialysis</u> treatments, 58% more likely to visit the



emergency department, and 22% more likely be hospitalized.

"Patients receiving chronic hemodialysis experience a very high burden of physical and emotional symptoms. While not all symptoms are easily treated, there are effective therapies for depressive symptoms and pain," said Dr. Weisbord. "These findings underscore the need to determine whether the effective treatment of these symptoms, in addition to making patients feel better, can also reduce utilization of healthcare resources and costs and improve patient-centered outcomes," said Dr. Weisbord.

## Provided by American Society of Nephrology

Citation: Depressive symptoms and pain may affect health outcomes in dialysis patients (2014, July 31) retrieved 19 November 2023 from <a href="https://medicalxpress.com/news/2014-07-depressive-symptoms-pain-affect-health.html">https://medicalxpress.com/news/2014-07-depressive-symptoms-pain-affect-health.html</a>

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