Care of Patients with Kidney Disease who have other Long-term Conditions: A Guide to Clinical Practice

Edited by: Nicola Thomas

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Care of Patients with Kidney Disease who have other Long-term Conditions: A Guide to Clinical Practice is a slightly misleading heading. It was initially thought that the book would cover other chronic illnesses that can occur concurrently alongside kidney disease, such as respiratory disease or heart failure; however, upon closer consideration, the title is really reiterating the fact that kidney disease is, in itself, a multi-morbid disease and should be treated as such.

This publication is an initiative of the European Dialysis and Transplant Nurses Association/European Renal Care Association (EDTNA/ERCA) and has been designed to help health care providers deliver optimal patient-centred care to the often complex population of patients living with chronic kidney disease (CKD). The handbook contains six chapters written by reputable clinicians and academics knowledgeable in the field of renal medicine, mainly from the UK and Greece, and is edited by Dr Nicola Thomas, the editor of the Journal of Renal Care.

The book consists of 108 pages, beginning with a preface that highlights the challenges ahead in the provision of health care for increasingly complex patients with renal failure, on the background of increasing age and the obesity epidemic. These implications not only lead to adverse outcomes for patients and their families, but also have financial impacts for future health care provision and utilisation. Each chapter begins with expected learning outcomes, includes easy-to-read tables and figures, and concludes with a summary of the chapter and a comprehensive reference list for future reading.

Chapter one, ‘Introduction to the Concept of Multi-morbidity’, is authored by Karen Pugh-Clarke. This chapter aims to differentiate the concepts of co-morbidity and multi-morbidity and highlights the concept that there is not ‘one’ primary disease, but rather a holistic and complete picture of the patients’ health state needs to be taken. Predisposing factors and the detrimental health outcomes associated with multi-morbidity are discussed here, including the broader ramifications for the health economy. The importance of a patient-centred approach versus a disease-centred approach is noted to be key to improving the patients’ experience of their health care.

Chapter two, entitled ‘Multi-morbidity and Chronic Kidney Disease: a toxic combination’ is written by UK doctor, Matthew Tabinor. This chapter defines CKD in the context of multi-morbidity, outlining the causes, aetiology and disease progression of CKD to end-stage kidney disease (ESKD) and the multi-faceted impact it has on a patient’s health, including psychological aspects. Discussed here are management strategies that may help to reduce the potential impact of multi-morbidity (diabetes, hypertension, cardiovascular disease) on the patient in the long term.

Theodora Kafkia is the author of Chapter 3, ‘Multi-morbidity and Chronic Kidney Disease: Common Long Term Conditions Explored’. The high incidence of co-existing chronic conditions such as diabetes mellitus, hypertension and cardiovascular disease is well documented in the CKD population. This chapter provides an overview, not only of the multiple effects of CKD (anaemia, bone disease etc) but also of these co-existing morbidities and highlights the key points in optimising the management of these conditions. This chapter provides a valuable insight into the significant disease burden experience by patients with CKD and the impact it has on the physical and psychological self.

In Chapter 4, ‘Key Principles of Nursing Assessment for the Patient with Chronic Kidney Disease and Multi-morbidity’, Karen Pugh-Clarke rightly points out the importance of clear communication in facilitating nursing assessment and ultimately, effective patient-centred care. It is imperative to individualise communication taking into account culture,

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sensory deficits or emotional/cognitive factors in order to develop the rapports necessary to holistically support our patients. Renal nurses are optimally placed to develop great rapports over long periods with patients. This provides the opportunity to provide not only physical care, but also psychological, social and spiritual support as needed. This chapter provides a table highlighting the key principles of nursing assessment that should be considered during interactions with these often complex patients and serves to remind nurses that we are caring for more than ‘a disease process’.

The subject covered in Chapter 5 could be a stand-alone text — ‘Pharmacological Management of the Patient with Chronic Kidney Disease who has other Long-term Conditions’ and is authored by Imran Anware. This chapter is a useful starting point for renal nurses and junior doctors for an overview of the multiple medicines used in the CKD population with multi-morbidities. The complexity of pharmacodynamics and pharmacokinetics in ESKD are beyond the scope of this chapter. However, the important take-home message here is that due to the difficult poly-pharmacy in this population, there is the potential for drug interactions, adverse side effects, poor adherence and the benefits and burdens of medications need to be carefully weighed, in consultation with the patient. More detailed practical solutions and strategies for clinicians to utilise to promote medication adherence would have been useful here.

The final chapter by Karen Pugh-Clarke provides a case study highlighting the multiple aspects of health management that need to be considered when providing care to patients with ESKD. The importance of health care professionals aiming to minimise disease progression through patient involvement and education cannot be underestimated and there are some useful evidence-based guidelines listed to assist practitioners with the management of the multi-morbidities associated with CKD.

This handbook is a useful resource for nursing and medical staff, including general practitioners who are involved in the care of patients with CKD. It is available on the EDTNA/ERCA website, free to members and by order at a cost of about A$22 (€ 15) for non-members.

The handbook is a fitting document as it outlines a change in focus from the current fragmented approach of ‘primary disease and other co-morbidities’ to a more encompassing approach of ‘multi-morbidities’, with an equal focus on all aspects of the patients’ health status. If adopted, this thinking has the potential to promote a comprehensive and cohesive approach to care that may lead to the ‘holistic care’ we all strive for.
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