

CONFERENCE ABSTRACT

The Adversities of Living with Renal Failure in Africa: The Lived Experiences of Patients Receiving Renal Replacement Therapy in Dodoma Tanzania

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Background: Chronic kidney disease (CKD) involves a progressive loss of kidney function due to damage to the epithelia and endothelia kidney cells, having lasted for at least 3 months (Kipp & Kellerman, 2008). It emerges as a global health concern as it affects an average of one in ten people and is listed among the top ten causes of mortality globally (Kovesdy, 2022). In Tanzania, CKD causes three times higher mortality than other diseases (Kilonzo et al., 2016). The impact of CKD on a patient's quality of life due to debilitating physical and psychological symptoms resulting from the accumulation of toxins is known. Nevertheless, an overall picture of their complex adversity experiences, especially among patients with CKD in the African regions where there is a disparity in access to services, poor transportation, and poor social economics, remained a subject for further exploration.

Purpose: To explore the adversities of living with chronic kidney disease from the perspectives of their lived experiences among the patients with renal failure receiving hemodialysis treatment in Dodoma region, Tanzania.

Design: A phenomenological qualitative study design.

Methods: A total of 12 patients with CKD and receiving maintenance hemodialysis treatment at the tertiary hospital in Dodoma City, Tanzania were purposively selected and participated in the face-to-face in-depth interviews. The data were audio-recorded, transcribed verbatim and analyzed using manifest thematic analysis approach. The findings are reported according to the consolidated criteria for reporting qualitative research (COREQ) checklist.

Results: Six themes emerged from the data that represented four major areas expressed as adversities that negatively impacted their lives and two aspects as relieving factors. The four themes that depicted their negative experiences included (1) Unpleasant illness experiences, (2) Meaning constructed after having been diagnosed of CKD, (3) Social disconnection, and (4) Financial difficulties. The two relieving factors included (5) Satisfaction with hemodialysis treatment benefits and (6) Satisfaction with the strategies they invented as coping mechanisms. Further details about the aspects of patients experiences in the listed six themes are presented in Figure 1.

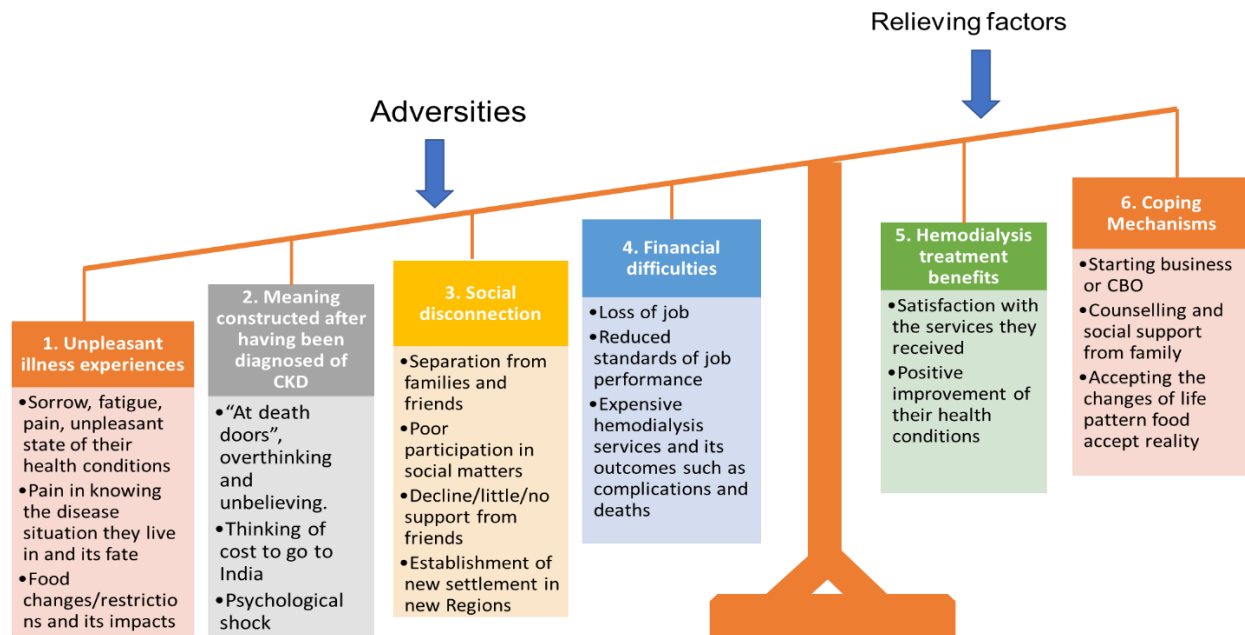


Figure 1.

Themes and subthemes related to adversities of living with chronic kidney injury in Tanzania that emerged from data.

Conclusion: Despite the disease-related signs and symptoms, participants expressed a sense psychological shock, expressing no hope for cure or good quality of life with CKD in this context. They expressed adversities including social, economic, physical and psychological struggles linked to renal failure that impact on their quality of life. While the patients were the social-economic pillars of their families, being affected by CKD implied deprivation and increased burden to the families on these matters due to reduced or failure to engage in productivity/loss of jobs, relocation for treatment, weekly dialysis costs that would amount to USD 400 that they would hardly afford (Ang et al., 2022), and the perception of near death that could heighten their depressive mood (Bahall et al., 2023). We recommend the early screening of kidney injuries, malfunctions or failure to be performed at every health facility where initiation of early management can be done to prevent further damage. Patients with renal failure in African context need closer support to enable them to live a good quality of life.

References

- Ang YTI, Gan SWS, Liow CH, Phang CC, Choong HLL, Liu P. Patients' perspectives of home and self-assist haemodialysis and factors influencing dialysis choices in Singapore. *Renal Replacement Therapy*. 2022;8(1):1–15. <https://doi.org/10.1186/s41100-022-00430-7>
- Bahall M, Legall G, Lalla C. Depression among patients with chronic kidney disease, associated factors, and predictors: a cross-sectional study. *BMC Psychiatry*. 2023;23(1):881. <https://doi.org/10.1186/s12888-023-05383-7>
- Kilonzo SB, Seiffudin AT, Bakshi FA, Gunda DW. Renal dysfunction among adult patients in Mwanza, Tanzania: Prevalence, outcomes and associated factors. *Tanzania Journal of Health Research*. 2016;18(3):1–8. <https://doi.org/10.4314/thrb.v18i3.5>
- Kipp R, Kellerman PS. Chronic Kidney Disease. In *Pathophysiology of Kidney Disease and Hypertension*. Elsevier Inc., 2016. <https://doi.org/10.1016/B978-1-4160-4391-1.50018-7>
- Kovesdy CP. Epidemiology of chronic kidney disease: an update 2022. *Kidney International Supplements*. 2022;12(1):7–11. <https://doi.org/10.1016/j.kisu.2021.11.003>