

Illness perception in elderly patients at the beginning of the conservative therapy: a single center experience

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Introduction

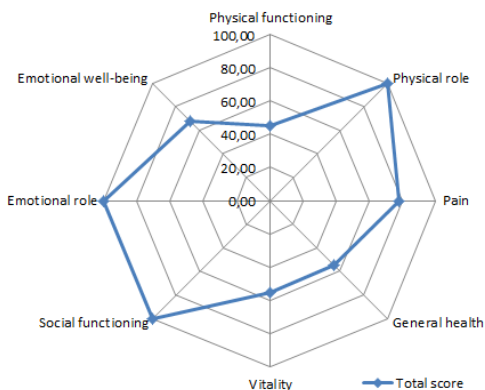
Conservative therapy (CT) can be considered a valid alternative to dialysis treatment in elderly patients. Moreover, patients' illness perception can affect the treatment choice. Our objective was to evaluate the perception of the quality of life (QoL) in elderly patients starting CT.

Methods

We administered the SF-36 questionnaire to all the over 75 patients who came to our CT ambulatory. We evaluated different dimensions: vitality, physical functioning, bodily pain, general health perceptions, physical role functioning, emotional role functioning, social role functioning, mental health.

Results

SF-36 score



	Total score	Female			Male		
		Mean	Median	Reference population	Mean	Median	Reference population
Physical functioning	45,0	40,9	35,0	43,0	52,9	55,0	50,2
Physical role	100,0	82,8	100,0	41,5	78,5	100,0	52,6
Pain	77,5	65,3	77,5	43,0	77,5	78,8	53,3
General health	55,0	53,9	53,5	39,3	54,0	55,0	43,1
Vitality	55,0	50,6	52,5	40,6	44,6	55,0	46,7
Social functioning	100,0	88,3	100,0	55,4	93,3	100,0	63,4
Emotional role	100,0	79,2	100,0	47,3	86,9	100,0	57,1
Emotional well-being	68,0	63,0	66,0	48,8	68,5	77,0	58,5

Figure 1. SF-36 median scores. Scores are indicated as a percentage and represent the residual function in every domain. Higher scores mean lower impairment.

Table 1. Mean/median SF-36 scores for every subgroups and reference values.

We analyzed 46 patients ($\sigma = 29$). The median age was 82.5 years old (IQR 79-87), median serum creatinine was 4.17 mg/dl (IQR 3.60-4.87), while median haemoglobin level was 116 g/l (IQR 111-121). The SF-36 8 dimensions scores are reported in Figure 1 and Table 1.

Conclusion

Our data suggest that the >75 years old patients with ESKD, treated by our CT ambulatory, have a higher perception of their QoL, compared to general population reference values. It occurs despite the physical impairment due to renal disease and the normal ageing process.

Bibliography

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