

Young peoples' experiences of shared decision-making in advanced kidney care

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INTRODUCTION

Shared decision-making allows patients and healthcare professionals to work in partnership to make decisions about treatment and care (1) and been incorporated in various health and social care policies (2). Young adults with end-stage kidney disease aged 18 to 30 years old are expected to work in partnership with their clinicians to make decisions on their preferred treatment choice before their kidneys fail (3). Evidence suggests that over 50% of young adults started haemodialysis as their first kidney failure treatment and less had pre-emptive kidney transplantation (4) despite kidney transplant been seen as a better option and this pattern needs to be explored. There is less literature on their experiences of the decision-making process and its psychosocial impact from their perspective.

AIM

The study will explore young adults' lived experiences of being involved in kidney failure treatment decision-making process to examine the essence of their experience to identify themes and factors that influence or deter their engagement from their perspective and explore the psychosocial impact.

OBJECTIVES :

- Explore young adults aged 18 -30 years decision-making experiences
- Examine their informational needs and identify factors that influenced or deterred their engagement with the treatment decision-making process.
- Investigate the emotional and social impact of living with end-stage kidney disease prior to and post involvement in treatment decision-making and following commencement of preferred treatment choice.

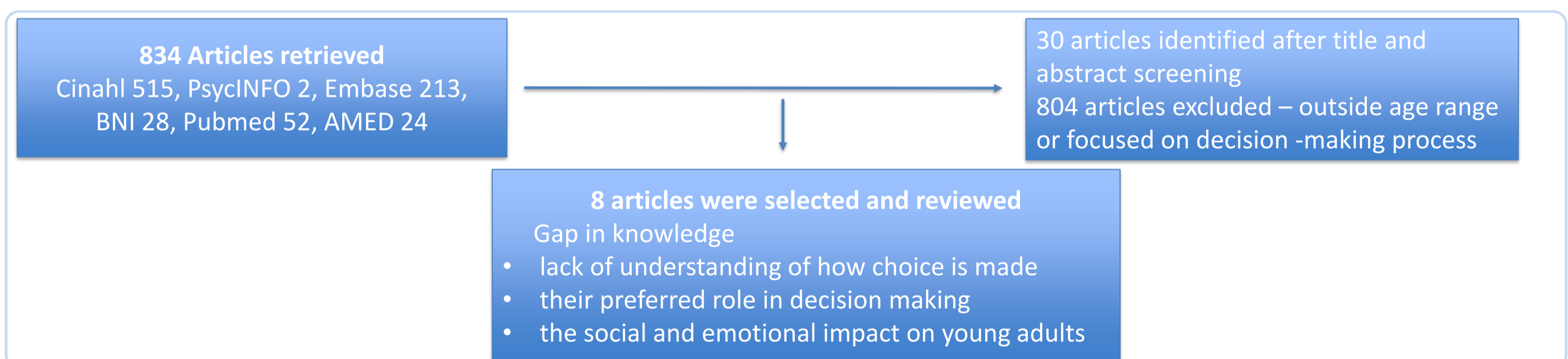
Method and Methodology

This is a qualitative study and will use Interpretative Phenomenology Analysis approach. Semi-structured interviews will be conducted to explore young adults lived experiences of the shared decision-making process from their perspective.

Inclusion criteria: Young adults aged 18 to 30 years, with end-stage kidney disease, diagnosed greater than 3 months, with cognitive ability to give their consent, able to communicate in English and have participated in kidney failure treatment decision making process will be eligible to participate.

Recruitment: Purposeful sampling will be used to identify 20 participants through social network such as facebook, twitter, whatsapp & email of kidney patients charity groups.

Literature Search



CONCLUSION

The study will provide an understanding of young adults' experiences of being involved kidney failure treatment decision-making and its psychosocial impact. It will allow clinicians to understand issues that matters most to young adults during the shared decision-making process and to offer support to alleviate or minimise any psychosocial issues.

References:

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4. Hamilton, A.J., Casula, A., Ben-Shlomo, Y., Caskey, J.F., and Inward D Carol (2018) The clinical epidemiology of young adults starting renal replacement therapy in the UK: Presentation, management and survival using 15 years of UK renal registry data, *Nephrology Dialysis Transplantation*, 33 (2), pp. 358- 364. DOI: doi.org/10.1093/ndt/gfw444.

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