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KIDNEY FAILURE'S EFFECTS ON THE PSYCHOSOCIAL HEALTH AND LIFESTYLE OF YOUNG ADULTS

Highlights

- Compared with healthy peers, young adults with kidney failure needing renal replacement therapy had lower quality of life, worse for dialysis patients compared with transplant patients.
- Young adults on renal replacement therapy were more likely to be unemployed and to live in the family home, and they were less likely to be married or have a partner.

Young adults on renal replacement therapy may find it challenging to integrate responsibility for managing their condition into their changing lives.

Washington, DC (October 19, 2017) — Kidney failure is associated with lower quality of life in young people and limited employment, independence, and relationships compared with healthy peers, according to an analysis appearing in an upcoming issue of the *Clinical Journal of the American Society of Nephrology* (CJASN).

Young adults who need dialysis or a kidney transplant face certain psychosocial challenges not experienced by older patients, and the extent to which kidney failure has affected their social status, mental health, and lifestyle remains unclear. To investigate, Alexander Hamilton, MD (University of Bristol, in the UK) and his colleagues reviewed all published studies reporting socio-demographic, psychological health, and lifestyle outcomes in young adults (aged 16-30 years) with kidney failure on renal replacement therapy (RRT)—either dialysis or a kidney transplant.

The team's analysis included 60 studies of 15,575 participants. Studies were largely single center cross-sectional studies of those transplanted in childhood. Compared with healthy peers, young adults on RRT had lower quality of life, worse for dialysis patients compared with transplant patients. They were more likely to be unemployed and to live in the family home, and they were less likely to be married or have a partner. Higher education, alcohol abstinence, and smoking status did not differ.

“We know that most young people with end-stage kidney disease have a kidney transplant, but they are high-risk for the transplanted kidney to fail. There has been much

focus both on programs to improve the transition between pediatric and adult care for kidney patients, and clinical end-points,” said Dr. Hamilton. “It is vital to understand how kidney failure affects social goals, because by defining these we can seek interventions to improve areas of deficit. These areas really matter to patients.”

Study co-authors include Rhian Clissold, MD, Carol Inward, MD, Fergus Caskey, MD, and Yoav Ben-Shlomo, MD, PhD.

Disclosures: The authors reported no financial disclosures.

The article, entitled “Socio-demographic, Psychological Health and Lifestyle Outcomes in Young Adults on Renal Replacement Therapy,” will appear online at <http://cjasn.asnjournals.org/> on October 19, 2017, doi: 10.2215/CJN.04760517.

To arrange an interview with Dr Alexander Hamilton from the Bristol Medical School: Population Health Sciences at the University of Bristol please contact Joanne Fryer and Caroline Clancy, Media Relations Managers, University of Bristol, tel +44 (0) 117 39 4022, email joanne.fryer@bristol.ac.uk [Mon to Weds], caroline.clancy@bristol.ac.uk [Weds to Fri].

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