

# Psychosocial factors associated with Pain in patients treated by Haemodialysis: a 2 month follow-up protocol

Christel Vioulac<sup>1,3\*</sup>, Colette Aubrée<sup>2</sup>, Anne Kolko<sup>3</sup>, Ziad Massy<sup>4</sup>, Aurélie Untas<sup>1,3</sup>

1- Laboratory of Psychopathology and Health Processes 4057, Paris Descartes University, Sorbonne Paris Cité, France ; 2- Paris Tenon Hospital, France ; 3-Association pour l'Utilisation du Rein Artificiel (AURA) Paris, France ; 4- Paris Ambroise Paré Hospital, France

\* Corresponding author : christel.vioulac@gmail.com

## Introduction

- ✓ Haemodialysis is a **vital treatment** for patients suffering from End Stage Renal Disease (ESRD). Sessions last about 4 hrs, 3 times a week
  - ✓ **30 to 50%** of patients treated by HD feel pain, including headaches, cramps and puncture pain during HD sessions (Gamondi et al., 2013)
  - ✓ **Psychosocial factors**, such as personality, coping or depression and anxiety, can be associated with pain (Goodin & Bulls, 2013 ; Radat & Koleck, 2011)
  - ✓ **Dialysis nurses** have a specific relationship with patients (Vioulac et al., 2016) and are their first interlocuter regarding symptom management
- ➔ No research has investigated pain in ESRD with a **longitudinal**, session-to-session, follow-up

## Objectives

- 1 Assess the **frequence** of pain and it's **evolution** through hemodialysis sessions
- 2 Evaluate the **association** between pain and **psychosocial factors**
- 3 Identify **profiles** of patients at risk for pain

## Population

**100** Patients Hemodialysis > 3 mois

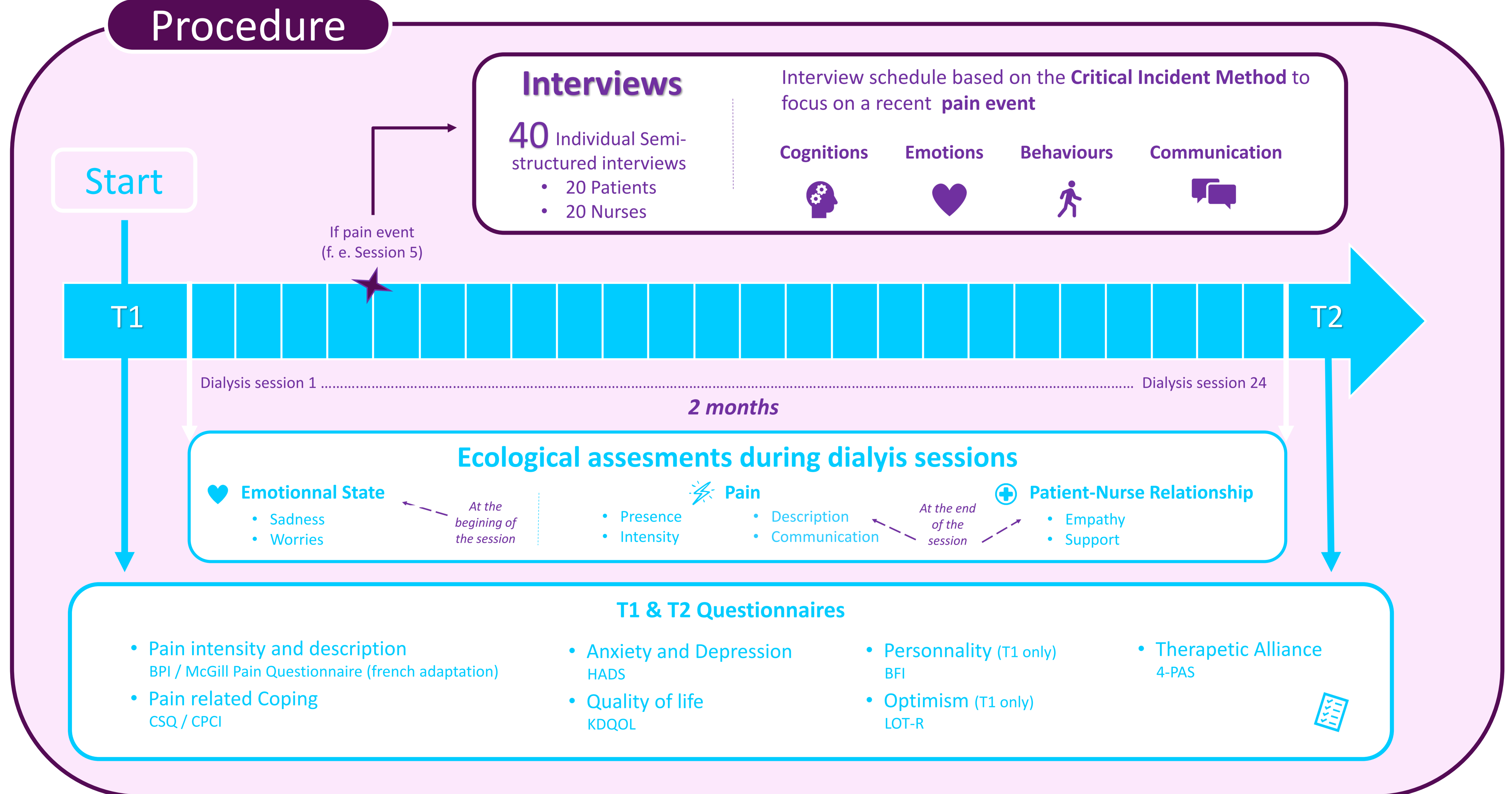
**20** Nurses working in HD centres

**Recrutment**

5 centres in the Paris area (hospitals and out-center)

Volunteer call broadcasted through a patient association's journal (France Rein)

## Procedure



## Current stage

**66** Patients included (47 completed their participation)

**6** Interviews (3 Patients / 3 Nurses)

**39** Patients have declared pain at T1 (53.8%)

Mean intensity = 6.7 / 10 (Min = 1 ; Max = 10)

**HADS**

**Depression** : Mean 5.9  
Suspected depression 23.4% (Score > 8)

**Anxiety** : Mean 6.4  
Suspected anxiety 36.2% (score > 8)

**Therapeutic alliance**

Evaluation by the patient 37.7/ 44

**BUT**

A higher level of **pain** is associated with a lower therapeutic alliance (r = -.27)

References : Gamondi, C., Galli, N., Schönholzer, C., Marone, C., Zwahlen, H., Gabutti, L., ... Giannini, O. (2013). Frequency and severity of pain and symptom distress among patients with chronic kidney disease receiving dialysis. *Swiss Medical Weekly*, 143, w13750. ; Goodin, B. R., & Bulls, H. W. (2013). Optimism and the experience of pain: benefits of seeing the glass as half full. *Current Pain and Headache Reports*, 17(5), 329. ; Radat, F., & Koleck, M. (2011). Douleur et dépression : Les médiateurs cognitifs et comportementaux d'une association très fréquente. *L'Encéphale : Revue de psychiatrie clinique biologique et thérapeutique*, 37(3), 172-179. ; Vioulac C., Aubree C., Massy Z.A. & Untas A. (2016) Empathy and stress in nurses working in haemodialysis: a qualitative study. *Journal of Advanced Nursing* 72(5), 1075-1085.

This work was supported by a grant from France Rein and the Fondation du Rein under the aegis of the Medical Research Foundation and its partners (grant number AO 2016 Maladie rénale chronique FdR FNAIR/FRM - 16/146 to Aurélie Untas)