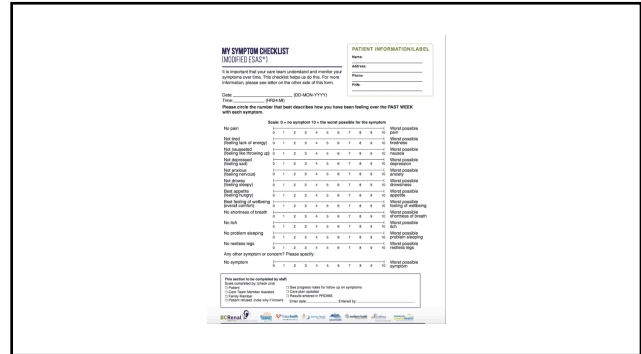




### Edmonton Symptom Assessment Score (ESAS)

- ESAS tool consists of 12 questions
- Patients rate symptoms from 0 (no symptoms) to 10 (severe symptoms)
- Systematic screening of symptoms and follow-up assessment overtime



### Objectives

- To assess patient's Edmonton Symptoms Assessment Score (ESAS) before and after implementation of the BCPRA Symptoms Management algorithms/guidelines.
- To assess chronic kidney disease patient satisfaction after receiving care following the BCPRA algorithms/guidelines and the patient information sheet.
- To assess RNs and renal dietician RDs satisfaction of the algorithms/guidelines and patient information sheet.

### Study Design

- **2 Phases**
  - **Phase 1:** Participant patients selected from SPH and VGH outpatient kidney care clinics (n=8)
  - **Phase 2:** RNs and RDs working at the SPH and VGH KCCs invited to participate in focus groups (n=10: 2 renal dieticians, 8 renal nurses)

### Inclusion and Exclusion Criteria Phase I

- Inclusion**
- Non-dialysis end-stage renal disease (eGFR <15) patients attending KCC at either SPH or VGH
  - ESAS ≥ 4 for poor appetite, nausea, fatigue/insomnia, pruritis
  - Age ≥ 19 years
- Exclusion**
- Participant unable to speak English

### Inclusion and Exclusion Criteria Phase II

- Inclusion**
- Renal nurses and renal dieticians working at the SPH and VGH KCC
- Exclusion**
- Renal nurses and renal dieticians who have not used the symptom management algorithms/ guidelines at least twice

**Baseline Characteristics Phase I**

Sex (Male/Female)	4/4
Mean Age $\pm$ SD (years)	68.8 $\pm$ 6.0
CKD Duration $\pm$ SD (months)	153.8 $\pm$ 171.8
Duration of Care at KCC $\pm$ SD (months)	58.3 $\pm$ 49.3

**Symptoms Addressed as per staff at KCC visit (n=8)**

Patients recognized that symptoms were addressed	<u>Poor appetite</u>	<u>Nausea</u>	<u>Pruritis</u>	<u>Fatigue</u>
	n=2	n=1	n=2	n=0

**Change in ESAS score**

Patient	Symptom	Pre-Intervention ESAS score	Post-Intervention ESAS score
1	low appetite	7	6
2	low appetite	5	4
3	pruritis	6	4.5
4	pruritis	8	4
5	nausea	6	7

**Patient Satisfaction**

- Patient interviews revealed:
- Recommendations were at least somewhat helpful
  - No recommendations worsened quality of life
  - Patient information sheets were helpful and easy to use

**Patient Satisfaction**

Themes identified during patient interviews (n=5)	
<b>Patient Centered</b>	Patient friendly information sheet (4) Recommendations take into account patient preference (3)
<b>Patient Education</b>	Patient information sheet informative/helpful for symptom management (4)
<b>Standardized Care</b>	More comprehensive investigation into possible CKD related symptoms (1)

**Renal Nurse/Dietician Satisfaction**

- Focus groups revealed:
- Renal nurses/dieticians generally satisfied with algorithms and patient information sheets

## Renal Nurse/Dietician Satisfaction

Themes identified during renal nurse/dietician focus groups (n=11)	
<b>Standardized Care</b>	Standardized information being asked/provided to patients (8) Earlier intervention with recommendations (3) Increased confidence due to evidence based recommendations (3) Improves understanding among colleagues in Kidney Care Clinic (2)
<b>Patient-Centered</b>	Individualized patient care (5) Patient autonomy for treatment options (3)
<b>Follow-Up</b>	Logistic challenges with patient follow up (5) Prompts for follow up (4)
<b>Patient Education</b>	Algorithms/Patient information sheets allow for better patient education and information retention (4) Stimulates patient questions for future clinic visits (2)
<b>Accountability</b>	Being more proactive about making recommendations (3)

## Patient Quotes

- "...it gave me an outline of what to expect"
- "... it convinced me that it was ok to go with what my doctor suggested"

## Renal Nurse/Dietician Quotes

- "...you have a standard way of like giving the same message so even if I don't see the patient at the next visit the next person can give the same information and reinforce the same points rather than giving new points and overwhelming the patient"
- "...this is more patient centered just because if they go to a different site, if they get transferred the staff are speaking a little bit more the same language and its such a great opportunity for education both ways"
- "I think the word is for me is that is gives me more confidence in giving the information which I have always kind of known but to have it laid out nicely, research based gives us more confidence"

## Limitations

- Small sample size
- Only three of four intended symptom management tools could be assessed
- Sample size too small to present data for individual symptom management algorithms/guidelines

## Conclusions

- Majority of ESAS scores improved after interventions
- Patients perceived that information sheets were helpful and easy to use
- Renal nurses and renal dieticians are satisfied with the symptom management algorithms/guidelines and patient information sheets

## References

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