

# Philosophical Underpinnings of the Mental Health of Patients with Chronic Kidney Disease Undergoing Dialysis and their Caregivers

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**Abstract:** This paper presents the philosophical underpinnings of the mental health of patients with chronic kidney disease undergoing dialysis and their caregivers based on scientific studies conducted by many researchers. The aim is to recognize the existence of chronic kidney disease and gain knowledge on the mental health of patients undergoing dialysis and their caregivers in their daily living and how their coping strategies affect their lives. This paper presents data on cases of Chronic Kidney Disease (CKD), discusses the end results and progress of the disease, and the mental health and psychological adjustment of patients and their caregivers. Thereupon, this study is relevant to every Filipino to be health conscious and for researchers and legislators. (Abstract)

**Index Terms:** Philosophical underpinnings, mental health, chronic kidney disease (key words)

## I. INTRODUCTION

Poor mental health and Chronic Disease are both prevalent situations that have been noted to be highly associated. Chronic illness influences mental health because of the fact that it leads to a life-changing experience, day-to-day physical manifestation of the disease, feelings of sorrow, pain, and denial, along with the added financial burden [7]. People with chronic illnesses who experience difficulty applying efficient coping strategies may eventually and adversely impact their mental health and well-being. For this reason, keeping good mental health and well-being is greatly important to the quality of life, the efficiency to cope with highs and lows, and the vigilance against physical illness, social inequalities, and unhealthy lifestyles [12-17].

## II. MENTAL HEALTH OF PATIENTS WITH CHRONIC KIDNEY DISEASE UNDERGOING DIALYSIS AND THEIR CAREGIVERS

Chronic Kidney Disease (CKD) is a progressive condition and irreversible damage to renal function. Kidney disease and its treatment can make an individual feel physically sick, which impacts mental health and the capacity to react well to difficult circumstances. Being mentally unwell can worsen the kidney function of CKD patients due to the reason that mental health can affect physical health leading to poor eating habits, sleep, energy level, and the strength to stay on treatment. Previous studies have noted that not only CKD patients but also their caregivers have increased psychological problems and impaired quality of life [1]. Patients particularly those with advanced CKD need caregivers or support groups to help and assist with their activities of daily living. Furthermore, caregivers present an important role in caring for and assisting patients during the period of the disease. The majority of these caregivers are family members or close friends who are not paid for their services and are therefore designated informal caregivers.

The number of patients afflicted by CKD has been rising, affecting an estimated 843.6 million individuals globally in 2017 [13]. Also, the incidence, resulting from end-stage renal disease (ESRD) is about 11% and it is the result of 2.4 million deaths worldwide [11]. Chronic kidney disease presents a specifically large burden in low- and middle-income countries that are least inadequate to manage its consequences including mental health. The Philippines, in particular, has encountered an increased prevalence of CKD annually since 2013 [6]. Kidney diseases specifically End Stage Renal Disease (ESRD) recorded as the 7th highest cause of death among Filipinos according to the National Kidney and Transplant Institute. Additionally, about 120 Filipinos per million population every year develop chronic renal failure. It is anticipated that as the incidence of CKD increases, the impact on emotional aspect of patients including their caregivers may be negatively affected as well, which can lead to various types of depression. Moreover, psychological depression, anxiety, and distress adversely affect the patient's well-being and quality of life [11]. So much so that depression has been recorded as a common extra-renal comorbidity in nearly 30-40% of End-Stage Renal Disease (ESRD) patients.

Hemodialysis (HD) is generally the most common form of dialysis treatment for ESRD. It is also a stressful procedure that burdens the daily living of patients, significantly affecting their physical functioning. Consequently, these challenges may increase the possibility that patients along with their caregivers will progress to depression or anxiety. These may include major disruptions in lifestyles; the need to comply with treatment regimens including dialysis schedules, diet prescription, and water restriction; hospitalizations; and the fear of disability, morbidity, and shortened lifespan. Literature noted that 63.9 % of HD patients experienced anxiety, 60.5 % went through depression, and 51.7 % reported stress. Accordingly, the prevalence of psychiatric treatment among HD patients is 1.5-3 times greater than other chronic diseases [11]. CKD Patients, as well as their caregivers, presented the same mental health conditions, both showing the criteria for depression as a self-perceived circumstance and with time the symptoms will intensify [2-16]. These pieces of evidence and situations presented the reality that CKD is a complex clinical condition affecting mental health that adversely influences the quality of life of every patient and their caregivers.

## III. PSYCHOLOGICAL ADJUSTMENT FOR PATIENTS DIAGNOSED WITH CKD AND THEIR CAREGIVERS

Several individuals grieve about their dilemmas in life before adapting to them. Since every person has a diverse coping mechanism, others can easily adapt to their problem while some will persist in distress that may lead to psychiatric disorders, most

frequently depression or anxiety. Patients who are suffering from CKD and their caregivers will need to cope with a chronic condition, but the emotional aspects are many times unnoticed when medical care is already regarded. Dialysis Doctors and nurses often neglect to perceive such symptoms, especially those who are not psychiatrists. Hence, there may be little concentration on somatic complaints of psychiatric illnesses, leaving these comorbidities undiagnosed [8].

Psychological resilience is a broadly acknowledged mechanism underpinning the adaptation process, with coping flexibility as a main component [14]. The theory of coping flexibility believes that effective coping includes (a) sensitivity to the diverse situational demands inherent in an ever-changing environment and (b) variability in deploying coping strategies to confront particular demands [3]. In particular, psychological adaptation is a task in which a person utilizes problem-focused techniques in manageable stressful situations and emotion-focused coping techniques in unmanageable ones. In contrast, inflexible coping has been associated with psychological symptoms for example individuals with elevated degrees of anxiety are described by an illusion of control [4]. They manage to see all circumstances in life as being under their power, and therefore primarily resolve problem-focused coping [10-18]. Contrary to individuals with depression who are characterized by a sense of learned helplessness, they manage to look at all happenings without their power, and thus primarily create emotion-focused coping over stressful occurrences. Coping flexibility has been distinguished to promote adjustment to stressful life alterations, which is signified by a decrease in symptoms of anxiety and depression typically experienced in stressful life transformation [5].

Using these theories for psychological adjustment for patients diagnosed with CKD, persons with higher coping flexibility are expected to have lesser levels of anxiety and depression than those lower in coping flexibility. The coping process of the transactional theory of stress and coping further emphasized that [9], coping flexibility is anticipated to justify the relationship between context-specific health beliefs and mental health. Thus copers who are resilient tend to embrace a more complex view of the disease rather than perceiving it as unmanageable by recognizing both controllable and uncontrollable aspects of the disease. Accordingly, coping flexibility is believed to be connected with anxiety and depression during the course of the disease. In this respect, the mental health experienced by CKD patients and their caregivers is a function of both context-specific health beliefs and coping flexibility.

#### **IV. RESEARCH APPROACH IN THE STUDY OF THE MENTAL HEALTH OF PATIENTS WITH CHRONIC KIDNEY DISEASE UNDERGOING DIALYSIS AND THEIR CAREGIVERS**

The appropriate research approach that I will use is an exploratory qualitative research design to explore the mental health of CKD patients undergoing dialysis and their caregivers. The aim is to describe the existence of chronic kidney disease and gain knowledge on the mental health of patients undergoing dialysis and their caregivers in their daily lives and how their coping strategies affect their lives using a phenomenological approach. I will include patients diagnosed with chronic kidney disease and on maintenance dialysis, including their caregivers. A face-to-face interview will be conducted using open-ended questions that will allow CKD patients to describe their experiences with the impact of the disease and their strategies for managing mental health. For example, one question that will be asked is "What thoughts or words come to your mind when you think of mental health?". Each interview will take 30-60 minutes, including an audio tape and transcription to be analyzed by two investigators. Significantly, it will exemplify an epistemological perspective that is interpretive/constructive, as the primary objective was to gather information from the interviewee's worldview. The open-ended questions have no right or wrong answer, but rather, provide a framework for the descriptive process. The audio recording will provide contextual pauses and interviewer responses to further understand and interpret the responses. The results will be categorized with key descriptions using an exploratory approach.

#### **V. CONCLUSION**

Chronic kidney disease is a life-changing experience affecting the mental health of CKD patients undergoing dialysis and their caregivers. Depression, anxiety, and stress are prevailing among CKD patients and their caregivers. Individuals with higher coping flexibility in managing their disease have lesser levels of anxiety and depression than those lower in coping flexibility.

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