



Avondsymposium 23 november

Klinische onderzoeken bij de nefrologische patiënt



VLAANDEREN ZOND ZIJN ZONEN & DOCHTERS NAAR EDTNA 2017



Vancomycin-resistant Enterococcus outbreak on the nephrology department: How to manage it at the dialysis unit

Olbrechts C.1, Crols S. 1, Heemeryck L. 1, Bosmans P. 2, Van Paesschen N. 1, Tielemans C. 1, Nursing Staff Hemodialysis Unit UZ Brussel

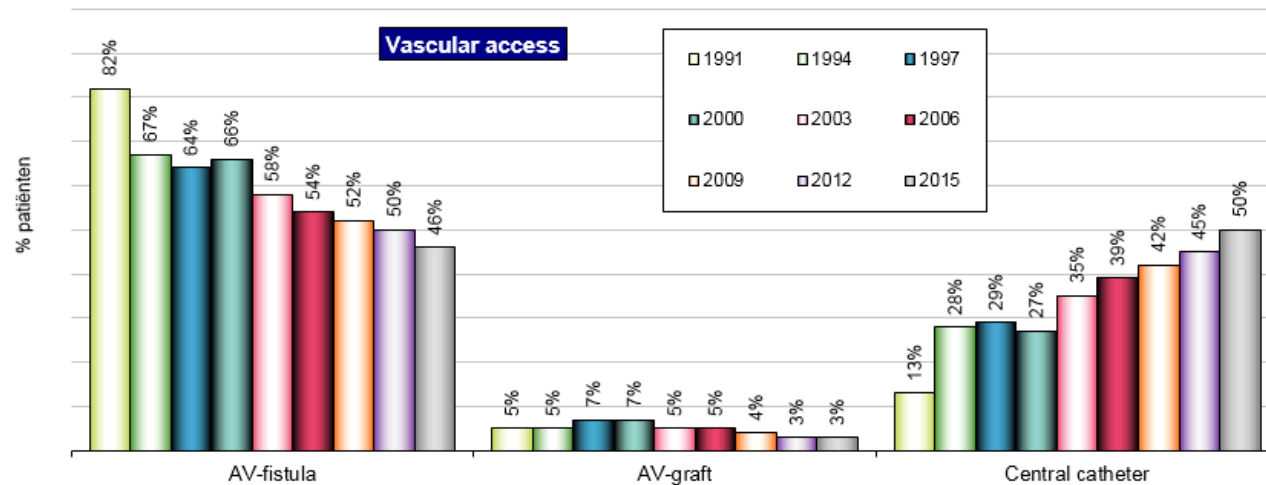
- In total: 16 VRE-patients at dialysis unit
 - Most got out of isolation after 3 negative screenings, some passed away
 - Currently 2 VRE-colonized patients
- Large impact of the outbreak
 - On patients and health care workers
 - Continuous vigilance is required
- Need of:
 - Repeating hand hygiene campaigns
 - Re-education patients and (para-)medical staff



30 jaar ORPADT enquête, Paul Van Malderen, OLV Aalst



HD: Evolution vascular access



- The use of central catheters increased further to 50%.
- 68 patiënten were dialyzed with a combination of AV-fistel and catheter, 7 with another access

Rol van de verpleegkundige bij hyperfosfatemie

S. Claus, UZ Gent

- Vifor-Fresenius meeting



Machine TMP is a misleading parameter to follow haemodialyser clotting

F. Vanommeslaeghe, W. Van Biesen, **S. Claus**, M. Dierick, L. Van Hoorebeke, A. Dhondt, S. Eloot

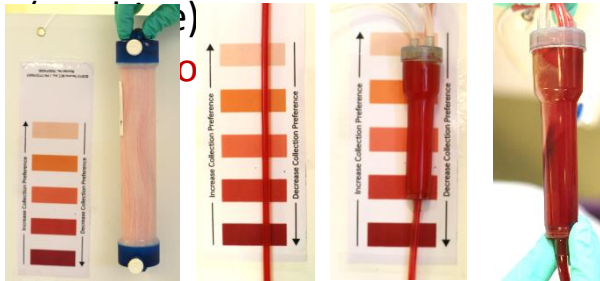
20 patients - midweek HD session

During HD: follow-up different **dialysis parameters**

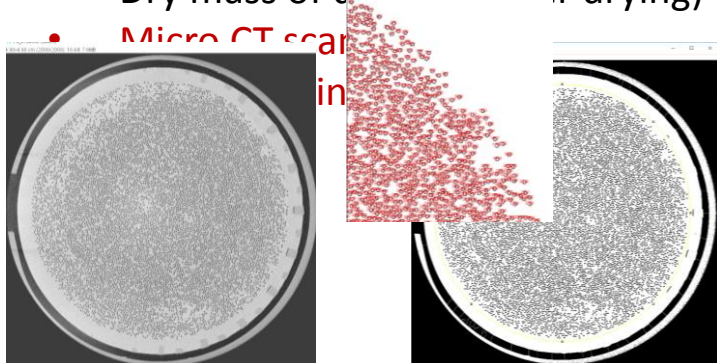
- Flow rates, volumes, pressures
- BVM, OCM

After HD:

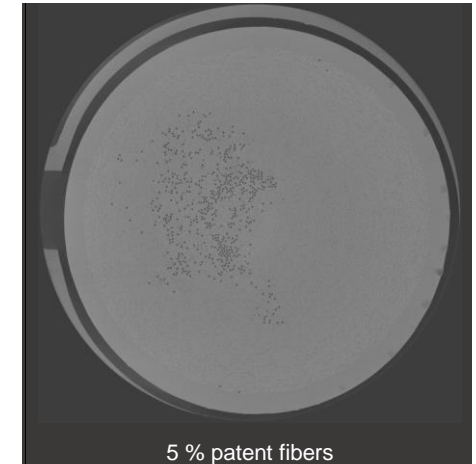
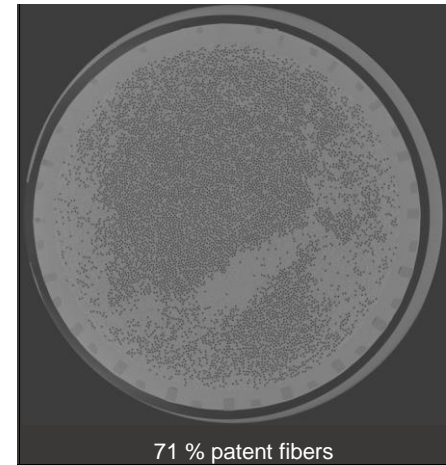
- **Dialysis parameter:** rinsing volume



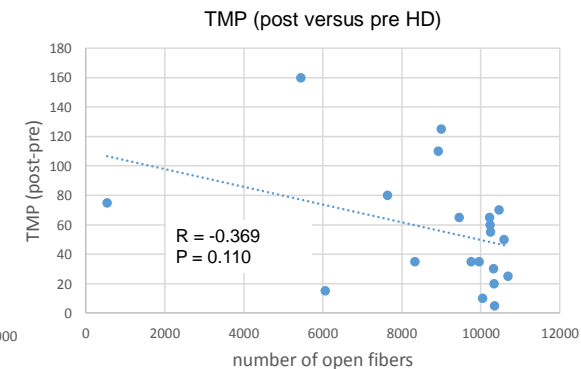
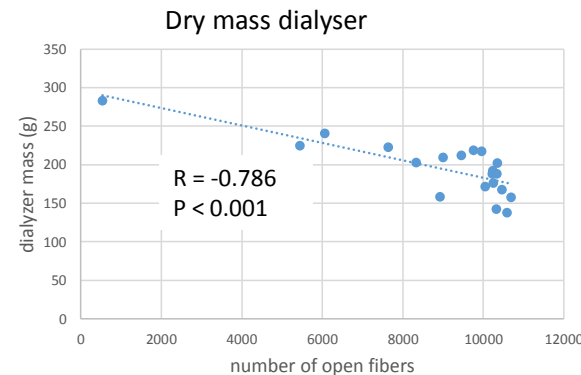
- Dry mass of dialyser (after drying)



Micro CT images



Correlations: dialysis parameters vs. clotting



Take home message

Although popular, machine TMP cannot accurately predict coagulation in the extracorporeal circuit.

Utility scores to assess Quality of Life in prevalent haemodialysis patients

E. Holvoet, E. Deman, A. Verleysen, I. Van Dorpe, S. Eloit, W. Van Biesen

Patients (n=121)

- 74 males.
- Age: 67.7 ± 15.8
- Hospital, satellite and home dialysis units
- Haemoglobin: 11.4±1.3g/dl

Questionnaires

➤ PROMIS-29

Anxiety
Depression
Fatigue
Pain interference
Physical function
Sleep disturbance
Satisfaction with participation in social roles
Ability to participate in social roles and activities

➤ EQ5D

Mobility
Self-care
Usual activities
Pain/discomfort
Anxiety/depression
Visual analogue scale (VAS): self-rated health

➤ 7 point Likert scale

Patient's health as compared to age matched population
QoL at the specific day of the interview

- Patients were **interviewed** by trained nurses to avoid selection bias
- Data were collected and stored centrally using **Survey-Monkey**.

Results

- Reported EQ5D utility in this population of prevalent HD patients is **low**.
- **No correlation** between the subjective scores of Health related QoL and EQ5D utility index.
- Both **physical function (PROMIS-29)** and **mobility (EQ5D)** are **problematic**.
- Anxiety and depression are comparable to the general population.

Take home message

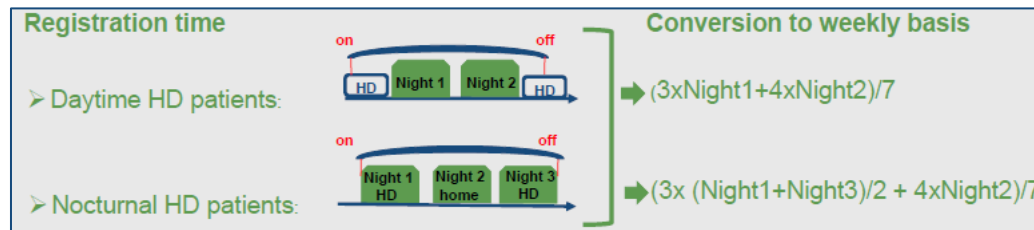
It can be hypothesised that patients develop coping mechanisms to adapt to their new disease state.

Reduced actual sleep and sleep efficiency in patients on in-centre nocturnal haemodialysis

E. Holvoet, S.J. Maertens, W. Van Biesen, S. Eloot

Objective measures *Motionwatch*

- Actual sleep: total time effectively spent in sleep.
- Sleep efficiency: actual sleep as a % of time in bed.
- Fragmentation index: a measure for sleep quality.



Results

- Sleep time in **daytime HD patients** is less the night before the HD treatment
- Sleep quality and sleep efficiency in **nocturnal HD patients** is worse during HD treatment compared to sleeping at home
- **Nocturnal HD patients** sleep less and less efficient as compared to daytime HD patients
- Objective and subjective measurements are not correlated

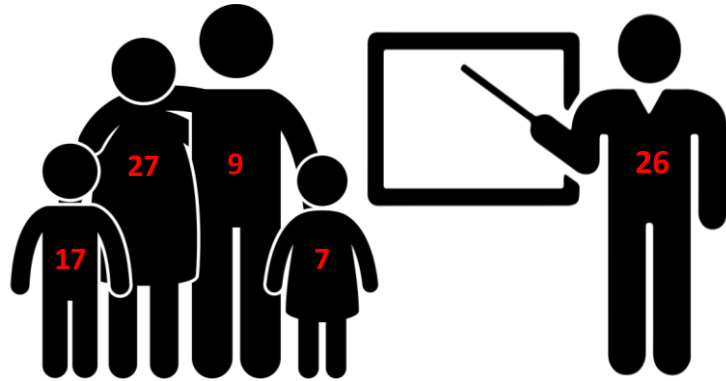
Take home message

- Patients' perception might deviate significantly from what is measured.
- Further studies preferably include both measurement to have a complete picture of the sleep

Quality of Life in paediatric patients with chronic kidney disease

E. De Bruyne, Ch. Van Herzeele, E. Snauwaert, E. Holvoet, S. Vermeiren, E. Van Hoecke, L. Goubert, A. Raes, W. Van Biesen, J. Vande Walle and S. Eloot

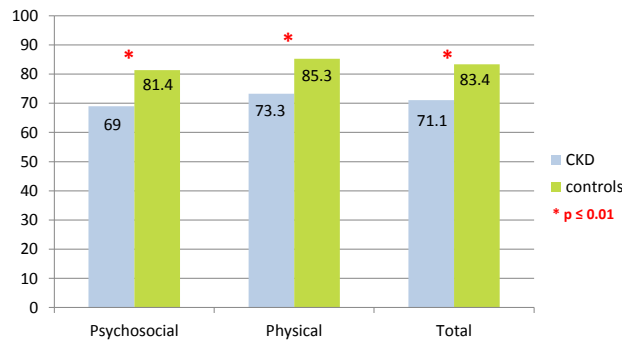
Participants & Questionnaires



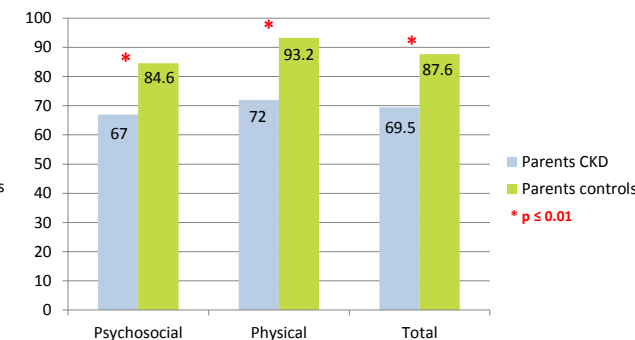
- Quality of Life (general & ESRD)
- Internalising problems
- Externalising problems
- Attentional functioning
- Executive functioning

Results: PedsQL (QoL)

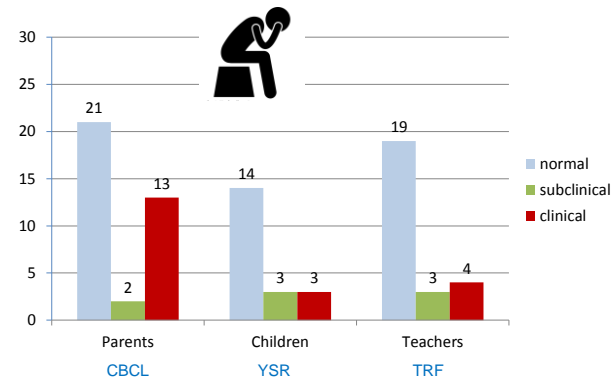
Children informants



Parents informants



Results: Internalising problems



Take home message

Children with CKD have **lower QoL**, as informed by parents or children

Almost 50% of parents are concerned regarding possible **internalising problems** of their child



Electrical safety on a haemodialysis unit

Luc Vonckx, Nico Van Paesschen, UZ Brussel

Conclusions/Applications for nurses.

It is the doctors' responsibility and the nurses' duty to control the connection and state of these potential equalization yellow/green and mains cables of beds, hemodialysis machines and other equipment. The technicians and reference nurse of our unit continuously try to implement this control habit to all the new doctors, nurses and logistical personnel.

Only with regularly monitored equipment and installations, dialysis is considered to be a relatively safe procedure as far as electrical hazards are concerned.





**EDTNA SCHOLARSHIP 2017
voor ELS HOLVOET, UZ GENT**



**ORPADT-MEDTRONIC BELLCO award 2017 voor ELS
HOLVOET, UZ GENT**



**ORPADT-MEDICOLE award 2017
voor CELINE OLBRECHTS, UZ BRUSSEL**



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