

HUDDLE UP!

MENTAL HEALTH SERIES

Depression #1

People with kidney disease on dialysis are at significant risk for depression. It is the most common mental health problem among dialysis patients and is linked with increased mortality. Depression is treatable, yet many people do not seek help.

Depression should never be considered a “normal” condition for dialysis patients. It is a serious condition that indicates something is wrong. Depression screenings are done at regular intervals by dialysis social workers. Symptoms can manifest in different ways depending on a patient’s life experiences, support system and psychosocial factors. Review the following to learn more about how depression uniquely affects patients in your unit and identify strategies to better meet their needs.

Signs of Depression

- Hopelessness
- Loss of Interest
- Fatigue
- Anxiety
- Appetite changes
- Irritability

May Look Like This

- Crying, emotional demeanor
- Avoidance of dialysis, non-adherence
- Difficulty concentrating
- Increased purposeless physical activity, like hand wringing and pacing or slowed movements and speech
- Remarks of “giving up”
- Complaints of poor sleep, or inability to stay awake



- Increased use of alcohol or substance abuse
- Unexplained physical problems, such as back pain or headaches
- Frequent or recurrent thoughts of death

What to Do

- Alert your social worker to patients with signs of depression
- Be compassionate
- Don’t take outbursts personally
- Encourage patients to connect with others, such as with a peer mentor or a support group



Quality
Insights
Renal Network 5



Midwest
Kidney Network



Case Scenario

You have a patient who started dialysis three months ago. They are a rather quiet person and polite. Recently the patient started missing treatments and has begun to come in with a lot of extra fluid. Julie is the technician bringing this patient back to get their weight before taking them to their chair to start treatment. She can see that the patient's clothes are dirty and have a smell of beer. She comments that the weight is pretty high and that it would help if the patient didn't miss treatment. The patient tenses up and under their breath says something like, "Shut the hell up." Julie quietly escorts the patient to their chair.

Nurse Carol takes the vitals chairside. She asks the patient were they were for their last treatment and notes that they have been missing a lot. The patient angrily tells her that they are a grown person and are sick of people trying to get in their business. Carol states that she is just concerned about the patient and wants to help. The patient says they will ask for it when they want it.

During treatment, the patient begins to cramp. Julie turns the machine down and tells the patient that this is why they shouldn't miss treatment. The patient starts to scream at Julie, using profanity and demanding to come off the machine. They want someone else to take them off because they can't stand the sight of Julie any longer. Julie is shocked by this

outburst, is shaking and begins to cry.

Group Discussion Topics

- How should staff respond to the patient's outburst?
- Name as many options as you can where staff actions could have been different, possibly helping the situation.
- At what point should the social worker be notified?

Depression is a common symptom of distress in patients on dialysis. It should not be considered "normal." It is very treatable. Without treatment, patient outcomes can be further compromised mentally and physically. Working to recognize when patients may be experiencing depression can lead to early intervention and relief.

WHAT WOULD YOU DO?