

**COPING STRATEGIES IN HEMODIALYSIS PATIENTS:  
ASSOCIATIONS OF SATISFACTION, COPING STRATEGIES,  
AND OUTCOMES IN A BRONX DIALYSIS POPULATION**

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Coping strategies in patients on hemodialysis (HD) may include problem oriented/active coping, emotion based coping, and risk-taking coping behaviors. No one coping mechanism has been shown to be objectively adaptive, however, risk-taking coping behavior has been shown to be maladaptive. The purpose of this study was to examine coping mechanisms in HD patients in a Bronx dialysis population.

86 patients were interviewed using a modified Dialysis Satisfaction Survey. The mean age of patients was 56.7, 48.8% were females, 66.3% were black, and the mean time on dialysis was 36 months. In addition to demographic data, patients reported overall satisfaction with their dialysis treatment, the impact of dialysis on their lives, and the impact of dialysis on their mood. Patients were asked to name three strategies used to cope with their treatment. Four objective measures of patient compliance and outcomes, Kt/v, PO<sub>4</sub> level, missed treatments, and excessive interdialytic fluid gain, were recorded. Data was analyzed using the Student's t-test and Chi-square tests.

Patients who reported a negative impact of dialysis on mood were more likely to be female ( $p = 0.007$ ) and younger ( $p = 0.03$ ). A majority of the self-reported coping skills employed by the patients were problem oriented/active coping skills. No statistically significant relationship was found between any type of coping mechanism and satisfaction, impact, mood, or objective measures of outcome.

This study has shown that female sex and younger age are associated with a self-reported negative impact of dialysis. However, both negative impact scores and trends toward lower satisfaction with care did not correlate adversely with objective measures of compliance. Nor do types of coping skills correlate with either satisfaction or outcomes. The relationship of coping skills, satisfaction, and outcomes are complex and future research will be needed to define these relationships and develop innovative interventions to improve both patient satisfaction and objective outcomes.

