

REAL-WORLD EVALUATION OF TREATMENT ADHERENCE, HEALTHCARE ACCESS, AND PATIENT-CENTRED OUTCOMES IN ANEMIA MANAGEMENT AMONG DIALYSIS-DEPENDENT CHRONIC KIDNEY DISEASE PATIENTS

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OBJECTIVES

Anemia is a major complication among dialysis-dependent chronic kidney disease (DD-CKD) patients, adversely affecting health-related quality of life (HRQoL), treatment adherence, and healthcare costs. Real-world evidence (RWE) and patient-centered outcomes are increasingly important in healthcare decision-making. This study aimed to evaluate knowledge, attitude, and practice (KAP) regarding anemia management among DD-CKD patients, with emphasis on affordability, accessibility, treatment adherence, and patient-reported outcomes.

METHODS

A cross-sectional real-world study was conducted among DD-CKD patients receiving maintenance hemodialysis at a tertiary care teaching hospital.

A structured and validated questionnaire-based survey was administered through direct patient interviews. Demographic, socioeconomic, clinical, and treatment-related information was collected.

Knowledge was assessed using closed-ended questions, attitude through a 5-point Likert scale, and practice using adherence and healthcare utilization patterns.

Clinical and biochemical parameters were obtained from medical records. Descriptive statistics, chi-square tests, and correlation analyses were performed.

STUDY POPULATION

Participant sex distribution



176

Male

63.8%

N = 276

DD-CKD patients

Maintenance hemodialysis
Tertiary care teaching hospital

100

Female

36.2%

≥10 g/dL

Hb threshold

Controlled hemoglobin

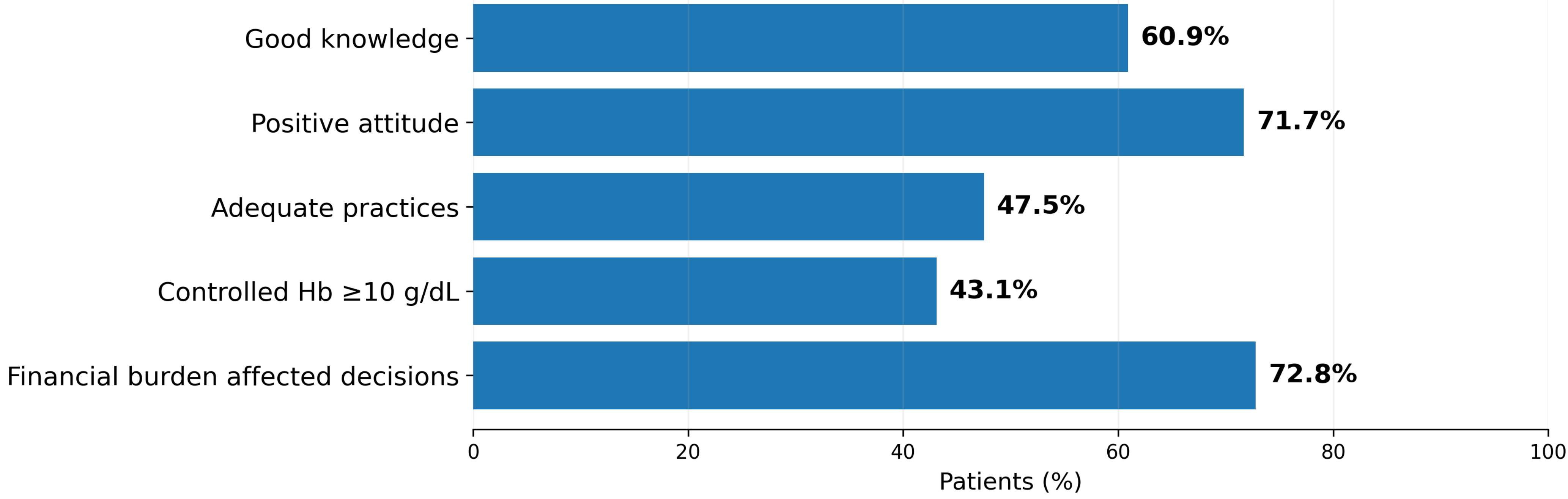
276

Total participants

Cross-sectional study

RESULTS

Key patient-reported and clinical indicators (N=276)



60.9%

Good knowledge

71.7%

Positive attitude

47.5%

Adequate treatment practices

43.1%

Controlled hemoglobin ≥10 g/dL

72.8%

Financial burden affected healthcare decisions

KEY FINDINGS

A total of 276 DD-CKD patients participated, including 176 males (63.8%) and 100 females (36.2%). Good knowledge regarding anemia management was observed in 168 patients (60.9%), while 198 patients (71.7%) demonstrated a positive attitude toward treatment adherence. However, only 131 patients (47.5%) reported adequate treatment practices. Controlled hemoglobin levels (≥10 g/dL) were observed in 119 patients (43.1%). Treatment-related financial burden significantly affected healthcare decisions in 201 patients (72.8%). A significant association was observed between patient knowledge and treatment adherence ($\chi^2=9.82$; $p=0.004$). Positive correlation was identified between adherence and improved HRQoL outcomes ($r=0.61$; $p<0.001$).

STATISTICAL ASSOCIATIONS

Knowledge ↔ Treatment Adherence

$\chi^2 = 9.82$ | $p = 0.004$

Adherence ↔ Improved HRQoL

$r = 0.61$ | $p < 0.001$

These findings support adherence as an important patient-centered outcome and highlight the influence of knowledge and financial burden in real-world anemia management.

KEY INTERPRETATION

Knowledge–practice gap

Good knowledge (60.9%) and positive attitude (71.7%) did not translate into adequate treatment practices (47.5%). Financial burden affected healthcare decisions in 72.8% of participants, while healthcare accessibility barriers negatively affected adherence and outcomes.

PATIENT-CENTERED IMPLICATIONS

AFFORDABILITY

Address affordability constraints

ACCESS

Improve healthcare accessibility

ADHERENCE

Strengthen treatment adherence

PRO

Use patient-reported outcomes

RWE + HEOR

Integrate RWE and HEOR approaches

CONCLUSION

The study highlights a substantial knowledge-practice gap among DD-CKD patients. Despite favorable awareness and attitudes, affordability constraints and healthcare accessibility barriers negatively affected treatment adherence and outcomes. Integrating patient-centered care, RWE, and HEOR approaches may improve equitable access, HRQoL, and long-term sustainability in CKD anemia management.

References:

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A substantial knowledge–practice gap was observed among DD-CKD patients. Affordability and healthcare accessibility barriers were important challenges, while treatment adherence showed a positive association with HRQoL.