

# The impact of chronic kidney disease and dialysis on caregivers' financial status and work productivity: Results from a multinational survey

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Patients with chronic kidney disease (CKD) are often reliant upon assistance from **informal caregivers**, such as family members<sup>1</sup>

The aim of this study was to measure the effect of CKD on caregiver financial health and work productivity on a **multinational scale**

Caregiving has been associated with substantial burden and **decreased psychological well-being**<sup>1</sup>

## CONCLUSION

By supporting those living with CKD, caregivers experience financial burden including through **reduced work productivity**, particularly when caring for those with advanced disease.

Policy interventions ought to **consider the burden of informal caregiving** when tackling the broad-ranging consequences of CKD.

## Introduction

- The burden of caregiving for patients with CKD can negatively impact health related quality of life (HRQoL), especially as patients progress towards end stage kidney disease and dialysis.
- However, there is a paucity of data surrounding the impact of CKD on caregivers' work productivity and financial well-being.

### Objective

To quantify the effect of CKD on caregivers' financial capacity and work productivity across five countries compared with the general population.

## Methods

- Unpaid caregivers of adult patients with CKD from Germany, Mexico, the US, UK and Taiwan were enrolled to a non-interventional survey measuring:

**Consumer financial protection bureau (CFPB) financial well-being assessment**

**Work productivity and activity impairment (WPAI) questionnaire**

- Scores were compared with a general population cohort, matched in sample size and demographic characteristics.

## Results

### Demographic characteristics

Table 1. Caregivers of patients with CKD demographic characteristics.

Enrolment (N)†	99	138	116	113	94
Dialysis status (%)	65%	65%	67%	81%	48%
Caring for (%)	Parent: 29–51 Partner: 29–44				
Care required (%)	Taking medications: 55–89 Transport to/from hospital appointments: 77–90				

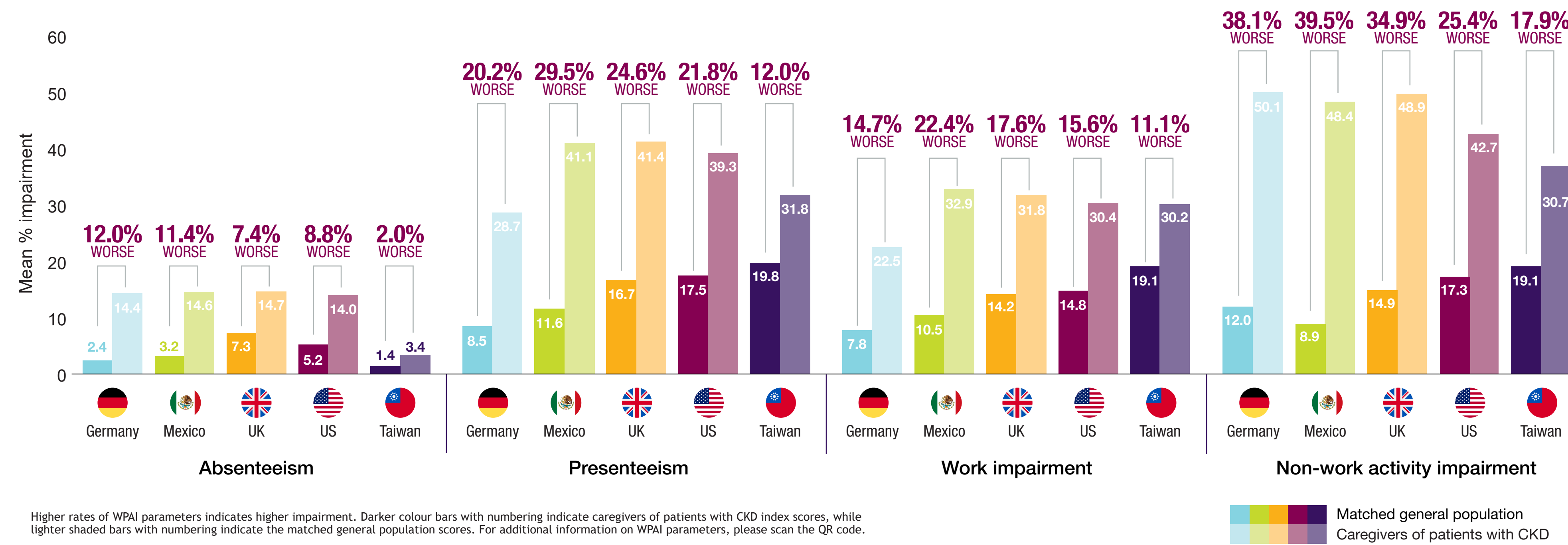
Ranges of caregivers across all five countries. †Refers to the percentage of caregivers caring for a patient with CKD who is receiving dialysis. The remaining proportion of caregivers included caring for a child, sibling or friend. Additional care required included collecting medication, household support, talking to healthcare professionals, emergency hospital visits, medical appointments, medication payment and emotional support.

Scan the QR code with your phone for additional information, supporting data and to download a copy of the poster

## Results (continued)

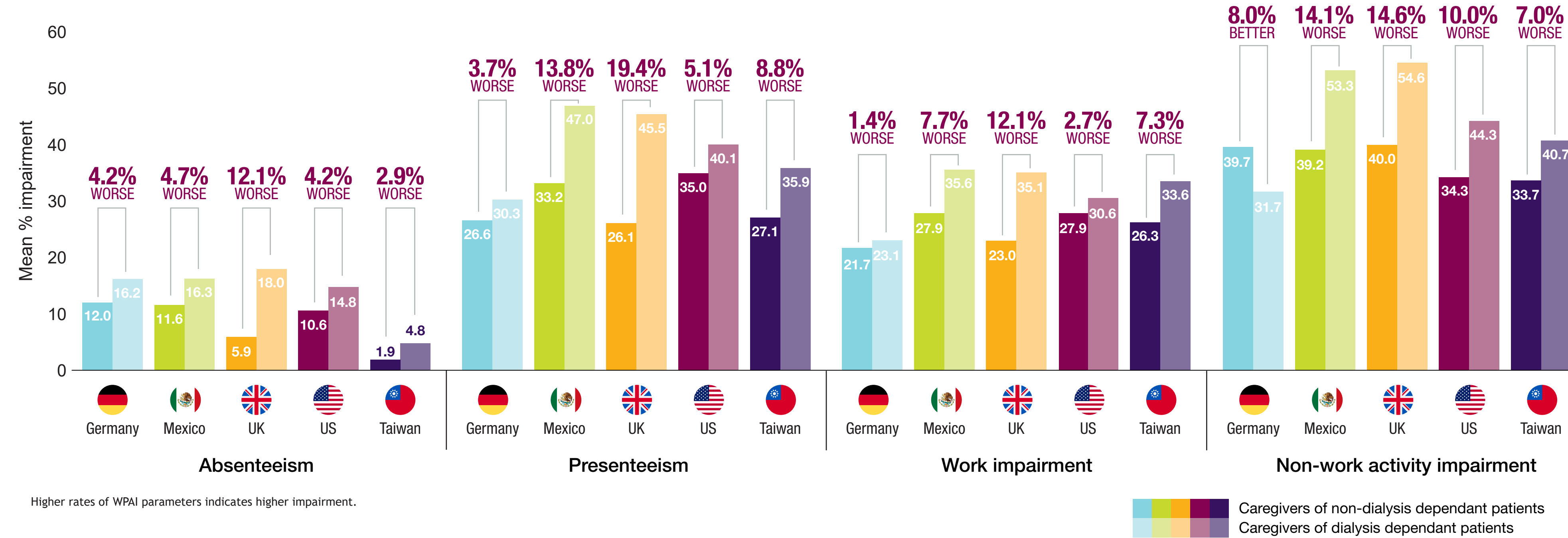
### Caregivers of patients with CKD have worse work productivity and impairment compared with the matched general population

Figure 1. WPAI scores of caregivers for patients with CKD versus a matched general population cohort. Outcomes are presented as % time lost due to absenteeism, presenteeism, work impairment and non-work activity impairment in each cohort.



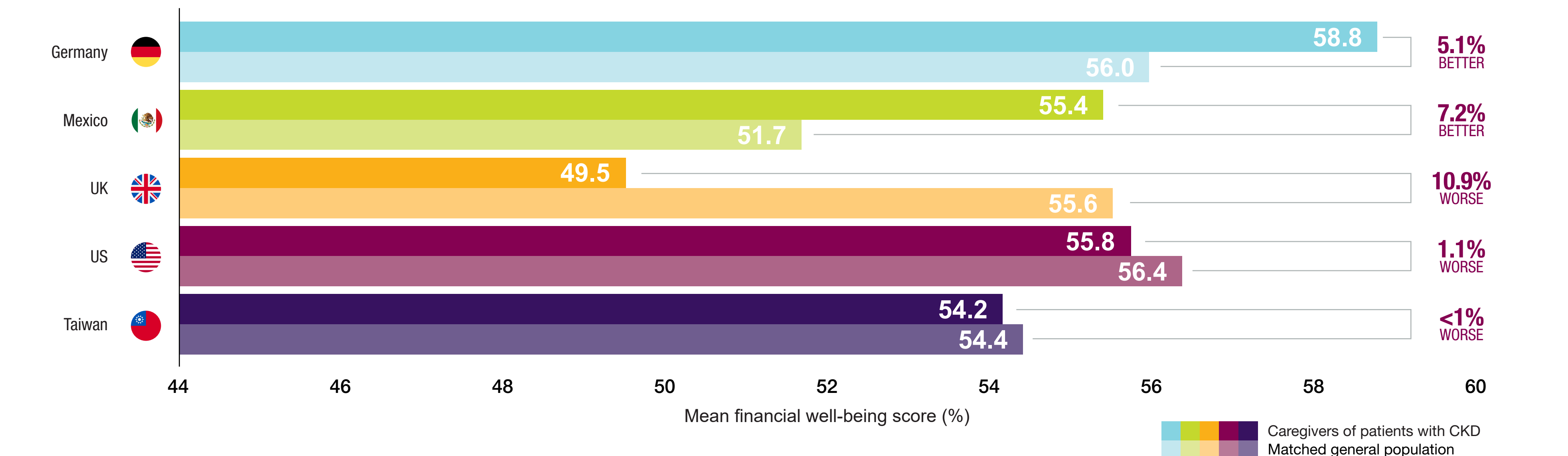
### Caregivers of patients receiving dialysis experience a deficit in productivity compared with caregivers of non-dialysis dependent patients

Figure 2. WPAI scores for caregivers of dialysis dependent patients compared with caregivers of non-dialysis dependent patients. Outcomes are presented as % time lost due to absenteeism, presenteeism, work impairment and non-work activity impairment in each cohort.



### Financial burden amongst caregivers of patients with CKD varies globally

Figure 3. CFPB scores in caregivers of patients with CKD compared with the matched general population, indicating financial burden. A lower number indicates higher financial burden. Outcomes are presented as % difference in financial burden between each cohort.



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## References

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