Mapping a Typical Health Journey for Indigenous Patients with Chronic Kidney Disease onto Dialysis

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Background

- Chronic kidney disease (CKD) is a continuous reduction in renal function[1].
- Becoming a public health concerns, significant burden of disease and premature death[1].
- CKD often goes untreated due to asymptomatic nature[2].
- Indigenous Australians are disproportionately affected[3]:
  - Incidence rate of 18 times higher in rural areas[3]
  - Aboriginal patients make >10% of new cases[3]
  - 4 fold increase in risk of death[3]

Gap, Aim & Hypothesis

Gap:

- Huge gap of knowledge translation into Aboriginal health practice despite extensive research.

Aim:

- Mapping a health journey of an Indigenous patient with CKD onset until dialysis – including it symptoms, various healthcare professionals accessed during their journey.

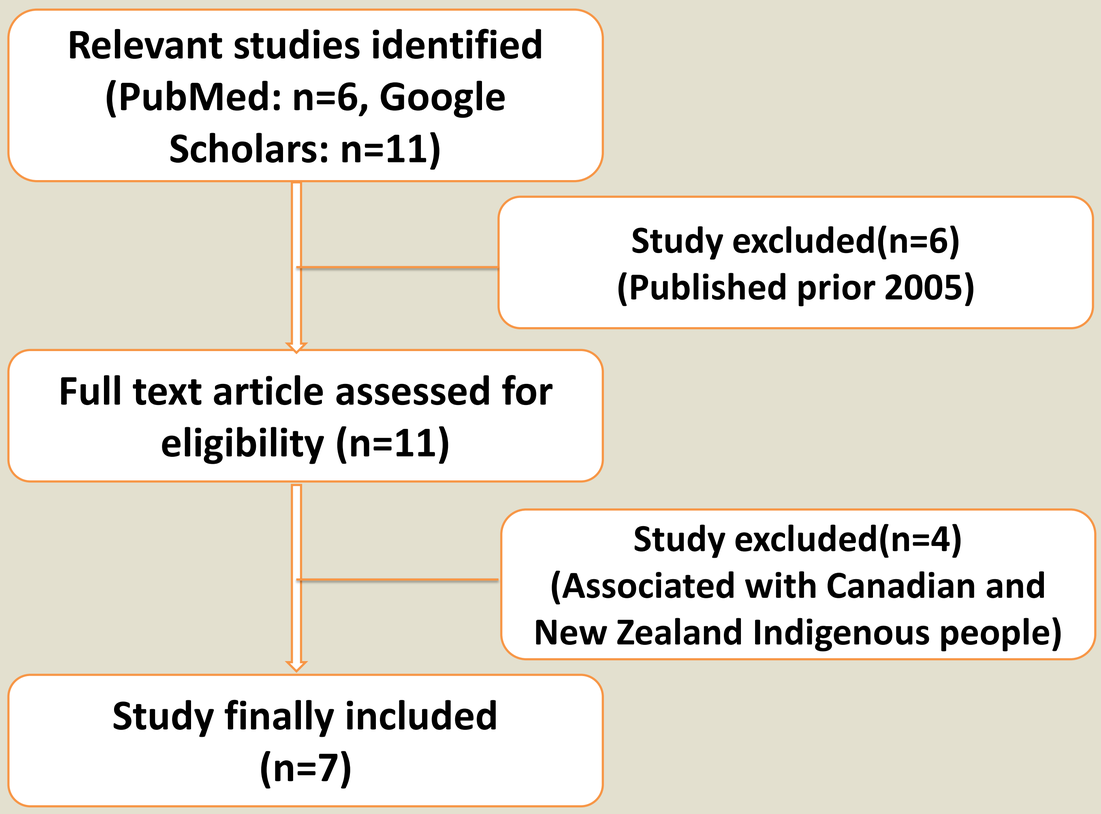
Hypothesis:

- The majority of Aboriginal patients with CKD are unaware of the health journey they will be taking once diagnosed.

Methods

- This study consist of Qualitative Research Approach
- The method constitute of a 3 step process:

1. **Literature and document review**
   - Searching PubMed & Google Scholar for relevant papers
   - Selection process



   - Grey literature review – provided by course supervisor.
2. **Map a typical health journey**
   - Information gathered from literature & document review
   - Ethics did not allow access to identifiable data or any form of direct communication with patients.
   - Therefore, representative journey map was only option.
3. **Validation of mapping by experts**
   - 2 Aboriginal Reference Group member (lived experience)
   - 2 Renal health professionals (Nephrologist, renal nurse)
   - Ensures the journey map is a true representation of an Aboriginal renal patient with CKD.

Results

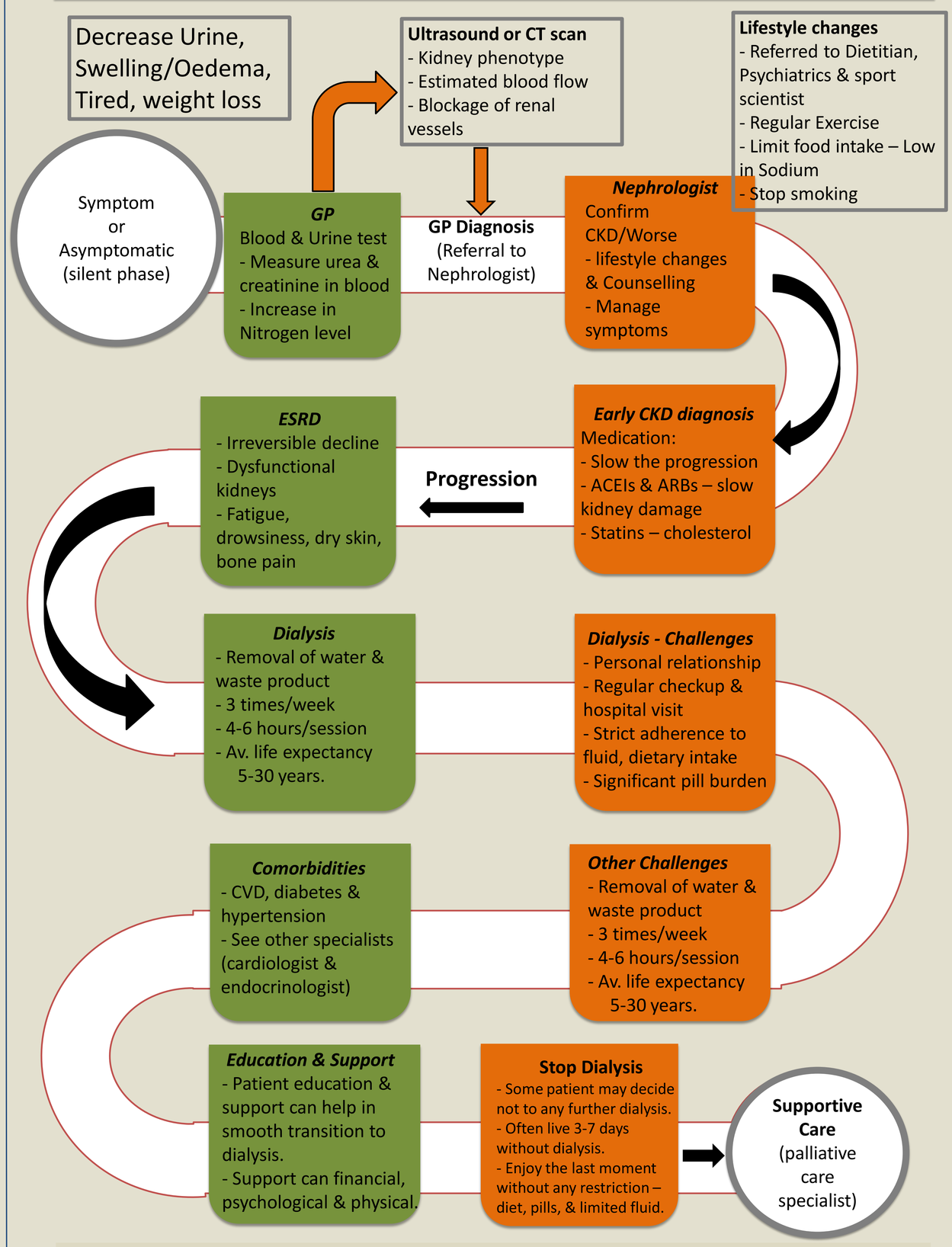


Figure 1: Health journey map of chronic kidney disease patients from diagnosis till dialysis and decision to chose palliative care.

Conclusions

- This mapping highlights challenges, treatment options and lifestyles alteration experienced by newly diagnosed Indigenous dialysis patients.
- It also forms the basis for future individualised mapping in clinical practice.
- However, people are diagnosed at different stages of their life and the disease, therefore, they may go through a different journey processes.
- This journey map has not taken into consideration medication cost, patient background (homeless, rural) and different priorities (children, work). Therefore, more future work is required in this area.
- This study increases the awareness of clinicians, thereby enabling a smoother transition for newly diagnosed Indigenous patients into dialysis

References

1. Gerrard and McDonald 2019, Improving access to and outcome of kidney transplantation for aboriginal and Torres Strait Islander people in Australia, *The Transplantation Society of ANZ*, 214-227
2. Dalrymple et al., 2011, Chronic kidney disease and risk of end-stage renal disease versus death, *Journal of General Internal Medicine*, 26, 379-386
3. Burns et al., 2015, Overview of Australian Indigenous health status, *Overview of Australian Indigenous Health Status*, 2014

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