

A STUDY TO ASSESS BURDEN AMONG CAREGIVERS OF PATIENTS UNDERGOING HEMODIALYSIS IN SELECTED TERTIARY HOSPITAL, MANGALURU

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ABSTRACT

Aims: Identify the level of burden among caregivers of patients undergoing hemodialysis. **Background:** Patients with hemodialysis for a longer period of time having an extended as well as most painful lifespan. The relatives of such patients are also undergone with the distress and unpleasant events in their life. When comparing with dialysis patient's caregivers are most affected in their dialysis process. It may be due to financial instability or may be due to distress.^[1] **Method:** A Descriptive study design was adopted in order to assess the level of burden among 93 caregivers of hemodialysis patients in selected hospitals at Mangaluru. Non-Probability Purposive Sampling Technique were used. Pilot study was conducted to find out the feasibility of the study. The tools used were demographic proforma and Zarit burden interview (standardized). Data collected from the subjects were analyzed by descriptive and inferential statistics. **Results:** The study findings revealed that 48.4% caregivers have mild to moderate burden. 26.9% have moderate to severe burden. 5.4% have no burden and 19.4% have severe burden. Caregiver mean burden is 42.21 and standard deviation is 14.3. There was an association between caregiver burden and selected demographic variables such as Care giver age, caregiver gender, availability of financial support, present illness of the caregiver and duration of illness of patient which is significant at $p < 0.05$. **Conclusion:** Research findings revealed that most of the caregivers of hemodialysis patients were having mild to moderate burden. **Implications for nursing:** Implications of this study have a great influence regarding the provision of comprehensive and holistic care not only to patients but also to the caregivers of the patients and the nurse act as a mediator for the care associated with the outcome.

KEYWORDS: Caregiver, Burden, hemodialysis.

INTRODUCTION

A caregiver is a volunteer or paid member of a person's social network who assists them with daily tasks.^[1] The stress that caregivers experience as a result of their home care scenario is referred to as caregiver burden. This subjective burden is one of the most important determinants of adverse outcomes in the care situation, both for caretakers and for those who need care.^[2]

Chronic renal failure is a deterioration of renal function in which the body's capacity to maintain electrolyte and metabolic balance is compromised, resulting in an increase in blood urea and its retention in the body. When the kidneys are unable to fulfill their function

owing to impairment, dialysis is used to remove excess fluids and wastes.^[1]

Many individuals with chronic renal failure have lived longer due to advances in knowledge and treatment technology, as well as an increase in life expectancy. Chronic disease has been identified as a major health issue all over the world.

According to statistics, one out of every ten people in the general population has a chronic renal disease. Every year, over 175,000 additional persons in India develop renal failure (stage V CKD), necessitating dialysis or kidney transplantation.^[3] Chronic renal failure is a

chronic disease that has a variety of consequences on the patient's physiological, psychological, functional abilities, lifestyle changes, and independence status due to the disease's persistence and extended treatment process. Chronic Kidney Disease (CKD) is a global hazard to health in general, and to developing nations in particular, because therapy is costly and life-long, and the burden of family caregivers has bad repercussions not just for themselves, but also for patients, other family members, and the health-care system. Family caregivers provide crucial and necessary support to chronically ill patients. Physical and psychological stress associated with long-term caregiving, on the other hand, may have an impact on caregivers' well-being and quality of life. Patients who have been on hemodialysis for a long time have a longer and more miserable lifespan. The distress and unpleasant occurrences in the lives of such patients' family are also experienced by them. When compared to dialysis patients, caregivers are the ones that suffer the most during the dialysis process. It might be the result of financial insecurity or distress.^[4]

A descriptive study of burden among caregivers of hemodialysis patients was undertaken in a tertiary hospital in Andhra Pradesh. For this study, 100 samples are collected. The study used the Zarit burden interview questionnaire and a demographic checklist as a tool. According to the findings, majority of caregivers (85%) expressed mild to moderate burden. Male caregivers had a greater mean burden score than female caregivers (34.31 3.30 vs. 30.42 6.05, $P < 0.05$). There was a statistically significant association between overall burden score and male caregivers. This suggests that, in order to alleviate the load on male care givers, more

attention should be devoted to them.^[5] Caregivers are usually ignored, with the main focus being on the patient. Patient depression may worsen as a result of frequent hospitalizations and other disease-related.

MATERIALS AND METHODS

A descriptive study was conducted among caregivers of patients undergoing hemodialysis in a selected tertiary care hospital, Mangaluru, Karnataka, India. The Institutional Ethics Committee approval was obtained (YEC2/292 on 17/03/2020). The study extended for a duration of one year and the data collection period was one month.

Inclusion criteria

- Both male and female caregivers
- Primary caregivers like parents, spouse, child, siblings.

Exclusion criteria

- Caregivers of patients with acute illness issues, and caregivers quality of life may suffer. As a result, assessing the status of caregivers and determining their needs are critical.
- Caregivers below 18yrs of age
- Paid caregivers

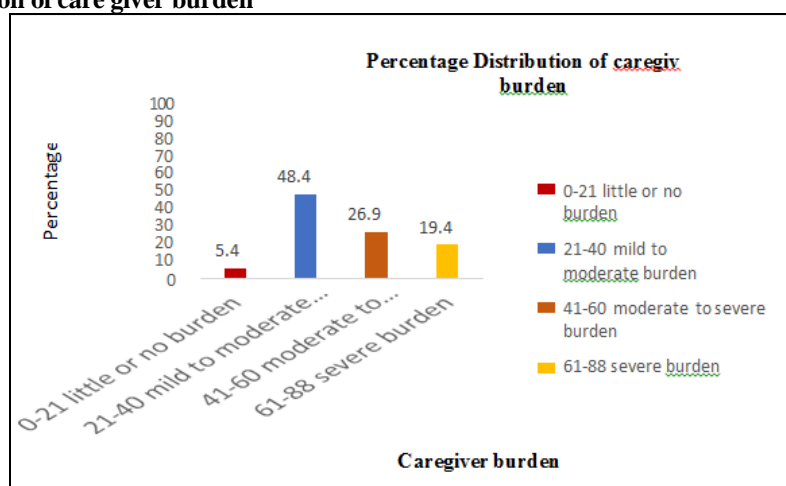
STATISTICAL ANALYSIS

The data were analyzed by descriptive and inferential statistics using SPSS version 23.0. chi square test was used to assess the association between caregiver burden and demographic data.

RESULTS

SECTION 1

Percentage distribution of care giver burden



SECTION 2

Percentage distribution of demographic data

The study revealed that distribution of caregivers of patients undergoing hemodialysis according to the age showed that majority of the caregivers (71%) belongs to

18- 48 years and (29.1%) caregivers belong to 49 or more. Caregivers of patients undergoing hemodialysis according to the level of education revealed that 33.3% were completed primary education, 20.4% had no formal education, 23.7% had secondary education and

10.8% completed higher secondary education, 11.9% subjects had higher education. Distribution of caregivers of patients undergoing hemodialysis according to gender revealed that majority of the caregivers (72%) were females and (28%) were males.

Majority of the caregivers (82.8%) were married and (17.2%) were single. Majority of the caregivers (69.9%) were unemployed and (30.1%) were employed. Regarding relationship with patients, Majority of the caregivers (62.4%) were spouses and (19.4%) were parents, 9.7% were belongs to child of the patient and 8.6% caregivers of patient were siblings. In that Majority of the caregivers (79.6%) had no history of present illness and 20.4% had history of present illness.

Demographic data of the patients revealed that patient undergoing hemodialysis according to the age showed that 32.3% of patients were belong to more than 58 years. 25.8% were belong to the age group of 49-58 and 42% were below 48years. Majority of the patients (83.9%) were males and (16.1%) are females. Majority of the patients (82.8%) are not getting any financial support. 17.2% are getting financial support. Majority of the patients (91.4%) were married and (8.6%) were single.

According to job status, majority of the patients (88.2%) were unemployed and (11.8%) were employed. Majority of the patients (57%) were hypertensive, 24.7% having diabetes mellitus. 16.1% had other type of comorbidities. Only 2.2% had no comorbid conditions. Patients according to their habits, majority of the patients (75.3%) had no bad habits. 15.1% were chain smokers. Habit of alcoholism seen in 5.4% of the samples. 4.3% had habit of tobacco chewing. Majority of the patients (53.7%) were above 4 years duration of illness, 23.7% had 2-4years duration of illness. Majority of the patients (61.3%) undergone dialysis more than twice in a week. 37.6% had dialysis twice in a week. Only 1.1% have once in a week dialysis section. Burden among caregivers of patients undergoing hemodialysis revealed that 48.4% caregivers had mild to moderate burden. 26.9% had moderate to severe burden. 5.4% had no burden and 19.4% had severe burden.

SECTION 3

Association between caregiver burden and selected demographic data

In the present study revealed that 48.4% caregivers have mild to moderate burden. 26.9% have moderate to severe burden. 5.4% have no burden and 19.4% have severe burden. There is an association between caregiver age

$\chi^2 = 8.871$, caregiver gender

$\chi^2 = 0.030$, present illness

$\chi^2 = 0.008$, availability of financial support

$\chi^2 = 0.004$, duration of illness of patient

$\chi^2 = 0.034$.

DISCUSSION

In the present study revealed that 48.4% caregivers have mild to moderate burden. 26.9% have moderate to severe burden. 5.4% have no burden and 19.4% have severe burden. This study was supported by the study done by N. Subhashini and Dr. Arumugam Indira who reported that, 14% had little burden 67% had mild burden and remains 19% had moderate burden.^[4,6]

The present study finding showed that that there is an association between caregiver burden and selected demographic variables such as Care giver age, caregiver gender, availability of financial support, present illness of the caregiver and duration of illness of patient. Findings of the present study are consistent with another study conducted in Nepal to assess the burden and depression among caregivers of hemodialysis patients. Study revealed that burden increased with increasing age, decreasing education and decreasing social support. Marital status, socioeconomic status and relationship to patient.^[7]

LIMITATIONS

- The study is limited to adult and primary caregivers of hemodialysis patient in selected tertiary hospital, Mangaluru.
- The study is limited to 3-4 weeks of data collection.
- Levels of burden are elicited only with the response against the standardized questionnaire, no further attempts have been made to confirm the level of burden.

CONCLUSION

Patients on hemodialysis acquire a variety of different health problems, and continuous hemodialysis can lead to severe depression. It will also reflect on the caretakers, who may be unable to adjust to the patients at times. Implications of this study assessing the level of burden among the caregivers of patients undergoing hemodialysis have a great influence regarding the provision of care. Educating the staff nurses and nursing students, regarding the problems which, the caregivers of hemodialysis patients are going through and enabling them to assist the patients in maintaining the health.^[22] Special classes and in-service education programs should be conducted which will help the staff nurses to update their knowledge.

Holistic approach should be used to care the patient as well as the family. Effective communication between the caregivers and health professionals such as doctors and nurse will help to modify the behavior and thus reduce the burden among caregivers of patients undergoing hemodialysis.^[23]

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DECLARATION

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Ethical approval: As per international standard or university standard guideline participant consent and ethical approval has been collected and preserved by the authors.

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