

In-Center Hemodialysis Experiences Among Latinx Adults: A Qualitative Study

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Background

-Undocumented immigrants cannot receive federal insurance, and in some states, they rely on emergency only hemodialysis, which is associated with a 14 times higher mortality rate at 5 years¹, and significant burden on patients², their caregivers³, and clinicians⁴.
-Colorado law allows undocumented immigrants to receive in-center or home dialysis under emergency Medicaid.
-The objective of our study was to understand the drivers of sustained in-center dialysis and deterrents of switching to home dialysis use for Latinx individuals receiving in-center dialysis.

Methods

-Eligible patients were Latinx adults receiving in-center hemodialysis therapy at 2 urban dialysis clinics in Denver, Colorado between November 2021 and March 2023.
-30-60 minute semi-structured interviews were conducted, transcribed and de-identified for thematic analysis.
-Thematic analysis via inductive coding by two coders was conducted utilizing atlas.ti v9.

Works Cited

1. Cervantes L et al. Association of Emergency-Only and In-Center Hemodialysis With Mortality and Health Care Use Among Undocumented Immigrants With End-Stage Kidney Disease. *JAMA*. 179(18):190-195, 2017
2. Cervantes L et al. The Burden of Emergency-Only Hemodialysis on Undocumented Immigrants. *JAMA Intern Med*. 177(5):529-535, 2017
3. Cervantes L et al. The Experience of Primary Care Providers of Undocumented Immigrants with End-Stage Kidney Disease that Rely on Emergency-Only Hemodialysis. *AGIM Online Ahead of Print*, 2020
4. Cervantes L et al. Clinician Perspectives on Providing Emergency-Only Hemodialysis to Undocumented Immigrants: a qualitative study. *Annals of Internal Medicine*. 169(7):85-90, 2018

Drivers of sustained in-center dialysis use

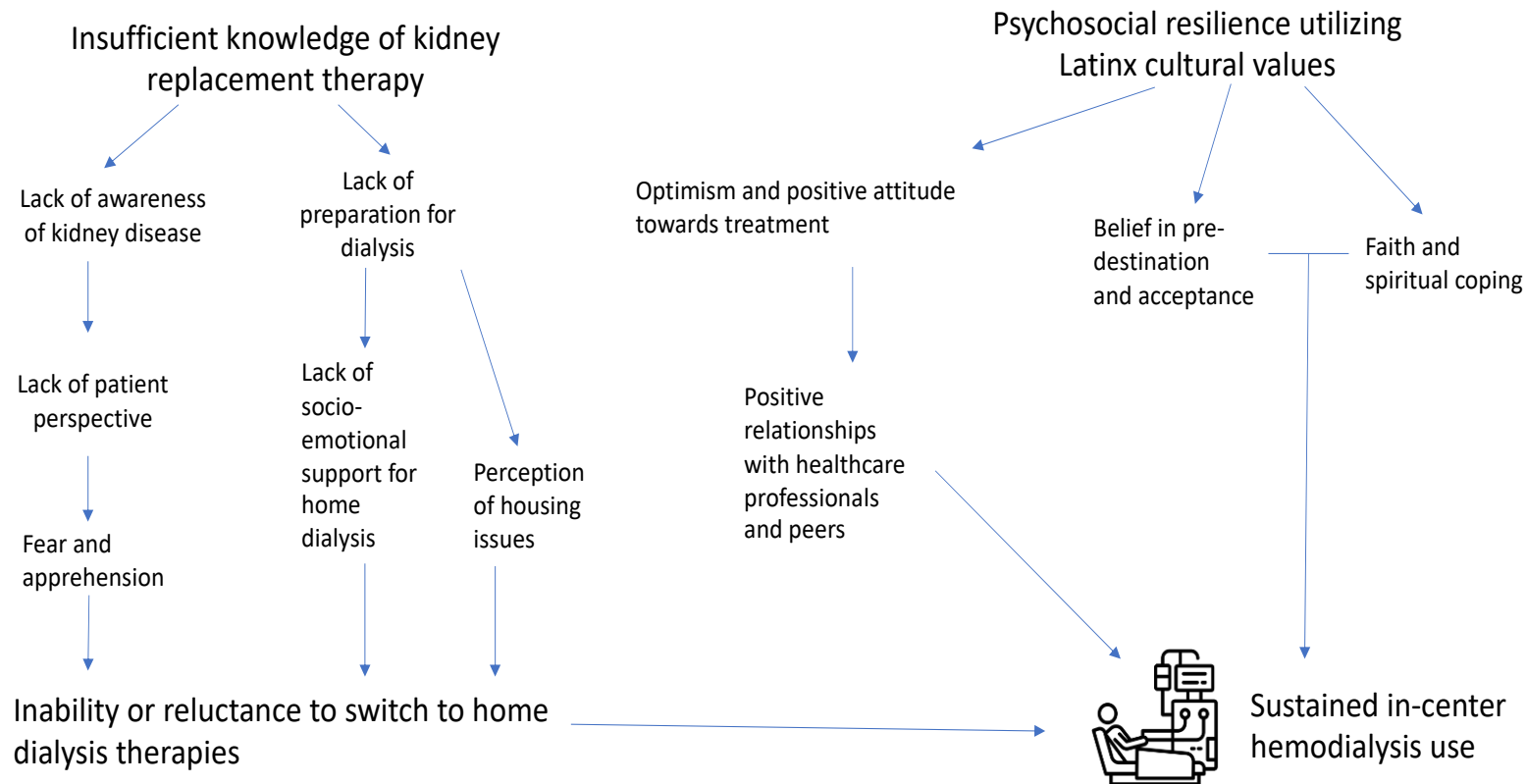


Figure. Thematic schema illustrating deterrents of switching to in-center hemodialysis and drivers of in-center hemodialysis use for Latinx individuals with kidney failure receiving in-center hemodialysis.

Results

-25 patients were interviewed : 10 (40%) were female, 15 (60%) were male
-Latinx individuals experienced hardship with in-center dialysis but used Latinx values to persevere: Psychosocial resilience using Latinx cultural values (faith and spiritual coping, belief in predestination and acceptance, optimism and positive attitude toward treatment, and positive relationships with health care professionals and peers).
-Two themes illustrate barriers to starting or switching to home dialysis: Insufficient knowledge of kidney replacement therapy (lack of awareness of kidney disease, lack of preparation for dialysis) and Barriers to patient-centered decision making in dialysis treatment (lack of peer perspective to guide dialysis decision making, fear and apprehension of home dialysis, lack of socioemotional support, perception of housing issues).
- Themes and subthemes are described in Figure.

Conclusion

Understanding the drivers of sustained in-center hemodialysis use for Latinx individuals is important for future efforts at improving patient-centered education, framing conversations around modality choice, and care for this population

Disclosures

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