

LEARNING RESOURCE FOR WATER CONTROL TO ENHANCE HEMODIALYSIS PATIENTS' COMPLIANCE

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Background: Two parameters for assessment compliance in HD patients are interdialytic weight gain (IWG) and absences, both influenced by psychological and nutritional aspects.

Objective: Achieve greater compliance by using Water Control Dynamic (Bucket Dynamic - BD) to clarify risks of excessive IWG.

Method: BD was performed during HD session by nutritionist and psychologist in 48 HD patients to show that HD doesn't eliminate fluids as a healthy kidney. Two buckets (B) are presented; one filled with water (B1) another empty (B2). Professional holds an 250 mL glass (represents fluids someone ingests), the other holds a 50 mL glass (represents HD fluid removal capacity). The 250 mL glass, one professional takes water from B1 and places it in the B2. Meanwhile, the other uses the 50 mL glass to take water from B2. This analogy demonstrates that HD doesn't remove all liquid someone can drink. Hence, water intake control necessity. Nutritionist clarifies patients' nutritional concerns, while the psychologist addresses emotional issues. We compared percentage of IWG and absences in two months before and after BD.

Results: After BD, we observed decreases in absences (7,2% X 5,7%) $p < 0,05$ and IWG (4,9 % X 4.1%) $p < 0,05$. IWG was within recommended levels (3.5% to 5% of dry weight) before and after BD, but, before BD, IWG was at the upper limit of the recommendation.

Conclusion: We believe this experience fostered self-control, resulting in better compliance, and allowed us to benefit from an innovative work interaction between health professionals from different areas.