

Illness Representations and Coping Processes of Taiwanese Patients With Early-Stage Chronic Kidney Disease

Chiu-Chu Lin¹ • Mei-Chun Chen² • Hsiu-Fang Hsieh³ • Shu-Chen Chang^{4*}

¹PhD, RN, Associate Professor, College of Nursing, Kaohsiung Medical University • ²PhD, RN, Assistant Professor, National Tainan Institute of Nursing • ³PhD, RN, Associate Professor, College of Nursing, FooYin University •

⁴MSN, RN, Director, Department of Nursing, Changhua Christian Hospital, and Doctoral Candidate, College of Nursing, Kaohsiung Medical University.

ABSTRACT

Background: Chronic kidney disease (CKD) is a public health problem worldwide with an increasing incidence and prevalence and high cost. The role of illness perceptions in understanding health-related behavior has received little attention in patients with early-stage CKD.

Purpose: This qualitative study aimed to describe the illness representation and coping process experience of patients with early-stage CKD in Taiwan.

Methods: A qualitative content analysis approach was used to analyze semistructured, open-ended, one-on-one interviews with 15 patients with early-stage CKD. Purposive sampling was used to recruit patients diagnosed with early-stage CKD from the nephrology departments of two medical centers in Taiwan. Trustworthiness of the study was evaluated using four criteria suggested by Lincoln and Guba.

Results: Six themes emerged from the analysis: experiencing early symptoms, self-interpreting the causes of having CKD, realizing CKD as a long-term disease, believing CKD could be controlled by following doctors' orders, anticipating the consequences of having CKD, and adopting coping strategies to delay the progress of CKD.

Conclusions/Implications for Practice: Findings from this study compared with previous studies reveal that education can effectively change patient illness representations as an approach to improve coping behavior. This finding offers healthcare professionals insight into the health education necessary to assess patient illness representation to provide culturally sensitive interventions.

KEY WORDS:

chronic kidney disease, coping, illness representation, qualitative study.

ing prevalence and high costs (Levey et al., 2009). The result of a systematic review including 26 studies found the prevalence of CKD around the world to be high, especially among Caucasians, Chinese, and Japanese populations (20.4%–49.9%; Zhang & Rothenbacher, 2008). In the United States, CKD has increased 20%–25% during the last decade (U.S. Renal Data System, 2009). The incidence and prevalence rate of end-stage renal disease (ESRD) in Taiwan has risen to become the highest in the world (U.S. Renal Data System, 2009). CKD is a progressive chronic disease divided into five stages. Untreated CKD can progress to ESRD, requiring lifelong dialysis or kidney transplantation. In 2007, 61,866 dialysis patients in Taiwan accounted for 0.26% of the total insured population, but their medical expenses for dialysis treatment consumed 8% of total insured expenditures (Bureau of National Health Insurance, Taiwan, ROC, 2008). Thus, CKD has become a public health epidemic and a financial burden on healthcare systems.

In traditional Chinese culture, kidney disease is often perceived as punishment for sins committed in previous lives (i.e., karma) and a source of male impotence. Thus, patients with CKD often experience social stigma (Lin, Lee, & Hicks, 2005) that is greater than most other diseases. Often, patients are unwilling to accept a CKD diagnosis and will seek alternative treatments through herbal medicine, folk remedies, and secret treatments introduced by others (Lin et al., 2005). Denial and additional treatment-seeking behaviors are because of fear of stigmatization. Patients with CKD often struggle to accept and adjust to their disease (Lin et al., 2005). Obviously, patients' behaviors toward treatment relate closely to their interpretation of their disease

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*Address correspondence to: Shu-Chen Chang, No. 135, Nan-Hsiao St., Changhua City 50006, Taiwan, ROC.

Tel: +886 (4) 723-8595 ext. 4211; Fax: +886 (4) 723-2942;

E-mail: 53098@cch.org.tw

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Introduction

Chronic kidney disease (CKD) is increasingly recognized as an emerging worldwide public health problem with increas-