

## Sociodemographic Characteristics of Chronic Kidney Disease in “Mother Teresa” Hospital Tirane during March-April 2014



### Healthcare

**Keywords:** Chronic Kidney Disease, sociodemographic characteristics, QSUT, average age, sex, age.

<b>Rajmonda Bara</b>	<b>Faculty of Technical Medical Sciences, University of Medicine Tirana, Albania.</b>
<b>Admir Nake</b>	<b>Faculty of Technical Medical Sciences, University of Medicine Tirana, Albania.</b>
<b>Albana Poloska</b>	<b>Faculty of Technical Medical Sciences, University of Medicine Tirana, Albania.</b>
<b>Aida Lako</b>	<b>“Aleksander Moisiu” University of Durrës, Albania.</b>

### Abstract

**Introduction:** Chronic Kidney Disease is a progressive loss in renal function that is worsening into full malfunction of kidney ability to eliminate toxic substances out of organism that is followed by an increase of creatinine and azotemia values. **Aim:** Aim is to value sociodemographic characteristics in different ages between March and April 2014 that effects the prevalence of chronic renal disease. **Methodology:** The study is an retrospective describing type, taken between March and April 2014, in this study were included data from cartels of the nephrology ward in “Mother Teresa” Hospital Tirane. **Result:** In study were involved a total of 126 individuals from that 71 (56.35%) male with average age 52.74+29.82 years old and 55 (43.65%) female with average age 51.01+28.99 years old. The most affected age in males was 51-60 with 47.27% diagnosed whereas the age with lowest was over 80 years old with 4.22%. While the most affected age in female was 51-60 with 40.84% diagnosed whereas the age with lowest was over 80 years old with 3.63%. **Conclusion:** Chronic Kidney Disease has a significant impact on individuals and to all society in general, it is important to prevent through the change in the way of live, to modify risk factors and to sensibilise population on this risk factors like arterial hypertension or diabetes mellitus.

### Introduction

Chronic renal failure implies a chronic and progressive damage to kidney impairment, which develops slowly and secretly what brings you sick often diagnosed at an advanced stage of the disease. In a considerable number of cases it is not possible to determine who is the cause of this disease. A person may have kidney damage more years before it needed renal replacement therapy beginning with dialysis or transplantation. At higher risk to develop this disease are certain groups of individuals such as those suffering from diabetes, arterial hypertension, or persons who have a family member who has previously suffered from this disease.

### Causes of chronic renal failure

- Recurrent urinary infections
- Diabetes mellitus
- Arterial hypertension
- Stones and blocking of them wore urinary
- Lupus and other diseases of the immune system
- Inherited diseases such as polycystic kidney
- Glomerulonephritis

### Clinical signs

- Physical weakness
- Lack of concentration
- Lack of appetite
- Insomnia
- Edema of the legs and around the eyes, especially in the morning
- Drying of the skin and itching
- Thirst
- Frequent urination, especially at night

**Diagnosis**

- Measurement of arterial blood Pressure
- Analysis of urine
- Complete blood test
- Blood test to measure the level of kreatinemise
- Measurement of glomerular filtracionit (GFR) that shows the level of kidney function
- Ultrasound of the urinary tract

Stage	Damage	GFR(ml.min)
1	Kidney damage with normal GFR	Over 90
2	Kidney damage with mild decrease in GFR	60-89
3	moderate reduction of GFR	30-59
4	pronounced decrease of GFR	15-29
5	renal insufficiency	Article 15(dialysis or transplantation)

**2.Material and methods**

*The population under study:*

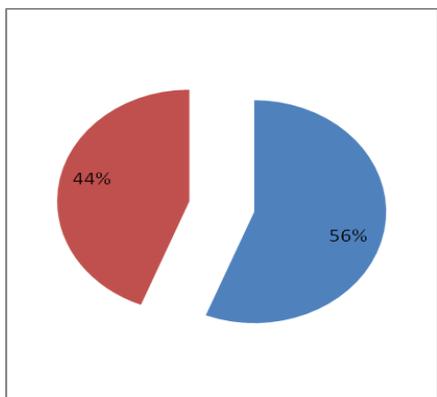
This is a retrospective descriptive study conducted in nephrology ward of the University Hospital Center "Mother Teresa" in the time period March-April 2014, including 126 individuals aged over 18 years old.

*Data collection:*

Data collection was made by the nephrology ward cards TUHC based on demographic factors for this disease. Factors included basic demographic age, gender,, residence, .. Information regarding age was categorized in 7 categories: 20-30 years old, 31-40 years, 41-50 years, 51-60 years, 61-70 years, 71- 80 years old,> 80 years old, .Information linked to employment status was categorized into four categories, employed, unemployed , student or retired, the information related to gender was categorized in two categories: .men and women related information while the average age of the population in the study were also categorized into two categories male and female.

**3.Result**

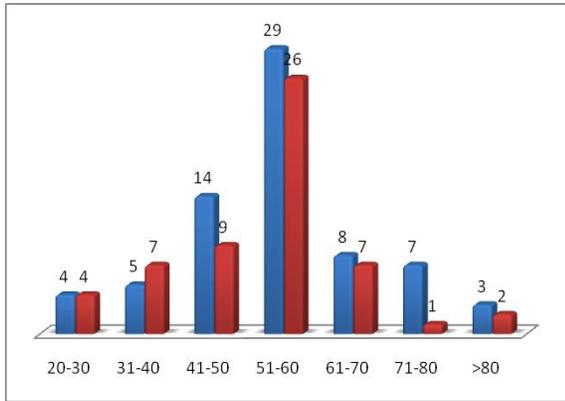
Information regarding the average age of the study population respectively for males was 52.74 + 29.82 years for females and 51.01 + 28.99 years. Informacioni regarding gender was respectively for males 71 (56.35%) compared with 55 women (43.65%)



**Graphic.1.Distribution the population under study by gender**

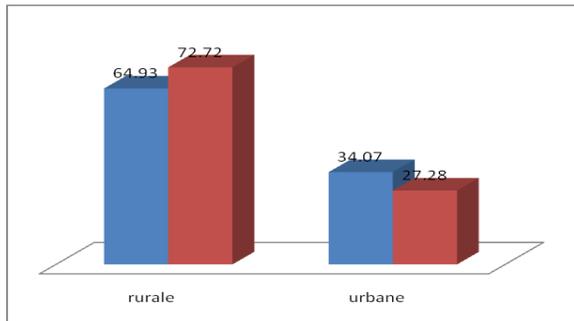
Population In the study were grouped according to age group as follows: 20-30 years old, 31-40 years old .41-50 years old,51-60 years old,61-70 years old, 71-80 years old, > 80 years old.Graphic 2 gives us distribution of the study population according to age group and gender.Age with affected males 51-60 years old was she with 47.27% of cases compared with women with the affected age group was 51-60 years old it with 40.84% of the cases. On the other hand it was clear that people over 80 years old males were 4.22% and 3.63% were women.

Age	20-30	31-40	41-50	51-60	61-70	71-80	>80
Men	4	5	14	29	8	7	3
Women	4	7	9	26	7	1	2



**Graphic.2. The distribution of the study population according to age group and gender**

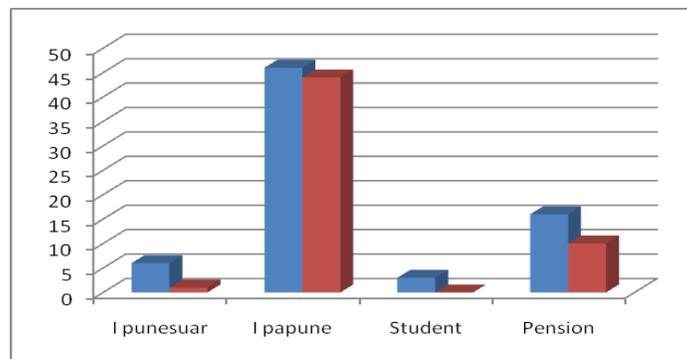
Information regarding the residence of categorized in two categories: rural and urban areas related to gender was respectively for males in rural areas 50 (64.93%) compared to urban areas 21 (34.07) while for women in rural areas 40 (72.72%) compared to urban areas 15 (27.28%) was observed an increase in the number of persons with chronic renal failure in rural areas due to lack of information about this disease and a lack of health care or informing of these persons with regard to the consequences to the disease in various organs and systems of the body.



**Graphic.3. The distribution of population in the study by Residence**

Information regarding employment status was categorized into four categories according to gender. In the first category for male employees were employed 6 (8:45%), unemployed 46 (64.78%) was categorized student 3 (22.4%) was categorized retired 16 (22:53%) while women employed 1 (1.81%) was categorized unemployed 44 (80%) Student 0 (0%). retired 10 (18:18%).

	employes	unemployed	student	retired
Men	6	46	3	16
Women	1	44	0	10



**Graphic.4. The distribution of population in the study by employment status**

**4. Conclusions**

The study conclusion was reached that the prevalence of chronic renal failure is higher in males compared to females. In our study was confirmed a strong statistical correlation between age and cases affected by this disease. The number of people affected by renal failure chronic is always growing and this is related to negligence of persons to control it regularly and information to care in our country is scarce. Insuficienca has a significant impact on individuals and society as a whole and in the management of patients there is only needed drug treatment, proper care while performing dialysis but a great work to be done in the patient's health education consisting of changes in lifestyle and risk reduction factors. It is important prevention through lifestyle change modification Risk factors and sensitizing the population on these factors the risk.

## 5. Recommendations

- Control of high blood Pressure
- Keeping the recommended levels of blood sugar
- Reducing the amount of protein in the diet
- Maintain normal levels of blood fats
- The treatment of complications

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