

Commentary: A Scale Development Study: Hemodialysis Comfort Scale-Version II

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Haemodialysis continues to be a growing part of healthcare provision with numbers of those receiving this treatment increasing worldwide year on year (Himmelfarb et al 2020). For patients with end-stage kidney failure, haemodialysis continues to be a lifesaving treatment option, accessible across the world for patients who await, or are not eligible for, kidney transplant.

Those working within haemodialysis areas will need no persuasion that exploring and evaluating patient experience is a key element for those who care for these patients. The 12 plus hours which patients can spend every week receiving dialysis is a large part of their time and life, and ensuring comfort during this time is an obvious part of their care. The evaluation of scales and questionnaires like the Hemodialysis Comfort Scale Version II to support the measurement and evaluation of comfort experienced by this population is a welcome addition to the research base. From exploring patient experience of dialysis through my own PhD research (Wood 2017), comfort and being comfortable was a key element of the dialysis experience and should not be devalued.

Care and experience for some patients has been altered due to the current COVID-19 pandemic, with systems and processes adapting to support infection control processes over more patient-centred options. Exploring and measuring the experience of haemodialysis patients is a key part of this treatment option to allow progression of the modality and patient care as we move forward from the pandemic.

Recent research considering the use of arts based intervention during dialysis (Carswell et al 2021) also provides more opportunities which could impact patient comfort and experience as well as quality of life outwith the dialysis unit. Whereas exercise during dialysis has also been explored without suggesting any direct correlation to improving quality of life (Greenwood et al 2021).

As research develops and supports the progression of treatment, the provision of comfort during treatment should not be forgotten. Considering ways in which a patient's dialysis treatment can be improved requires constant consideration for healthcare professionals and service provision. Haemodialysis is life-saving treatment and becomes a key part of a patient's life – any opportunities for improving their experience and treatment can only be beneficial.

References

Himmelfarb, J., Vanholder, R., Mehrotra, R. *et al.* The current and future landscape of dialysis. *Nat Rev Nephrol* **16**, 573–585 (2020). <https://doi.org/10.1038/s41581-020-0315-4>

Carswell C, Reid J, Walsh I, McAneney H, Baxley Lee J & Noble H (2021) Complex arts-based interventions for patients receiving haemodialysis: A realist review, *Arts & Health*, 13:2, 107-133, DOI: [10.1080/17533015.2020.1744173](https://doi.org/10.1080/17533015.2020.1744173)

Wood, A. F. (2017) *Patients' and Nursing Staff Perceptions and Experiences of Direct Patient Care: an ethnographic study in a haemodialysis unit* (unpublished PhD thesis) University of Edinburgh, Edinburgh,

Greenwood SA, Koufaki P, Macdonald JH, Bulley C, Bhandari S, Burton JO, et al. Exercise programme to improve quality of life for patients with end-stage kidney disease receiving haemodialysis: the PEDAL RCT. *Health Technol Assess* 2021;25(40).