



THE RELATIONSHIP BETWEEN SELF-ESTEEM LEVEL AND QUALITY OF LIFE OF PATIENTS CHRONIC RENAL FAILURE PATIENTS UNDERGOING HEMODIALYSIS: A STUDY LITERATURE REVIEW

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Abstrak

Chronic renal failure (CKD) is a global health issue. Patients with renal failure will generally undergo renal replacement therapy which may affect their quality of life. Several studies have shown that patients with chronic renal failure who undergo dialysis will experience a decrease in quality of life. Therefore, it is important to study the factors associated with self-esteem and quality of life of chronic renal failure patients undergoing hemodialysis. The aim is to determine the relationship between self-esteem and quality of life with chronic renal failure patients undergoing hemodialysis. The research method used was a search of several databases, namely PubMed, Google Scholar and Science Direct and a review of several studies that fit the inclusion and exclusion criteria. The result is that there is a significant relationship between self-esteem and the quality of life of chronic renal failure patients undergoing hemodialysis. Based on the analysis of the eight research articles reviewed, it can be concluded that there is a significant relationship between self-esteem and the quality of life of chronic renal failure patients undergoing hemodialysis.

Keywords: Chronic Renal Failure, Self Esteem, Quality of Life

Introduction

Chronic renal failure (CKD) is a disease with high mortality and morbidity. The prevalence of CKD is increasing as risk factors increase, so more and more patients are now undergoing dialysis therapy, especially hemodialysis. Quality of life is a state where a person gets satisfaction and enjoyment in daily life. Quality of life involves physical health and mental health, which means that if a person is physically and mentally healthy then that person achieves satisfaction in life. Also known as end stage renal disease (ESRD), the incidence of ESRD is very high, in the United States reaching 8% per year over the past 5 years, of which 300,000 patients require hospitalization (Diyono & Mulyanti, 2019). Chronic renal failure occurs when the kidneys can no longer maintain a stable internal environment for life and recovery of function does not occur. In many people, the transition from health to a chronic condition or a persistent disease takes place very slowly and takes several years (Haryono, 2013). Basic Health Research data in 2018 showed that in the population aged ≥ 15 years who were diagnosed with chronic kidney failure by a doctor, men reached 4.17%, higher than women who experienced 3.52%. The prevalence in rural areas (3.84%) was similar to that in urban areas (3.85%). Prevalence tends to increase with age, with the highest peak in the 65-74 years age range at 8.23%. The province with the highest prevalence of people with chronic kidney failure who have undergone or are

currently undergoing dialysis is DKI Jakarta, reaching 38.7%, while the lowest is North Sulawesi with 2% (Kemenkes RI, 2018). Chronic renal failure is one type of terminal disease (which threatens survival). When a patient is diagnosed with a life-threatening disease, the patient's psychological reaction is similar to someone who has experienced a major loss (e.g. amputation, divorce, or loss of a family member). Their reactions vary from disbelief, denial, anxiety, hopelessness, insomnia with impaired concentration, anger, guilt, sadness, depression, to impaired activity. Other psychological conditions found include feelings of loss, fear, regret for actions, loss of self-confidence or self-esteem, and changes in identity (Sudarsa I.W., 2020).

Self-esteem is affected by several factors, including unreasonable self-expectations, dependence on others, repeated failure, anxiety, reduced social interaction, and loss of loved ones (Stuart, 2016). Patients with chronic kidney disease who undergo hemodialysis certainly need support from friends and family. Therefore, patients rely heavily on family help to get through life, as they must undergo hemodialysis on an ongoing basis, which can lead to feelings of worthlessness and worry (Juwita, 2018). According to research conducted by (Seryaningsih, 2011), it was found that patients felt that they were a burden to others, and they even saw their illness as something shameful and a source of discomfort in their lives. In addition, a study by (Wyld, et al, 2012) revealed that patients undergoing hemodialysis experienced a decrease in quality of life when compared to patients who had undergone a kidney transplant. It was also detected in a study by (Babatsikou, 2014) that psychological aspects play an important role in quality of life.

Identifying and understanding the key elements that can affect quality of life overall and in specific domains is crucial as focused treatments and interventions can be applied to reduce risks and improve protective factors for this vulnerable group of CKD patients. In addition, lower quality of life may be associated with increased mortality. The quality of life of patients with chronic kidney disease undergoing hemodialysis is poor. Analysis showed that factors affecting the quality of life of chronic kidney failure patients undergoing hemodialysis include social demographic aspects such as gender, age, education level, marital status, and self-efficacy. Other factors that play a role are depression, severity of kidney disease, duration of hemodialysis, adherence to treatment, high body mass index, social support, adequacy of hemodialysis, weight gain during interhemodialysis (IDWC), urine volume, duration between hemodialysis, and hemoglobin levels (Afandi & Kurniyawan, 2018; Mailani, 2017).

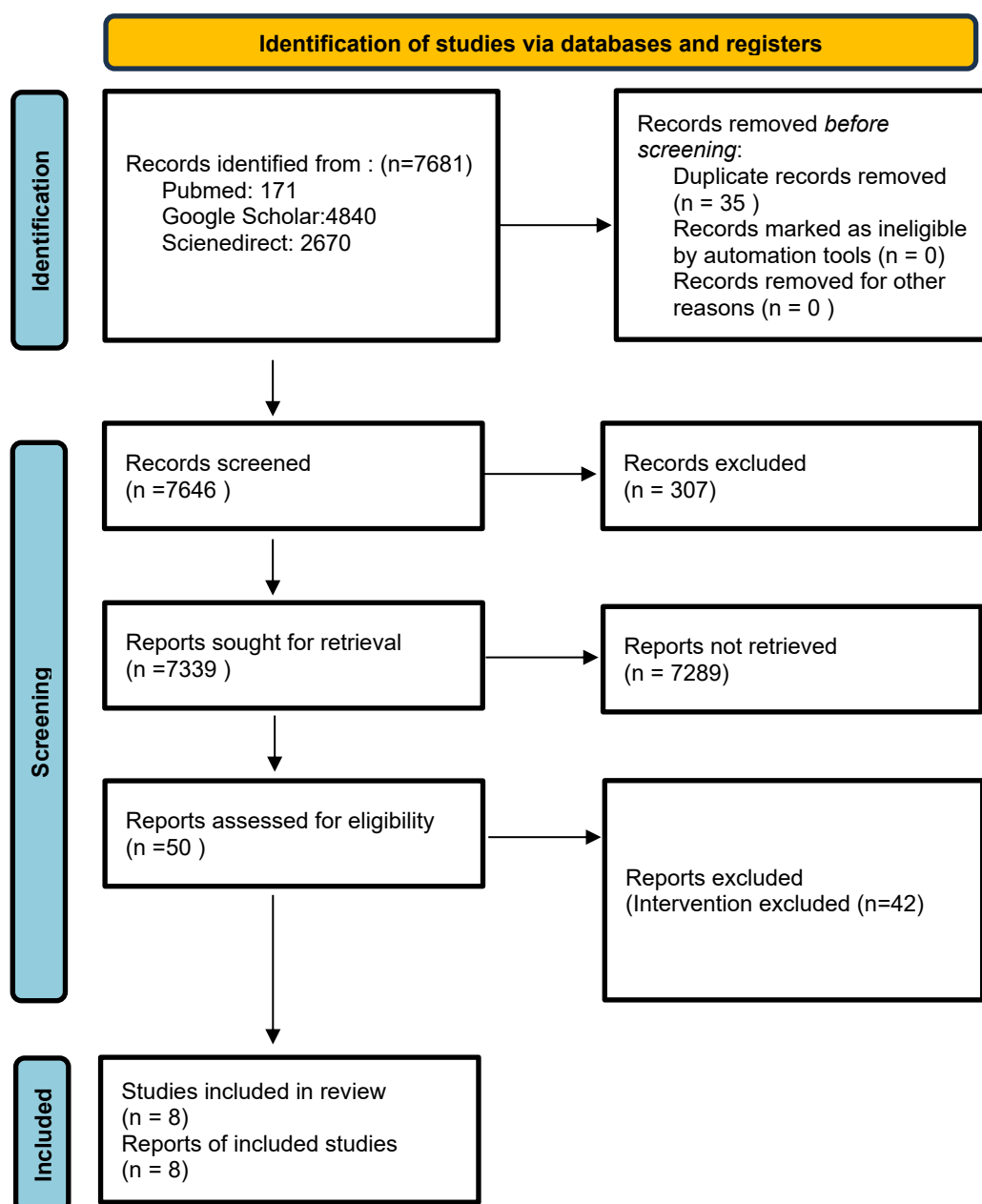
Quality is the main target to be achieved in the field of development so that the quality of life is in line with the level of welfare. It is expected that the more prosperous the higher the quality of life. Quality of life is influenced by health status. The higher a person's health status, the higher the quality of life (Nursalam, 2013). The quality of life of patients with chronic renal failure who receive hemodialysis therapy affects their level of life. Hemodialysis therapy causes various physical and mental disorders, which can affect patients' views on their recovery. The patient's view of a decreased quality of life can worsen their disease state (Togatorop, 2011). Hemodialysis undergone by Chronic Kidney Failure (CKD) patients will usually affect the patient's daily life, such as facing financial problems, experiencing pain, discomfort, difficulty in maintaining employment, reduced sexual drive, frustration, feelings of hopelessness, and even the possibility of committing suicide (Smeltzer and Bare, 2014). For patients who cannot adapt to the changes that occur to them, this will have an impact on their quality of life (Gerogianni, 2014). Patients with chronic renal failure who undergo hemodialysis will certainly feel a lack of confidence in their lives.

Methods

The research design or design used in this writing is a literature review and uses the Preferred Reporting Items for Systematic Review and Meta Analysis (PRISMA) approach. This study aims to determine the relationship between self-esteem and the quality of life of chronic renal failure patients undergoing hemodialysis using Study Literature. The literature used must be related to the topic to be discussed. The research used is research that meets the inclusion criteria is that has been published in data based PubMed, Google Scholar, Science Direct using the keywords, Quality of life AND Self esteem OR chronic kidney disease. Exclusion criteria include articles that only contain reviews of research results.

Table.1 Article Search Strategy

Database used	Total articles according to keywords	Total articles according to inclusion criteria	Total articles after review
PubMed	171	8	1
Science Direct	2670	17	3
Google Scholar	4840	25	4
Total	7681	50	8



A literature search of the database yielded 7681 studies. After title and abstract screening, 7646 studies were excluded. A total of 50 full-text articles were assessed and 42 articles were excluded for not meeting the eligibility criteria. The final 8 articles were included in the final analysis.

Result

Table 2. Journal Analysis

No.	Author	Country	Title	Methods	Population	Intervention	Comparison	Result	Time
1.	Yohanes Wolla Ngara, et.al. (2022)	Indonesia	Self-esteem with quality of life of chronic renal failure patients undergoing hemodialysis during the Covid-19 pandemic.	Analytic correlation is the design used in this study using a cross sectional approach.	Patients with chronic kidney disease (CKD) totaling 96 people.	Self-esteem assessment and its correlation with quality of life during the COVID-19 pandemic.	Not explicitly mentioned in the document, but can be inferred as comparing those with low self-esteem to those with higher self-esteem or pre-pandemic comparisons.	The results showed that low self-esteem will have a poor quality of life with chronic kidney failure (CKD) patients undergoing hemodialysis during the Covid-19 pandemic.	During the COVID 19 (3 Years) pandemic.
2.	Tunjung Sri Yulianti, et.al. (2023)	Indonesia	Relationship between self-esteem and quality of life of chronic renal failure patients undergoing hemodialysis in the renal unit of Dr. Oen Hospital, Kandangapi Solo.	Analytical with correlation design.	Chronic renal failure patients undergoing hemodialysis at the Renal Unit of Dr. OEN Kandangapi Hospital Solo, totaling 55 people..	Psychological interventions to improve patients' self-esteem.	There are no psychological interventions or standardized interventions that focus solely on hemodialysis.	The results showed that there is a significant relationship between self-esteem and quality of life.	5 Years.
3.	Anoushka Krishnan, et.al. (2020)	Australia	Health-related quality of life in people with a broad spectrum of CKD.	Using data from a prospective, multinational study (Australia, New Zealand, Canada, and Spain) in 1696 participants with CKD.	787 patients with stage 3 to 5 CKD.	The intervention involves assessing the health-related quality of life (QoL) of these patients, which may include various medical and social interventions aimed at improving their overall well-being.	The comparison is made between different groups within the CKD population, such as those on dialysis versus those who have received a kidney transplant, to evaluate differences in QoL outcomes.	Being on dialysis, women with CKD, those with multiple comorbidities, lack of a partner, and lower educational attainment were associated with lower QoL across all stages of CKD.	12 Months.
4.	Jian Ping HaoA, et.al.	Beijing, China	Analysis of influencing factors on	A cross-sectional study was	190 patients with CKD	Measurement and analysis of factors	Comparison between the research group	The QoL of patients with CKD	12 Months.

	(2024)		quality of life in patients with chronic kidney disease undergoing maintenance haemodialysis	conducted on 190 patients with CKD undergoing MHD in hospital between March 2021 and March 2022.		influencing the quality of life (QoL) of patients.	and a control group regarding their quality of life.	undergoing MHD is low, and it is affected by multiple factors.	
5.	Hua Hong, MM, et.al (2024)	China	The Impact of Emotional Care on Poor Mood, Quality of Life and Self-Efficacy in Patients with Chronic Primary Kidney Disease.	<i>Cross-sectional</i> study . The general information questionnaire and the Kidney Disease Quality of Life Short Form Quality of Life of Kidney Disease were used to collect data.	112 patients with Chronic Primary Kidney Disease.	Emotional nursing care in addition to conventional care.	Conventional care alone without emotional nursing.	Emotional nursing can help improve the poor mood of patients with chronic primary kidney disease, improve their quality of life, and strengthen their self-efficacy, as well as the patient's overall higher nursing compliance, which has high clinical application.	12 months.
6.	N. Mbeje, et.al. (2024)	South Africa	A conceptual framework to improve the quality of life in patients with CKD on dialysis in KwaZulu Natal Province, South Africa.	A Mixed method sequential explanatory design which entails collection of quantitative data, followed by qualitative.	A purposive sampling of 316 CKD patients for quantitative was initially selected. For qualitative, 17 healthcare professionals were theoretically sampled until data saturation.	Implementation of a conceptual framework aimed at improving quality of life (QOL) through various interventions.	Patients undergoing peritoneal dialysis tend to be more affected by economic factors compared to those undergoing hemodialysis.	Positive perception of oneself and one's place in life; effective palliative care for ESRD patients; an efficient, adequately resourced and well-coordinated system.	The duration of the study was not explicitly stated, but it involved stages of framework development and data collection until saturation was reached.
7.	Sahuri Teguh Kurniawan, et.al. (2019)	Indonesia	Relationship between Self Efficacy and Quality of Life of Chronic Kidney	This type of research is quantitative with a cross sectional design.	The sample was purposive sampling with 44 respondents.	Improving self-efficacy through patient education.	Analyzing the relationship between self efficacy and the quality of life of chronic renal failure patients	The result of this study is that there is a relationship between Self Efficacy and the quality of life of	The study was conducted within a certain period with a cross-

			Failure Patients Undergoing Hemodialysis Therapy at Sukoharjo Hospital.				undergoing hemodialysis therapy.	chronic renal failure patients undergoing hemodialysis therapy.	sectional design.
8.	Jie Zheng, et.al. (2022)	China	Effect of New Nursing Team Management Mode on Self-Efficacy, Compliance, and Quality of Life of Patients with Chronic Kidney Disease and Its Chain Mediating Effect.	A total of 100 patients with CKD who received maintenance hemodialysis treatment in our hospital from May 2020 to May 2021 were selected for the study. They are divided into the traditional group and the combined group according to the random number table method, with 50 patients in each group. There are 39 males and 11 females aged 40–60 years in the joint group, with an average of (51.27 ± 2.23) years.	100 patients with CKD who received maintenance hemodialysis treatment	The intervention effect of the new nursing team intervention program in patients with CKD	The comparison of clinical nursing shows that the new nursing team management model improves the compliance, self-management efficiency, and quality of life of patients with CKD, which is worth recommending in nursing practice.	The results showed that the new nursing team management model improved adherence, self-management efficiency, and quality of life of patients with CKD, which is worth recommending in nursing practice.	12 Months

Discussion

The research results of Krishnan et al. (2020) emphasized the significant impact of medical, psychosocial, and social factors on the quality of life (QoL) of patients with chronic kidney disease (CKD), especially for those on dialysis. The findings indicate that patients on dialysis consistently report a lower quality of life compared to stage 3-5 CKD patients or kidney transplant recipients. This decrease in QoL may be related to the physical burdens experienced by patients, such as pain and decreased ability to move, as well as psychological issues such as anxiety and depression, which are common in dialysis patients. These findings indicate the importance of attention to psychological aspects in the management of CKD patients, which may affect their overall quality of life.

This review also shows the positive benefits of social support on patients' quality of life. Patients who had good social support, both from family and community, reported better QoL. This finding is in line with the study by Wong et al. (2019), which showed that social isolation can worsen the psychological condition of CKD patients and reduce their quality of life. Therefore, it is important to ensure that CKD patients get adequate social support to reduce the negative impact of social isolation and improve their well-being.

From a nursing perspective, the study by Krishnan et al. (2020) emphasized the importance of attention to psychological issues such as anxiety and depression in the care of CKD patients. Groot et al. (2019) observed that therapies that include psychological interventions can help relieve anxiety and depression, further increasing patients' satisfaction with their care. This suggests that the care of CKD patients should not only focus on the physical aspects of kidney disease, but should also include comprehensive mental and emotional care.

This study also indicated that comorbidities such as diabetes and heart disease contribute significantly to the decreased quality of life of CKD patients. Chadban et al. (2015) emphasized that better management of these comorbid conditions can improve patients' health outcomes and improve their quality of life. Therefore, a more holistic treatment approach, which considers other medical conditions in addition to CKD, can greatly benefit patients and improve their quality of care.

Conclusion

The conclusion of the study on the relationship between self-esteem and quality of life of chronic renal failure patients undergoing hemodialysis shows that there is a significant relationship between the two variables. This study suggests that improving self-esteem can help improve patients' quality of life, which is particularly important given the challenges faced by renal failure patients undergoing hemodialysis therapy. Thus, interventions aimed at improving patients' self-esteem may be an effective strategy in improving their quality of life. This study also emphasizes the need for more attention to psychological factors in the care of chronic renal failure patients, in order to provide a more holistic approach in their health management.

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