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Feasibility of an Intervention to Slow Progression of Chronic Kidney Disease

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Problem: Approximately 50% of Americans with chronic kidney disease (CKD) are in Stage 3, which has a better success rate for slowing progression of CKD than later stages. Purpose: The Self-Management of Chronic Illness study was conducted to examine the feasibility of Intervention Strategies to Overcome Progression of CKD (ISTOP-CKD) for patients with Stage 3 CKD and coexisting diabetes and hypertension. ISTOP-CKD is a phone-based health coaching self-management intervention designed to build knowledge, skill and self-efficacy, based upon the degree of activation.

Methods: A two-group randomized controlled pilot study was conducted over 12-weeks to (1) examine the feasibility and acceptability of delivering ISTOP-CKD and an attention control intervention; (2) compare activation, knowledge, self-efficacy, and self-management skills in the two groups and; (3) estimate the impact of ISTOP-CKD on medication adherence, clinical markers, health-related quality of life, and satisfaction with care at baseline, end of 6-week intervention, and 6-weeks following intervention.

Findings: Participants were randomized to the ISTOP-CKD (n=15) and attention control groups (n=15) and were predominantly female, black, not Hispanic/Latino, educated beyond high school, married, nonsmokers and unaware of their CKD (54%) at baseline. Knowledge significantly increased in the ISTOP-CKD group ($p < .05$). There were no differences between groups or over time in activation, self-efficacy, self-management, medication adherence, quality of life, or care satisfaction. Incomplete clinical marker data was available.

Implications: Recruiting Stage 3 CKD patients is challenging; this study highlights the importance of increasing patients' awareness of CKD in stage 3 to increase patient activation, self-management and slow CKD progression.

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