The Vascular Access Questionnaire (VAQ) provides a mechanism for identifying and scoring factors in haemodialysis that impact on patients’ quality of life and perception of their therapy” Field et al (2019).

Abstract:

BACKGROUND: Haemodialysis is capable of prolonging life in patients with end stage renal disease, however this therapy comes with significant negative impact on quality of life. For patients requiring haemodialysis, the need for an adequately functioning vascular access (VA) is an everyday concern. The Vascular Access Questionnaire (VAQ) provides a mechanism for identifying and scoring factors in haemodialysis that impact on patients’ quality of life and perception of their therapy.

METHODS: Between April 2017-18 the VAQ was administered to prevalent haemodialysis patients at 10 units in the West Midlands via structured interviews.

RESULTS: 749 of 920 potentially eligible patients completed the survey. The mean VAQ score was seen to improve significantly with age (7.7 in < 55 vs. 3.8 in 75+) and the duration of access (8.9 if less than 1 month old vs. 5.0 at a year). Better average scores were demonstrated for Arteriovenous fistulas (AVF) than other modalities (AVF 5.1 vs. AVG (arteriovenous grafts) 7.2 vs. CVC (central venous catheter) 6.6). There was no significant difference in scores between fistulas on non-dominant or dominant arms, with both having a mean of 5.2 (p = 0.341). CONCLUSIONS: Overall, better satisfaction scores were seen in AVF. The presence of an AVF on the non-dominant arm was not a concern for the majority of patients and did not affect the VAQ score. A number of factors were identified that can influence VAQ satisfaction score.

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