Abstract 1549

LONGITUDINAL INVESTIGATIONS OF QUALITY OF LIFE (QOL) IN END-STAGE RENAL DISEASE (ESRD) PATIENTS BEFORE AND AFTER KIDNEY TRANSPLANTATION
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The aim of the present study was to enhance the quality of medical and psychological care in ESRD patients, especially due to changes after kidney transplantation (KTX). Starting in 1990, kidney transplanted ex-patients and ESRD-patients on dialysis were being on the waiting list for transplantation were administered psychologicostatic inventories. Clinical groups included at T1 (n=40) ESRD-patients on the waiting list (group 1, 84 male, mean age 43.4 years (+/-15.3) and n=22 transplant patients (group 2, 116 male, mean age 46.1 years (+/-12.9)). To detect psychological distress the Brief Symptom Inventory was applied. A12 (1997-1999) depressive and specific QoL of the patients was investigated using the SF-36 and the End-Stage Renal Disease Symptom Checklist (ESRD-SCL-29), social support and symptomatic distress (limted physical, cognitive and sexual capacity) were investigated with a German Social Support Questionnaire and on a single item basis respectively. At T2, all patients of group 1 had undergone KTX; groups 1 and 2 did not differ as to clinical data (e.g. creatinine, blood count), medication or comorbidity at T2. Group 1 demonstrates statistically significant better social support after KTX; men reported better social integration whereas women were more satisfied with their social support. The psychological distress at T2 (case definition of Derogatis, 2 scores > 70 and/or GSI > 70) predicts QoL, A12 in both groups (5-15% explanation of variance of the SF-36 and ESRD-SCL-29 scores). High psychological distress before KTX predicts lower QoL after KTX, independent of clinical data. KTX enhances social support of ESRD patients, while gender specific differences have to be considered. High psychological distress on dialysis is a predictor for low QoL after KTX. Multiprofessional support in early phases of ESRD should be provided.

Abstract 1608

QUALITY OF LIFE IN TRANSPLANT PATIENTS, GRUPO ALBORGONIA, BILBAO AND MADRID, SPAIN
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The quality of life in transplant patients is one of the indicators of their rehabilitation. This research has been checked out in order to know the impact a transplantation has upon the quality of life of kidney, liver, heart and lung transplanted patients. We designed a two years longitudinal study with four non-equivalent groups: kidney (191), liver (62), heart (87) and lung (14) patients who were on a waiting list for transplantation. We assessed the quality of life of 59 kidney patients, 28 liver patients, 23 heart patients and 11 lung patients, before and four months after the transplantation. The instruments used for this assessment were the Nottingham Health Profile, PONHIPS, Validated Psychological Measures and specific questionnaires. We found statistically significant differences in all quality of life indicators before and after the transplantation, except in sleep. The psychological measures indicate an improvement after the transplantation in kidney, liver, heart and lung transplanted people there is a significant increase in their quality of life and emotional state, comparing the results before and four months after the transplantation procedure. Although four months after the transplant the patients are in the risk period for rejection, their quality of life perception increases and they feel better than at the time they were on the waiting list.