



# The general health status in hemodialysis and kidney transplant patients

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### Implication for health policy/practice/research/medical education:

The expansion of end-stage renal disease (ESRD) joined with the understanding that life may no longer be imaginable without renal replacement therapy (dialysis or kidney transplantation) and medical intervention can lead to many physical and mental problems. Several studies included anxiety, noncompliance with diet or medication, serious depression, and sexual problems among ESRD patients.

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## Dear Editor,

With interest, we read the article by Boostani et al about the comparison of general health status between hemodialysis and kidney transplant patients in university hospitals of Ahvaz, Iran (1). The results of the study are interesting; There is no significant difference between the level of general health and amount of anxiety, serious depression, physical symptoms and social function in hemodialysis and kidney transplant patients.

The expansion of end-stage renal disease (ESRD) joined with the understanding that life may no longer be imaginable without renal replacement therapy (dialysis or kidney transplantation) and medical intervention can lead to many physical and mental problems. Several studies included anxiety, noncompliance with diet or medication, serious depression, and sexual problems among ESRD patients (2-9).

Psychological problems including depression and anxiety are also common among kidney transplanted patients which impact adversely upon compliance and may be associated with decreased longevity (10). In addition, depression among patients with kidney transplantation is also associated with both acute and chronic rejection (11). However, in contrast to the result of Boostani et al study,

it seems that patients with successful kidney grafts have more desirable general health level and more favorable quality of life compared to patients undergoing chronic dialysis (12,13).

We found that the results of the study by Boostani et al are limited because of the methodology of the study. They compared the general health between patients undergoing chronic hemodialysis with kidney-transplanted recipients who admitted to the hospital and concluded no significant difference in general health level and amount of anxiety, serious depression, physical symptoms and social function between hemodialysis and kidney transplanted patients (1). The kidney transplant recipients who admitted to the hospital always have a medical problem such as acute and chronic rejections, or moderate to severe infection. It is a fact that kidney transplanted patients who admitted to the hospital usually have anxiety about this issue. For example, according to the study by Kiley et al, the amount of anxiety and serious depression are significantly higher among patients with failed kidney allografts compared to kidney transplanted recipients with successful grafts (14). Therefore the result of the study by Boostani et al may be different when they compare the general health between patients undergoing chronic hemodialysis and kidney

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transplanted recipients with successful grafts and without any medical problem who did not admit in the hospital. In addition, the results of Boostani et al study is also limited by the short duration and low number of patients enrolled in the study. Therefore for comparison of general health level between patients undergoing chronic hemodialysis and patients with kidney transplantation, multicenter clinical trials with long duration, larger proportion of patients and kidney transplant recipients with successful grafts are needed.

#### Authors' contribution

SMMM and FH prepared the primary draft. SSBM edited the manuscript. All authors read and signed the final manuscript.

#### Conflicts of interest

None.

#### Ethical considerations

Ethical issues (including plagiarism, data fabrication, double publication) have been completely observed by the authors.

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