

Methods

Purpose

The purpose of this project is to establish a patient-centered, low cost method of decreasing occurrence and complications from Mineral Bone Disease (MBD). The goals of the project include: (1) educating staff to the need of patient education; (2) increasing patient education with an easy-to-read, patient friendly informational binder on cost-friendly food choices; (3) providing patients with an attenuated informational card that can be taken with them on shopping trips; (4) increasing healthy food choices by patients; (5) assessing the impact of the education on patients by using a 5 question survey both at the time of the intervention and 6 weeks from the time of their initial education.

Setting

The project will be implemented in 2 busy outpatient dialysis centers in a metro-east suburban area. The clinics treat approximately 105 patients per week. This setting was chosen because of the high patient volume, the available access to the site, and their willingness and enthusiasm to work with the study.

Sample

Convenience sampling will be done using any person actively receiving dialysis for chronic kidney disease (CKD) who is willing to participate. Patients not willing to complete a post-intervention survey will be excluded. At these two dialysis sites there are approximately 105 patients receiving full-time dialysis. The ethnic breakdown is roughly 20% Caucasian, 70% black, and 10 % other or mixed races. There are 60% of men compared to 40% women. Roughly 60% are Medicare, 10% are Medicaid, 5% are private insurance, 25% qualify for Medicare and Medicaid.

Intervention

An educational folder written at a 5th grade reading level will be created using evidence-based data for healthy food choices for patients who have or are at risk for MBD. It will include simple information on what MBD is, its effects, and how it can be prevented. It will also include clearly marked food choices that should be chosen and those that should be avoided when trying to prevent MBD or its complications. A smaller card, that can be carried with the patient or the person in the household who is responsible for grocery shopping, will be provided for quick reference when shopping, illustrating foods to be chosen and those to be avoided. Verbal education given by one of the study investigators will be given at the time the binder is provided to state the purpose of the material and to reinforce the provided education.

Procedure. Both investigators will work together to create folders and small reference cards to hand out to each patient in the study. Medical providers, RN's, and dietary consultants will be consulted before materials are handed out and asked for their input and suggestions. When materials are complete and agreed upon by onsite staff, university IRB approval will be sought. Once university IRB approval is obtained, beginning in June of 2020 one investigator will ask participants to complete a written 5-question pre-survey about their dietary knowledge and choices. The investigator will then provide education about MBD to the study participants at their weekly dialysis session and give them the take home materials and answer any questions they may have. Six weeks following the education and the folder distribution the same 5-question written survey will be given to patients by the onsite investigator to evaluate the effectiveness of the education on the patients' food choices. The off-site investigator will compile and

organize survey data and evaluate the effectiveness of the education on changing patients' food choices that impact MBD.