

DEFINE PROBLEM/PROBLEM UNDERSTANDING

LITERATURE SURVEY

Chronic kidney disease (CKD) is a significant public health issue, affecting an estimated 14% of the global population. The disease is characterized by a gradual loss of kidney function over time, leading to a range of serious health complications, including end-stage renal disease (ESRD) requiring dialysis or kidney transplant. Early detection and management of CKD is crucial to prevent progression to ESRD and improve patient outcomes.

There have been numerous studies in recent years aimed at developing accurate and efficient methods for predicting CKD progression. These studies have employed a variety of techniques, including machine learning, deep learning, and artificial neural networks.

Non-English articles were excluded to prevent cultural and linguistic bias in translations. We excluded studies if they used structured questionnaires as the sole method for data collection, or reported only quantitative data.

Using a detailed search strategy (see web extra appendix 1) we carried out searches in Chronic kidney disease (CKD) is a significant public health issue, affecting an estimated 14% of the global population. The disease is characterized by a gradual loss of kidney function over time, leading to a range of serious health

complications, including end-stage renal disease (ESRD) requiring dialysis or kidney transplant. Early detection and management of CKD is crucial to prevent progression to ESRD and improve patient outcomes.

This synthesis highlighted three major factors that influenced decision making that were over and above the findings from the primary studies alone. The first was the impact of peers on decision making by patients and careers, the second was the problematic timing of information presented, and the third was the desire by patients to maintain

Peer influence was a powerful and persuasive method for patients to gain knowledge of their treatment options. Meeting other patients and listening to their experiences helped patients and their careers to the reality of dialysis and transplantation. Peers may have been more influential than clinicians in decision making.

Participants often reported being too sick to make sense of the information they were given on treatment options: “The doctor might have mentioned it [continuous ambulatory peritoneal dialysis] but I was so sick at the time I didn’t catch on to it.” Research on patient communication suggests that nephrologists provide information on treatment options over an extended period of time but increase the amount of detail about specific treatments when the patient requires renal replacement therapy.