Skills Included in Self-Management Interventions to Help People with Chronic Kidney Disease **Debbie E. Drenzyk**<sup>1</sup>, Marcy R. Gardner<sup>1</sup>, Janet L. Welch<sup>2</sup>

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Slowing the progression of chronic kidney disease (CKD) is a major goal of medical therapy and requires significant and complex self-management behaviors from patients. Similar to other chronic conditions, patients must have the knowledge, confidence, and skills to self-manage the disease in daily living. The core self-management skills of problem-solving, decision making, resource utilization, patient-provider partnerships, action planning, and self-tailoring will help patient perform key behaviors associated with slowed progression. These key behaviors include the avoidance of nonsteroidal anti-inflammatory drugs (NSAIDS), diet modifications, glycemic control, regular exercise, systolic blood pressure control, tobacco avoidance, and adherence to angiotensin-converting enzyme inhibitor (ACE-I) or angiotensin receptor blocker (ARB) medications. The purpose of this literature review was to review the components of tested CKD self-management interventions to identify the self-management skills that were included in the published studies and how the interventions were delivered. A search for literature was performed using multiple databases. Articles were selected for review if they were written in English, included adults 18 years of age who had Stage 1-4 CKD, and tested a self-management intervention using a quasiexperimental or experimental design. A total of eight research articles met the inclusion criteria. Action planning, problem-solving and enhancing patient-provider partnerships were included in some interventions; there was no evidence of decision-making, resource utilization, or self-tailoring. All of the interventions were delivered using face-to-face educational programs and none used information technology. Data from this review provides important information for designing future interventions that will improve CKD self-management programs. In addition, findings suggest additional methods are needed when delivering interventions so programs are readily available to underserved areas.

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