**PhD Opportunity**

**Title**

Routine Monitoring of Depression and Anxiety in Patients with Chronic Kidney Disease (CKD).

**Background**

Chronic kidney disease (CKD) is a global health concern1 with a high prevalence2 and substantial healthcare and societal costs.3-5 Patients with CKD commonly experience considerable symptom burden6 and associated poorer long-term health-related quality of life (HRQL)7 and mortality.8 9

Increasingly, routine measurement of symptoms in CKD populations is undertaken using patient-reported outcome measures (PROMs): psychometrically validated questionnaires which collect informative data provided directly from the patient.10 Such data can be collected between clinic appointments, often alongside information regarding HRQL, in order to augment clinical data, build a longitudinal picture of disease burden and enhance care.11 This approach has demonstrated considerable benefits in patients with cancer, including reduced A&E visits, fewer hospitalisations, increased HRQL and lower rates of mortality.12-14 Feasibility of routine symptom monitoring has been established in patients with advanced CKD15 and exploration of effectiveness in patients receiving dialysis is currently ongoing.16

However, there remains much variation in the PROMs utilised to measure symptoms in CKD. In a recent systematic review and meta-analysis, 54 differentPROMs were used to collect data on symptoms across the included studies, with no single tool measuring >45% of symptoms reported in the population.6 Thus, comprehensive measurement of the symptoms that matter most to patients with CKD currently requires concurrent completion of multiple PROMs, which may lead to questionnaire burden: a widely recognised threat to adherence.17

Whilst there is ongoing work to standardise the PROMs used to measure HRQL and somatic symptoms in CKD, there remains uncertainty regarding the optimal PROM(s) for routine measurement of depression and anxiety. This is important, as the prevalence of both depression and anxiety is particularly high in patients with CKD18 19 and depression is associated with a substantially increased risk of mortality.20

We are looking for a PhD student who would like to develop an in-depth programme of research to enhance our understanding around the optimal PROM(s) for routine measurement of depression and anxiety in patients with CKD. This multi-disciplinary, collaborative study will be conducted across both University and NHS environments, offering an opportunity for the successful applicant to develop an applied research study which could directly impact patient outcomes in this important area of CKD care.

**Supervisory Team**

Director of Studies: [Dr Dez Kyte](https://www.birmingham.ac.uk/staff/profiles/applied-health/kyte-derek.aspx), Senior Lecturer, School of Allied Health & Community, University of Worcester, UK. Associate member of the Centre for Patient-Reported Outcomes Research, University of Birmingham, UK.

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