



IS PSYCHOLOGICAL SUPPORT THE MISSING INGREDIENT IN SUCCESSFUL OUTCOMES FOR PANCREAS TRANSPLANTATION: THE IMPORTANCE OF RECOGNISING AND MANAGING THE “COMPETITIVE PATIENT”



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Background

- 10% of the population with T1DM are eligible for pancreatic transplantation
- To date, psychological research on the impact of pancreatic transplantation has focused mainly on illness and quality of life issues
- Research has been predominantly quantitative, rendering it impossible to identify the specific issues faced by patients
- There is a paucity of information about many aspects of care
- Uniquely, this work considered post-transplant issues in the context of the pre-transplant psychological burden of patients with T1DM.

Methods

Qualitative design

- semi-structured 1:1 interviews
- average length of interview 1 hour
- digitally recorded and transcribed verbatim
- data analysed independently by 2 researchers using Inductive Thematic Analysis

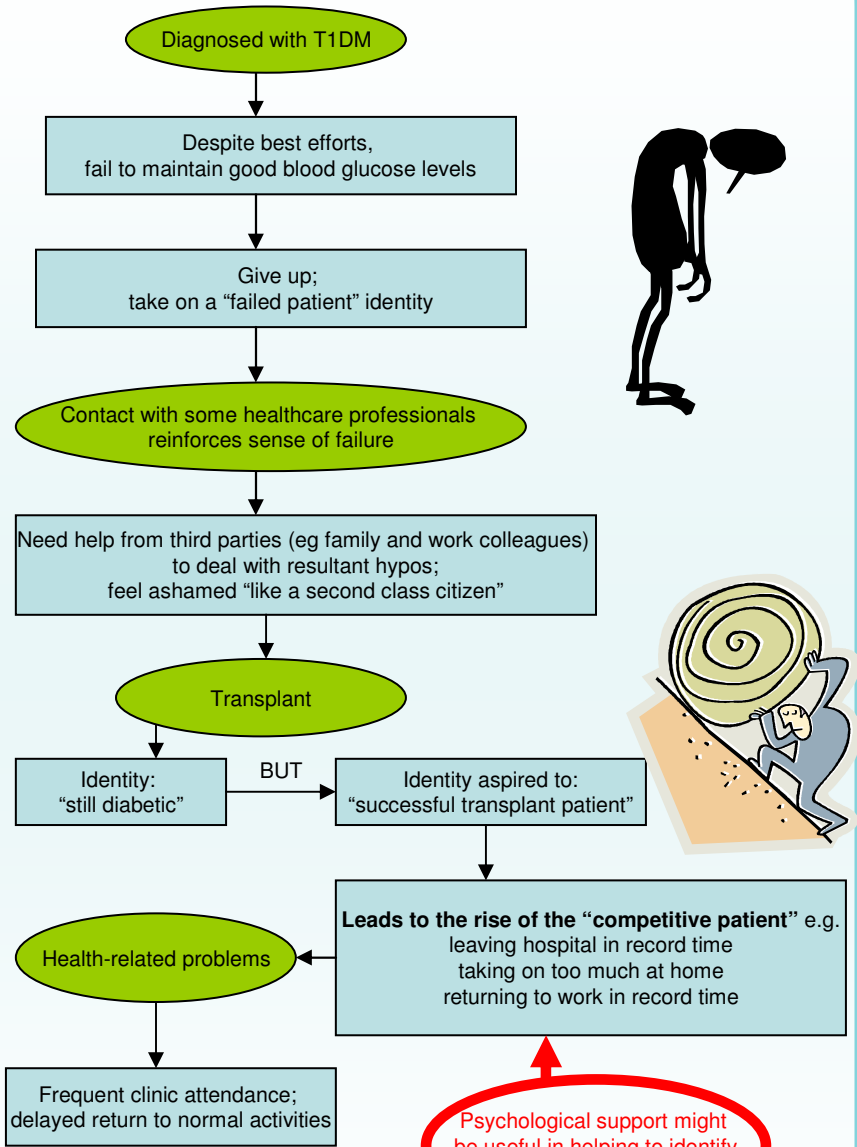
Participants

21 participants with T1DM

- Gender: 11 male, 10 female
- Time since transplantation: from 7 weeks to 3 years
- Transplantation type: 12 pancreas only, 9 simultaneous pancreas & kidney

Results

A number of key themes were identified, but this presentation focuses on the key theme of “diabetic identity” only



Conclusion

Having a functioning pancreas, and being symptom-free, did not negate the experience and identity of having T1DM. Wanting to be rid of the sense of failure associated with having diabetes led some participants to make ill-advised decisions post transplant. If not recognised and managed appropriately, these behaviours could result in adverse health outcomes following transplantation, resulting in more frequent clinic attendance and delayed return to full activities of daily living, including delayed return to work.