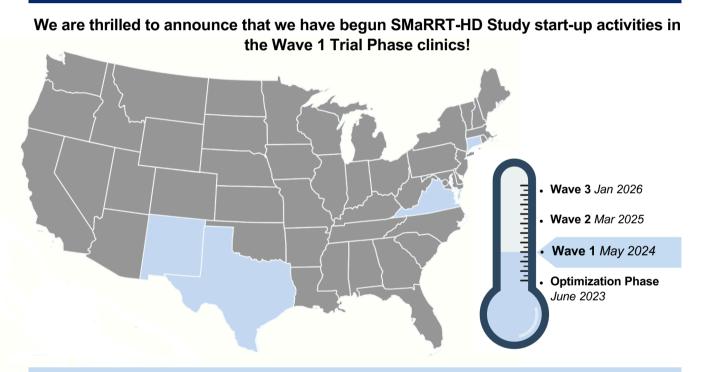


Comparative Effectiveness of Two Approaches to Symptom Monitoring in Hemodialysis

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Kick-Off of Research Activities in Wave 1 Clinics



Wave 1 Clinics are located in Connecticut, New Mexico, Texas, and Virginia.

Engagement with the Wave 1 clinics kicks off with trainings about the SMaRRT-HD Study for clinic personnel and medical providers. Patients will also be notified about the upcoming study. During this time, Dr. Flythe will work with clinic medical providers to determine patient eligibility. Eligible patients will then receive their Study Fact Sheets and decide whether they want to participate in the study or not. Soon thereafter, the UNC team will visit all Wave 1 clinics and offer patients participating in the Study the opportunity to enroll in the patient-reported outcome subset. This will be followed by clinic randomization and then, what we have all been working toward.... the **START** of the 1-year intervention period.

SMaRRT-HD Study Start-Up Activities

| Мау | Prepare and train clinical managers Introduce SMaRRT-HD to clinic personnel and patients Identify eligible patients Hold clinic personnel trainings about study activities |
|--------|---|
| June | Travel to clinics to meet clinic personnel and patients (UNC team) Enroll patients in the patient-reported outcomes subset (by phone and in-person) |
| July | Randomize clinics! Mail tablet computers to clinics randomized to use the SMaRRT-HD system Train clinic personnel in SMaRRT-HD clinics about how to use the SMaRRT-HD system |
| August | Begin using SMaRRT-HD system in SMaRRT-HD clinics Continue usual approach to symptom monitoring in Usual Care clinics |

Behind the Scenes

To prepare for the Trial Phase, we worked with our technical teams to implement learnings from the Optimization Phase.

- Updated the SMaRRT-HD system:
 - Implemented shorter usernames
 - Simplified the log-in process for users by removing the CAPTCHA
 - Shortened the survey completion window from 2 weeks to 1 week
- Built a system to support the administration of the implementation evaluation surveys
- Built a system to support patient enrollment in the patient-reported outcome subset
- Developed a process for scheduling phone calls for collection of the patient-reported outcomes

We also consulted with our stakeholders and patient partners to improve our clinic engagement materials.

Thank you to everyone who provided feedback!

Calendars and reminders for clinic personnel



Updated trainings, webinars, and handouts for clinic

Personnel

Progress reports for patient participants



Progress reports for clinic personnel in SMaRRT-HD randomized clinics



Stakeholder Spotlight



Taya Joseph, MS is a soon-to-be medical student at UNC-Chapel Hill from Albemarle, NC. Her connection to kidney disease research is personal. She first got involved in kidney health in 2015 when her beloved grandmother was diagnosed with a rare kidney disease. Taya spent a lot of time driving her grandmother to doctor's appointments and witnessed her kidney disease progression first-hand, including dialysis, frequent hospitalizations, and eventually hospice.

During this time, Taya saw a flyer on the UNC campus about the Flythe

team's research on patient-centered dialysis care and "knew [she] had to learn more." In 2019, she volunteered as a Student Research Assistant on Dr. Flythe's team at the UNC Kidney Center, and in 2022, she agreed to serve as a member of the SMaRRT-HD Study Stakeholder Panel and the Patient/Family Workgroup.

While awaiting medical school start this fall, Taya works as a medical assistant at a nephrology practice where she has further strengthened her commitment to kidney disease. She brings invaluable personal and professional insights to the SMaRRT-HD Study about what life is really like for both patients and clinicians working in dialysis. Taya's long-term goal is to become a nephrologist. **Congratulations Taya! Thank you for your commitment to bettering the lives of people living with kidney disease!**



What excites you most about the SMaRRT-HD Study?

"Normalizing sharing symptoms is really important in my opinion." Taya hopes that SMaRRT-HD can make patients feel heard, improve their health, and help them manage their symptoms. She remembers her grandmother's frequent hospitalizations and hopes that improved communication between patients and care teams can reduce hospitalizations by identifying and mitigating problems early. She says, "just because [some symptoms] are ongoing and persisting, doesn't mean they have to be accepted as normal."

What are you looking forward to in Medical School?

"I'm excited to learn to 'think like a doctor'. Each case is like putting together a puzzle, and the puzzle is different for each patient." Taya's personal experiences as a caregiver, as well as her volunteer and professional experiences have deepened her appreciation for the human elements of kidney disease. Now, she is excited to gain the clinical knowledge to complete the puzzle.

What inspires you?

Taya has overcome personal struggles and plans to draw on her lived experiences in combination with her professional training to serve the people in her community. "Just being a face. As a black woman from rural North Carolina, my patients can have a doctor that looks like them, that shares their experiences."

Community News and Resources

Relevant Recent Publication

Jhamb M, Steel JL, Yabes JG, Roumelioti ME, Erickson S, Devaraj SM, Vowles KE, Vodovotz Y, Beach S, Weisbord SD, Rollman BL, & **Unruh M**. Effects of Technology Assisted Stepped Collaborative Care Intervention to Improve Symptoms in Patients Undergoing Hemodialysis: The TĀCcare Randomized Clinical Trial. *JAMA Intern Med*. 2023;183(8):795-805. doi:10.1001/jamainternmed.2023.2215

Article: https://pubmed.ncbi.nlm.nih.gov/37338898/

A recently published randomized controlled trial found that a technology-assisted, stepped, collaborative care intervention called "TĀCcare" reduces fatigue and improves pain among people receiving hemodialysis. The study included 160 individuals with hemodialysis-dependent kidney failure in Pennsylvania and New Mexico. Participants who were randomized to the TĀCcare intervention received individualized treatment for fatigue, pain, and depression. The intervention followed a stepped approach to intensifying treatment and included shared decision-making between medical providers and patients, along with 12 telehealth sessions of cognitive behavioral therapy. Medications for pain and/or depression were added if needed or preferred by patients. Participants who were randomized to the control group received six telehealth sessions of health education. Results showed that participants who received the TĀCcare intervention, compared to control, had greater improvement in both fatigue and pain after 6 months. SMaRRT-HD Study Co-Investigator, **Mark Unruh** (University of New Mexico) was one of the TACcare Study researchers!

Upcoming Activities

July 15, 2024 at 2pm ET | SMaRRT-HD Stakeholder Panel Meeting

August 5, 2024 | Start of the 1-year intervention period for Wave 1 Clinics

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