



Comparative Effectiveness of Two Approaches to Symptom Monitoring in Hemodialysis

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SMaRRT-HD Study Updates

The first several months of 2025 have been a blur of study activities! Wave 1 clinics have reached the half-way point of the study and Wave 2 clinics have kicked off preparatory research activities. Study team members from UNC, Penn, Duke, and University of New Mexico (UNM) have all pitched in to keep things on track. We are grateful to our study team and the participating clinics and patients. It is fun to see it all come together!

6-Month Data Collection for Wave 1

In January, the Wave 1 clinics reached the 6-month timepoint (halfway!). The UNC team travelled to all 5 Wave 1 clinics to schedule the 6-month patient-reported outcome (PRO) phone surveys and to enroll patients, clinic staff, and medical providers in implementation evaluation surveys and interviews



Patient Reported Outcome Surveys

UNC study team members spoke with PRO Subset participants by phone and in person during clinic visits to schedule them for their 6-month phone surveys with the UNM team. Some patients chose to complete their surveys in real time during a dialysis treatment. The UNM team was “on call” to make this happen!



Implementation Evaluation Surveys

Many patients, staff, and medical providers chose to complete computer-based implementation surveys when members of the UNC team visited their clinics. The surveys take 3-5 minutes to complete. **96 patients and 56 staff/medical providers completed surveys!**



The implementation interviews dive more deeply into symptom monitoring experiences and take about 25 minutes to complete. The UNC team schedules the interviews, and the Duke team conducts the phone interviews. **21 patients and 16 clinic staff/medical providers completed interviews!**



Participant Enrollment at Wave 2 Clinics

During the past few months, the UNC team onboarded 11 new clinics in preparation for the launch of Wave 2 of the study.



Clinic Training & Preparation

Onboarding new clinics takes a lot of preparation. In February and March, the UNC team delivered 25+ trainings to clinic staff and medical providers to get everyone up to speed and “research-ready.” To make sure everyone received the needed training, the UNC team gave multiple training sessions for each clinic and shared slide decks and recordings for staff members unable to attend live.

Full Trial Cohort Enrollment

Clinic Managers and their teams distributed Study Fact Sheets to eligible patients ensuring that every eligible patient had the information they needed to make a decision about participating.

PRO Subset Cohort Enrollment

The UNC team visited all 11 Wave 2 clinics in April and May to enroll patients in the PRO Subset. During clinic visits, research team members spoke directly with eligible patients about the opportunity and scheduled interested patients for telephone PRO surveys with the UNM team. The last few months have a busy travel time for the UNC research team!



Precious Bridges Research and Advocacy



During the UNC team's visit to the 2 Wave 1 clinics in Texas, the team had the pleasure of seeing Precious McCowan shine in her dual roles as a UNC research assistant for the SMarRT-HD Study and a patient advocate. Well known in the kidney community, Precious is a professional public speaker whose story has inspired audiences across the country. She is also the recent recipient of a PhD in Studies in Human Behavior and has an interest in a research career. With that goal in mind, she joined the UNC team as a part-time research assistant to learn more about how to conduct research and to assist with the SMarRT-HD Study.

Precious helped the UNC study team with enrollment of patients and staff in implementation evaluation surveys and interviews. She also helped remind PRO Subset participants that it was time to complete their 6-month PRO phone surveys. Precious brought a unique perspective that helped build trust with the participants, improving their experience in the study. She was able to share her own experiences on dialysis with study participants to connect with them and foster engagement with the research.

After helping the study team and seeing the research processes "live" in a clinic, she had great suggestions about how to improve. In response to Precious' feedback, the UNC team now plays the SMarRT-HD Study video in rotation on a tablet in clinic lobbies when the study team is visiting and leaves participants with "reminder cards" about scheduled phone surveys and interviews. These enhancements engage patients and clinic staff and help patients remember their upcoming study phone appointments.

During Precious' clinic visit, something special happened... The clinic manager recognized Precious from a past conference and was thrilled to see her walk through the door. Without hesitation, she asked Precious if she would be willing to give a brief motivational talk to the clinic staff during their lunch break. And of course—Precious delivered.

After her speech, the clinic manager remarked to Precious

"I really think you sharing your story helped the staff to understand what life is like with kidney disease."

"I take their perspectives, their concerns, and present it on a platform that I know a lot of individuals don't have. This has been a passion for me."



We're grateful to Precious for her passion, insight, and the unique perspective she brings to our work. She reminds us that the voices of lived experience are essential in shaping more inclusive, patient-centered research.

Community News and Resources

Relevant Recent Publication: Dember LM, Hsu JY, Mehrotra R, et al. Pain Coping Skills Training for Patients Receiving Hemodialysis: The HOPE Consortium Randomized Clinical Trial. *JAMA Intern Med.* 2025;185(2):197–207. [doi:10.1001/jamainternmed.2024.7140](https://doi.org/10.1001/jamainternmed.2024.7140)

Chronic pain is common among individuals with dialysis-dependent kidney failure. To evaluate the effectiveness of pain coping skills training (PCST), a cognitive behavioral intervention, on pain interference, **Laura Dember, MD** and other investigators, including SMaRRT-HD investigator, **Mark Unruh**, conducted a randomized clinical trial of PCST vs. usual care at 103 outpatient dialysis clinics in the US. Adults receiving maintenance hemodialysis and experiencing chronic pain were randomly assigned to PCST or usual care. Participants assigned to PCST received 12 weekly coach-led sessions via video or telephone conferencing, followed by 12 weeks of daily interactive voice response sessions. All participants were followed for 36 weeks and answered questions about how much pain interfered with their life and other pain-associated outcomes.



The study found that PCST improved pain interference and other pain-associated outcomes. While the effect on the overall cohort was of modest magnitude, the intervention resulted in a clinically meaningful improvement in pain interference for a substantial proportion of participants.

Upcoming Activities

June 2025: Start of the Wave 2 Study Follow-Up Period

July 2025: Final SMaRRT-HD survey administration for Wave 1 clinics

August 2025: 12-month PRO collection for Wave 1 clinics

August 2025: 12-month implementation evaluation surveys for Wave 1 Clinics

Ongoing: Enrollment of Wave 3 clinics

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