

Evaluation on the Application Effect of Humanistic Care in the Nursing of Hemodialysis Patients

Xiaoqing Luo, Ningning Li, Xiju Song, Li Cui*

Hemodialysis Center, West Coast Branch, The Affiliated Hospital of Qingdao University, Qingdao 266000, Shandong, China

**Author to whom correspondence should be addressed.*

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Abstract: This paper explores the application effect of humanistic care in the nursing of hemodialysis patients. Firstly, it expounds the application value of humanistic care in the nursing of hemodialysis patients. Then, it evaluates the effect by constructing an evaluation index system and combining with empirical analysis. Finally, it puts forward specific application measures and draws conclusions. The purpose is to provide reference for improving the nursing quality of hemodialysis patients, so as to enhance patients' quality of life and promote their physical and mental health.

Keywords: Humanistic care; Hemodialysis patients; Nursing work; Application effect; Evaluation

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1. Introduction

With the continuous advancement of medical technology, hemodialysis, as an important treatment method for patients with end-stage renal disease to survive, has attracted increasing attention to its treatment effect and patients' quality of life. However, hemodialysis patients suffer from physical pain, economic pressure and psychological suffering for a long time. The traditional nursing model often focuses more on disease treatment and monitoring of physiological indicators, but ignores the patients' psychological needs and humanistic feelings^[1]. Against this background, the application of humanistic care in the nursing of hemodialysis patients is particularly important. This study aims to explore the application effect of humanistic care in the nursing of hemodialysis patients, construct a scientific and reasonable evaluation index system through the analysis of relevant theories and practices, provide reference for the optimization of nursing work for hemodialysis patients, and further improve the quality of life of hemodialysis patients and promote their physical and mental health^[2].

2. The necessity of humanistic care in the nursing of hemodialysis patients

First, alleviating patients' psychological stress and improving negative emotions. Patients undergoing hemodialysis require long-term treatment. During the treatment process, factors such as pain, complications, and worries about prognosis easily cause patients to experience anxiety, depression, fear, and dread. If these negative emotions are not alleviated, they will not only directly affect patients' lives and their treatment compliance but also fail to improve patients' prognosis. Through psychological comfort, emotional communication, and other methods, humanistic care provides patients with psychological solace, making them feel cared for and loved. This enables patients to release psychological stress, rebuild confidence in treatment, and face the disease with a positive attitude^[3].

Second, enhancing treatment compliance and ensuring treatment effects. Hemodialysis treatment has strict requirements for patients' living habits, such as dietary control and regular work and rest. Poor compliance of patients will directly affect the treatment effect and even aggravate the condition. By establishing a trusting relationship with patients, humanistic care involves patiently explaining treatment plans and precautions, helping patients fully understand the importance of following medical advice. At the same time, personalized assistance is provided to address the difficulties patients encounter in the implementation process. For example, formulating a detailed diet plan for patients who struggle with dietary control can effectively improve their treatment compliance and ensure the smooth progress of hemodialysis treatment.

Third, harmonizing the nurse-patient relationship and improving nursing quality. Under the traditional nursing model, nurses mainly focus on disease treatment in their work, with insufficient communication and interaction with patients. The lack of communication between patients and nurses easily leads to estrangement in the nurse-patient relationship. Humanistic care takes patients as the core. Nurses are willing to listen to patients' thoughts and needs, and meet their reasonable demands, making patients feel valued. Good communication between nurses and patients can ease the nurse-patient relationship, thereby reducing nurse-patient conflicts and disputes. Patients are more willing to feedback their feelings, changes in disease conditions, and treatment experiences to nurses, which facilitates nurses to adjust nursing strategies in a timely manner and improve nursing quality^[4].

Fourth, conforming to the transformation of medical models and meeting patients' all-round needs. With the development of the medical model from the traditional biomedical model to the bio-psycho-social medical model, the traditional requirements for nursing work can no longer fully adapt to the development of this new model. The requirements for nursing work are no longer limited to solving patients' physical problems in the traditional sense but also need to address patients' psychological and social issues. During the treatment of hemodialysis, patients may be affected by changes in their social functions, social status, and social support systems to varying degrees. Through paying attention to patients' social support systems, humanistic care helps them rebuild social relationships and meet their psychological and social needs. This conforms to the requirements for nursing work under the modern medical model and realizes the all-round care for patients in nursing practice^[5].

3. Evaluation of the application effect of humanistic care in the nursing of hemodialysis patients

3.1. Construction of the evaluation index system

3.1.1. Selection principles

- (a) Scientific principle: The evaluation indicators must objectively and accurately reflect the final effect of

applying humanistic care in the nursing of hemodialysis patients, with verifiable scientific basis. The selected indicators should be based on the theories and research results of medicine, nursing, and other related disciplines, and be able to truly reflect the patients' health status and nursing effects^[6].

- (b) Comprehensive principle: The evaluation indicators should cover the patients' physical, psychological, social, and other aspects, reflecting the patients' quality of life in all dimensions as well as the nursing effects. Attention should not be limited to changes in the patients' physical indicators; instead, it should also reflect changes in their psychological state, social interaction ability, and other aspects.
- (c) Operability principle: The indicators should be concise and easy to implement, facilitating data collection and analysis with strong operability. The selected indicators can be obtained through conventional examinations, questionnaires, and other methods, without the need for complex equipment or advanced technical means.
- (d) Sensitivity principle: The evaluation indicators should be able to sensitively reflect the effect of changes in nursing measures on patients, so as to modify the nursing plan in a timely manner. When adjustments are made to the nursing measures, the evaluation indicators should show significant changes within a relatively short period, providing a basis for optimizing the nursing plan^[7].

3.1.2. Specific evaluation indicators

- (a) Physical Indicators: These mainly include the patients' biochemical indicators such as blood pressure, heart rate, serum creatinine, and blood urea nitrogen, as well as the incidence of complications. The test results of these indicators directly reflect the changes in the patients' condition and the therapeutic effect. By regularly testing these indicators and comparing the differences before and after the implementation of humanistic care nursing, the physical changes brought about by humanistic care nursing for patients can be directly observed.
- (b) Psychological indicators: The Self-Rating Anxiety Scale (SAS) and Self-Rating Depression Scale (SDS) are used to assess the patients' anxiety and depression respectively. In addition, the patients' psychological state and confidence in treatment can be understood through communication with them. The SAS and SDS scales have high reliability and validity, and can effectively evaluate the patients' psychological state^[8].
- (c) Social Function Indicators: These include the patients' social interaction ability, work ability, and self-care ability in daily life. The recovery of the patients' social function can be understood through questionnaires, interviews, and other methods. Social interaction ability can be evaluated by the frequency and quality of the patients' interactions with family members and friends; Work ability can be judged by observing whether the patients can work normally and their work efficiency; Self-care ability can be analyzed by observing the patients' daily living activities such as dressing, eating, and washing.
- (d) Satisfaction degree: Questionnaires are used to understand the patients' satisfaction with the nursing staff in terms of service attitude, professional skills, communication, and other aspects during the nursing process. The survey results on satisfaction can help nursing staff clearly understand the patients' needs and the problems existing in their own work, so as to make targeted improvements^[9].

3.2. Results of empirical analysis

3.2.1. Research subjects

A total of 100 patients who received hemodialysis treatment in our hospital from January 2024 to December 2024

were selected as the research subjects. Among them, there were 58 males and 42 females, aged between 35 and 75 years old, with an average age of 55 years old. All patients met the diagnostic criteria for end-stage renal disease and received regular hemodialysis treatment. The patients were randomly divided into an experimental group and a control group, with 50 cases in each group. There were no statistically significant differences ($p > 0.05$) between the two groups in terms of gender, age, disease condition, etc., indicating that the two groups were comparable.

3.2.2. Nursing methods

Patients in the control group received routine nursing care, including disease observation, treatment operations, and basic nursing care. On the basis of routine nursing care, patients in the experimental group were additionally given humanistic care nursing measures, and the specific measures are as described in the third part of this article. Both groups of patients received nursing care for 6 months.

3.2.3. Evaluation results

- (a) Physiological indicators: After nursing care, the biochemical indicators such as blood pressure, heart rate, serum creatinine, and blood urea nitrogen of patients in both groups were improved. However, the degree of improvement in the physiological status of patients in the experimental group was higher than that in the control group, and the difference was statistically significant ($p < 0.05$). Moreover, the incidence of complications in the experimental group was only 8%, which was lower than 20% in the control group, and the difference was statistically significant ($p < 0.05$). These results indicate that humanistic care nursing can play a certain role in improving the patients' physiological status and reducing the occurrence of complications.
- (b) Psychological indicators: After nursing care, the Self-Rating Anxiety Scale (SAS) score and Self-Rating Depression Scale (SDS) score of patients in the experimental group were (35.2 ± 4.5) points and (36.1 ± 5.2) points, respectively, which were significantly lower than those in the control group $[(48.6 \pm 5.8)$ points and (49.3 ± 6.1) points]. The differences were statistically significant ($p < 0.05$). This shows that humanistic care nursing can effectively alleviate the anxiety and depression of patients and improve their psychological state.
- (c) Social function indicators: After nursing care, the scores of indicators such as social interaction ability, work ability, and self-care ability of patients in the experimental group were all higher than those in the control group, and the data differences were significant ($p < 0.05$). Patients in the experimental group could participate in social interactions actively, some of them could resume employment, and their self-care ability was greatly improved.
- (d) Satisfaction indicators: The nursing satisfaction of patients in the experimental group reached 96%, which was higher than 78% in the control group, and the difference was statistically significant ($p < 0.05$). Patients gave high evaluations on the service attitude and communication of the nursing staff in the experimental group, believing that the nursing staff could fully consider the patients' own needs and provide good care and concern.

3.2.4. Result analysis

It can be known from the above empirical analysis that the application of humanistic care nursing in the nursing work for hemodialysis patients can improve the patients' physiological indicators to a certain extent, alleviate their

negative emotions, and enhance their social functions and nursing satisfaction. From this result, it can be indicated that humanistic care plays an important role in the nursing work for hemodialysis patients. The implementation of humanistic care nursing is due to the attention paid to the psychological needs of patients and the provision of individualized care for patients, which makes patients feel warm, thus actively cooperating with treatment and promoting their own recovery^[10].

4. Application measures of humanistic care in the nursing work for hemodialysis patients

4.1. Creating a warm and comfortable medical environment

A good medical environment can alleviate the anxiety of hemodialysis patients. In the dialysis room, some plants, decorations should be arranged, and light music should be played. The temperature and humidity should be adjusted to make patients enjoy the warmth of home during treatment. In addition, it is necessary to ensure that the dialysis room is quiet, reduce the interference caused by noise, and guarantee a good rest and treatment environment for patients. The layout of the dialysis room should be appropriately adjusted according to the age and preferences of dialysis patients. For example, nostalgic elements can be added for the elderly, such as placing some classic old photos and playing old songs, to make them feel cordial during treatment; for the dialysis room for young people, some fashionable magazines and green plants can be provided to make them feel comfortable with the aesthetic appearance of the dialysis room environment^[11].

4.2. Enhancing communication with patients

Nursing staff should take the initiative to communicate with patients, inquiring about their psychological state, living habits, and needs. During communication, it is essential to listen attentively to patients' expressions, respect their opinions and thoughts, and provide them with full understanding and support. Nurses may use plain language to explain disease-related knowledge, treatment methods, and precautions to patients. This helps patients gain a clearer understanding of their condition and boosts their confidence in treatment^[12]. Meanwhile, nurses should promptly address patients' questions and alleviate their concerns. Communication can take place before, during, or after treatment. Before treatment: Assess the patient's sleep quality, dietary status, and psychological state to ensure thorough preparation for treatment. During treatment: Pay close attention to the patient's feelings, engage them in light-hearted conversations to divert their attention, and reduce treatment-related discomfort. After treatment: Inform the patient of post-treatment precautions, check in on their feelings, and express gratitude for their cooperation^[13].

4.3. Providing personalized nursing services

Each hemodialysis patient has unique conditions, psychological states, and living needs. In response to this, personalized nursing services should be provided to every patient. Hemodialysis nurses should develop individualized care plans based on each patient's specific situation, including personalized dietary guidance, exercise recommendations, and psychological care. For example: for patients with diabetic nephropathy, dietary guidance focused on diabetes management should be provided to control blood glucose levels. For patients with negative psychological symptoms such as anxiety or depression, targeted psychological counseling should be offered to help improve their mood. When formulating personalized care plans, hemodialysis nurses should

communicate with both patients and their family members. Family members should be informed about the patient's living habits and family circumstances, so that nurses can design scientific and reasonable dietary and exercise arrangements based on the patient's actual situation. This avoids adverse impacts on treatment outcomes caused by improper diet or exercise. For patients with psychological issues, nurses may seek assistance from psychologists to jointly develop psychological care strategies ^[14].

4.4. Focusing on patients' social support

Social support plays a crucial role in promoting the rehabilitation of hemodialysis patients and improving their quality of life. Nurses should attach importance to patients' social support systems, encourage patients' family members and friends to show more care and attention to the patients, providing them with emotional comfort and daily life assistance. Organize group activities for patients, such as patient exchange meetings and health lectures. These activities allow patients to share experiences and feelings with one another, enhancing their sense of belonging and identity. Nurses may establish WeChat groups for communication with patients' family members, where they can regularly share knowledge related to patients' treatment and care, and answer family members' questions. This helps family members gain a better understanding of the patients and thus provide more effective support. When organizing group activities, nurses should take into account the physical fitness and interests of hemodialysis patients. Under the premise of ensuring patients' safety and the smooth progress of activities, the content should be selected for its strong fun and engagement ^[15].

5. Conclusion

This study analyzed the application effect of humanistic care in the nursing of hemodialysis patients. The results showed that humanistic care can effectively promote the improvement of hemodialysis patients' physiological indicators, alleviate their negative emotions, and enhance their social functions in various dimensions as well as nursing satisfaction. The implementation of humanistic care in the nursing of hemodialysis patients is necessary and beneficial, and it can be promoted and applied in clinical practice. Comprehensive humanistic care for hemodialysis patients can be achieved through various nursing measures, such as creating a warm and comfortable medical environment, strengthening communication with patients, providing personalized care, and emphasizing patients' social support. These measures contribute to the physical and mental health of hemodialysis patients. Additionally, designing reasonable and comprehensive evaluation indicators enables an objective and effective assessment of patients' satisfaction with the implementation of humanistic nursing care. This provides a basis for improving the quality of humanistic care in the nursing of hemodialysis patients.

Disclosure statement

The authors declare no conflict of interest.

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