

## **EFFECTIVE COMMUNICATION AS A TOOL IN REDUCING RENAL GRAFT LOSS: IMPORTANCE OF MULTI-PROFESSIONAL TEAM TO INCREASE ADHERENCE TO TREATMENT**

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**INTRODUCTION:** Renal transplantation (KTx) is the alternative to the treatment of Chronic Kidney Disease (CKD) that offers the best long-term results. With increasing numbers of kidney grafts, there is a growing concern about minimizing post-transplant risks. Effective communication promotes patient safety; their routine use contributes to significant results during the therapeutic process. **OBJECTIVE:** To analyze the importance of multi-professional work in the renal transplantation team in order to provide adequate communication to the patient, in order to result in more effective treatment.

**MATERIALS AND METHODS:** A bibliographic review of the electronic databases Scielo, Pubmed and Google Scholar, in the period 2015-2018, including the terms "renal transplantation", "loss of graft" and "effective communication", "Graft loss" and "effective communication".

**RESULTS:** A total of 36 articles were identified with the mentioned keywords. A successful Kidney Transplantation Programme requires adequate preoperative evaluation (evolving physicians in different specialities as nephrology, urology, cardiology, endocrinology, gynecology, psychiatry, e.g. plus multi-professional team, composed by nurse, pharmacist, nutritionist, social service worker, psychologist, e.g.), a large surgical procedure by trained and experienced staff, and constant vigilance in the postoperative follow-up. Individually, the patient may present a variable understanding of their underlying disease (CKD), with several doubts and sometimes inadequate adherence to renal replacement therapy. A sufficient understanding in the signature of the consent term for waiting list entry is necessary for an appropriate adherence to the postoperative pharmacological treatment. Patients should understand that for the success of the transplant it will be necessary to use multiple medications aimed at maintaining immunosuppression, treatment of concomitant chronic diseases and prevention of opportunistic infections. Errors in dosages or dosage may result in rejection. The outpatient clinic should be composed of a multiprofessional team that ensures adequate support to the patient, minimizing maladaptation in a situation of polypharmacy. Anxiety-depressive states may alter the ability to verbalize feelings and doubts (alexithymia). The patient's "empowerment" in knowing his current and future condition is part of an educational process that must begin early.

**CONCLUSIONS:** The involvement of a multiprofessional team is essential for the success of a transplantation programme. Teaching the necessary care in the administration of medicines and understanding the restrictions of transplantation can only be obtained with simple and clear communication to provide all the information necessary for the treatment. In this sense, effective communication can prolong the survival of patients and delay the progression of loss of graft function