Gender effect on quality of life in hemodialysis patients: response to Einollahi and Motalebi

Tun-Jun Tsai

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We appreciate very much the kind comments [1] related to our manuscript entitled “Women on hemodialysis have lower self-reported health-related quality of life scores but better survival than men” [2]. In a study of health-related quality of life (HRQoL), socioeconomic status, family support, social support, and even spiritual resources may influence the reported HRQoL by investigation subjects [3, 4]. Hence, regional, ethnic, and national disparities exist in the study of HRQoL.

Our previous survey showed that only 27.9 % of Taiwan hemodialysis patients were employed [5]. In Taiwan, many women are housewives, i.e. they keep house and take care of their children, husband, and even parents. They have much work to do but are coded as unemployed. In our previous survey, these retired or unemployed female patients responded as having no any economic income although they received financial aid from their family and social security program. The socioeconomic status cannot be precisely reflected by questionnaires.

The objective of our study was to explore whether there was a sex difference in HRQoL and survival among hemodialysis patients. We acknowledge that socioeconomic status has a great impact on HRQoL. However, a sex difference in relation to socioeconomic status in our survey does present. Over-adjustment by the variables of economic income, employment status, family support, and

social support would wipe out the sex difference in HRQoL statistically. Our study results aroused more attention to a sex difference in the clinical care of hemodialysis patients. Both the underlying biological and socioeconomic causes of such sex difference need to be evaluated.

Conflict of interest None.

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T.-J. Tsai (✉)
Division of Nephrology, Department of Internal Medicine,
National Taiwan University Hospital, No. 7, Chung-Shan South
Road, Taipei 10016, Taiwan, ROC
e-mail: tjtsai@ntuh.gov.tw