

# Grief Counseling for People Living With Kidney Diseases: A Nonclinical Perspective

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The emotional and psychological impacts of kidney diseases are often overlooked in nephrology practice (1). Chronic kidney disease (CKD) and kidney failure, including their treatment through dialysis or kidney transplantation, represent profound, life-altering experiences for patients (2). Beyond the physical demands of these conditions, the emotional and psychological impacts are often substantial and pervasive. One of the most common responses stemming from patients while grappling with their condition is grief. Described as the normal and natural reaction to loss, grief encompasses both anticipatory and actual responses to a wide range of experienced or perceived losses, which can be social, physical, emotional, spiritual, or financial in nature (3, 4).

Beyond the rising global threat of kidney diseases (5, 6), grief itself is an important public health issue that can lead to significant health problems (7). Grief has been associated with depression, anxiety, and reduced quality of life (3–7). The emotional burden of grief can activate the hypothalamic-pituitary-adrenal axis, leading to increased cortisol and stress hormones, which in turn suppress the immune system, promote chronic inflammation, and elevate the risk of cardiovascular issues (8). Unresolved grief in patients undergoing dialysis can intensify the already elevated risk of complications, further reducing treatment adherence and adversely affecting patient survival and overall health outcomes (9).

Addressing grief through psychodynamic support and nonclinical grief counseling (NCGC) can enhance the well-being of patients with CKD and kidney failure (10–13). As a crucial aspect of holistic care in chronic disease management, effective NCGC has been shown to help patients process their emotions, find meaning in their experiences, and develop positive coping strategies (10, 12, 13). More importantly, NCGC can provide a strong sense of community and support, alleviating feelings of isolation and loneliness—making the integration of grief health professionals into nephrology practice a vital step toward meeting the comprehensive, emotional, and psychological needs of these patients (11).

By prioritizing emotional and psychological health alongside physical treatment, nephrologists can enhance the

overall quality of life for individuals with kidney diseases. Because NCGC focuses specifically on the emotional process of mourning and loss, rather than diagnosis and treatment of mental health conditions, it is distinct from clinically based approaches like psychological counseling (12). Whereas psychological counseling addresses a broad range of mental health issues, NCGC hones in on helping patients process and cope with specific feelings of loss associated with their condition (12, 13).

Effective components of NCGC include emotional expression, validation, and the development of coping strategies in a safe, nonjudgmental environment, in which patients share their experiences (Figure) (12–14). This expression is crucial, as patients may feel isolated in their grief, believing that others may not understand their pain. By unburdening their emotion, patients can alleviate the weight of unspoken grief by using strategies that have been shown to help patients manage emotional aspects of their disease such as mindfulness, relaxation techniques, journaling, and creativity (15).

Although the benefits of NCGC are well-established (8–11), several challenges remain. Access to NCGC may be limited, especially in rural or underserved areas. Stigma surrounding mental health support can deter some patients, particularly older individuals and those from cultures in which mental health issues are taboo. Addressing these barriers requires collaboration among nephrologists, community organizations, and patients' families and friends to ensure that individuals with kidney diseases receive the emotional support they need.

Often as primary care practitioners for patients on dialysis, nephrologists must recognize and address grief to truly provide holistic care that extends beyond physical symptoms. By integrating NCGC into nephrology practice, practitioners can better support patients' emotional needs, which can lead to improved treatment adherence and overall health outcomes. Equally important is training nephrologists to identify early signs of grief, which would enable timely referrals to NCGC and other psychological services.

By equipping patients with the tools and support needed to navigate their journey with resilience and hope,

nephrologists can greatly enhance patients' quality of life. It is essential for nephrologists to recognize the importance of integrating NCGC into routine care for patients living with kidney diseases, ensuring that patients' emotional well-being receives the attention it deserves. ■

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**Figure. Components of nonclinical grief counseling**

