

NURSING PRINCIPLES IN HYPERTENSIVE PATIENTS

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Abstract: Cardiovascular health status has become one of the global problems of mankind due to its universality and inherent interferences with the priority directions of industrialization, environmental, socio-economic development and cultural relations. Epidemiological studies have shown that cardiovascular diseases are influenced by the living standards, human behaviour, opportunities for healthcare and last but not least by environmental variations. In the presence of one or more risk factors in a person, in population and clinical studies the concept of “global risk” is used. This term defines the overall result of the action of risk factors on the cardiovascular health of the individual. The aim of this study is to evaluate the main nursing problems during hospitalization, identifying interventions that improve quality of life and improved training methods of such patients regarding lifestyle, understanding, raising awareness and controlling the disease. The study was conducted at the Railway Hospital of Sibiu on a group of 70 patients hospitalized within the Internal Medicine Department between January 1 and March 1 2012, to whom a questionnaire containing 14 questions was applied. After analyzing the responses of patients, it can be concluded that patient satisfaction is very high, but 46 % of patients have opted to increase the quality of care and improve community health. Enhancing health education of the population on hygienic-dietary regime, medication, evolution, complications and medical checks is necessary. Intense involvement of all nurses with the cooperation and support of the family is also necessary.

Cuvinte cheie:
hipertensiune arterială,
nursing, principii

Rezumat: Starea de sănătate cardiovasculară a devenit una din problemele globale ale omenirii prin caracterul de universalitate și prin interferențele inerente cu preocupările prioritare pe direcțiile industrializării, ecologice, dezvoltării relațiilor socio-economico-culturale. Studiile epidemiologice au demonstrat că bolile cardiovasculare sunt influențate de nivelul de trai, comportamentul uman, posibilitățile de asistență sanitară și nu în ultimul rând de variațiile mediului ambiant. În legătură cu prezența unuia sau mai multor factori de risc la o persoană, se folosește în studiile populaționale și clinice noțiunea de „risc global”. Acest termen definește rezultatul global al acțiunii factorilor de risc asupra stării de sănătate cardiovasculară a individului. Scopul lucrării este evaluarea principalelor probleme nursing pe perioada spitalizării, identificarea intervențiilor care să amelioreze calitatea vieții și îmbunătățirea metodelor de instruire a acestor pacienți cu privire la stilul de viață, înțelegerea, conștientizarea și controlul asupra afecțiunii. Studiul a fost efectuat la Spitalul General C.F. Sibiu pe un lot de 70 de pacienți internați pe secția Medicină Internă în perioada 1 ianuarie – 1 martie 2012 la care s-a aplicat un chestionar conținând 14 întrebări. În urma analizării răspunsurilor pacienților s-a concluzionat că gradul de satisfacție al pacienților este foarte ridicat, dar 46 % dintre pacienți au optat pentru creșterea calității actului medical și îmbunătățirea calității asistenței comunitare. Intensificarea educației sanitare a populației privind regimul igienico-dietetic, medicație, evoluție, complicații și controale medicale este necesară, precum și implicarea mai intensă a asistentei medicale cu cooperarea și sprijinul familiei.

INTRODUCTION

It is known that cardiovascular diseases are the first cause of death in the world, especially in the developed countries. Among them, essential hypertension (hypertension) is a very common health problem. Hypertension is a disease that never heals, but it treats. Patients with hypertension require constant medical supervision for life. Hypertensive descendants will be monitored before the onset of the disease, from a young age. They will be warned and advised to avoid risk factors (stress, alcohol, smoking, obesity, diabetes, dyslipidemia).(1)

Hypertension is one of the most common cardiovascular diseases. Its presence varies between 5 – 7 % in

less developed countries and between 10 – 20 % in industrialized countries. It is estimated that approximately 50 % of cases of hypertension is mild, even asymptomatic, being discovered by chance. Framingham study showed that small increases in blood pressure are potentially dangerous, helping to reduce life expectancy.(1)

Hypertension occurs after the age of 30, its frequency increases with age in general, is similar in both genders between 40 – 60 years of age and is common in women at the age of 60 years old. Through its frequency, the manifestations and complications produced, hypertension is a major cause of morbidity and disability in the adult population. Hypertension is

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also a risk factor for various diseases (coronary atherosclerosis, heart failure, stroke, renal failure).(1)

Hypertension treatment always begins by correcting lifestyle and addressing risk factors (obesity, alcohol). In case of failure, after a variable period, the drug treatment will begin. Treatment, preferably the easiest, continues throughout life, maintaining the dose determined by the doctor, even if blood pressure is normalized. Regardless of age, blood pressure should be maintained within normal limits.(2)

PURPOSE

The aim of this study is to evaluate the main nursing issues during hospitalization, to identify interventions that improve quality of life and the training methods of such patients on lifestyle, understanding, raising awareness and controlling the disease.

METHODS

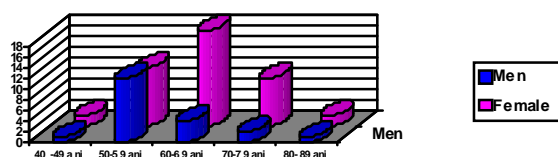
The study was conducted at The Railway Hospital of Sibiu on a group of 70 patients admitted within the Internal Medicine Department between 1 January and 1 March 2012 to whom a questionnaire containing 14 questions was applied. The content of the questionnaire is:

1. Age and sex of the patient;
2. The patient's occupation;
3. Area of origin;
4. How often do you go to your family doctor?
5. Are there in your family people suffering from hypertension?
6. Are you suffering from obesity?
7. Do you have your cholesterol above or below the normal limit?
8. Do you take the medical treatment prescribed by the doctor?
9. During hospitalization, did the nurse explain you the diet you need to follow?
10. During hospitalization, did the nurse explain you the side effects of medication?
11. Do you smoke? If yes, how many cigarettes per day?
12. How often do you practice physical activity?
13. Are you satisfied with the healthcare provided?
14. What do you think it should be improved in healthcare?

RESULTS

Of the 70 patients with hypertension interviewed, 42 were female and 28 male, 25 patients were from rural and 45 from urban area. Regarding the sample distribution by age and gender, there is a net predominance of women aged between 60 – 69 years old, followed by men in the age group of 50 – 59 years old, while the lowest frequency is given by the men between 40 – 49 years old (figure no. 1). In terms of occupation, 53 of the patients were retired, 5 were employees, 7 were without occupation, and 5 were unemployed.

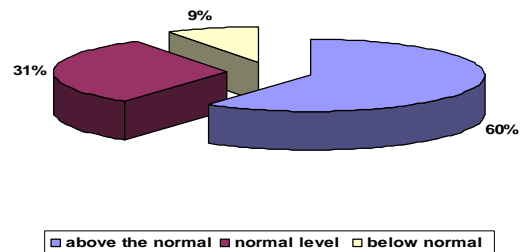
Figure no. 1. Patients' distribution according to age and gender



When asked if patients go regularly at the family doctor for advice, 48 % of patients said yes and 52 % responded negatively. Regarding family history, 54 patients responded that they had in their family persons suffering from hypertension. Regarding the presence of obesity, 78 % are obese.

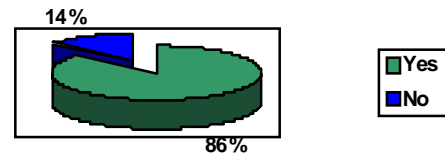
Of the 70 patients interviewed, 42 patients responded that they had their cholesterol above the normal, 22 patients had normal cholesterol levels and 6 patients below normal – figure no. 2.

Figure no. 2. Patients' distribution according to level of cholesterol



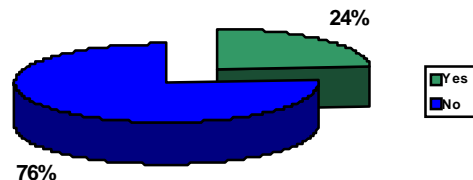
At the question referring to treatment compliance by patients, 86 % of them said yes and only 14 % answered negatively – figure no. 3.

Figure no. 3. Patients' distribution according to treatment compliance



Regarding the question "During hospitalization, did the nurse explain you the diet you need to follow?", 24% of patients answered yes – figure no. 4.

Figure no. 4. Patients' distribution according to information received about diet

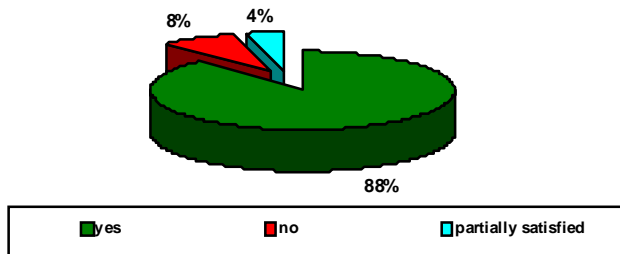


Regarding the side effects of medications, 43 % of patients received information from nurses. From the group of patients questioned, the majority (84 %) said they smoked. Among those who said they smoke, more than half said they smoked a pack of cigarettes or more per day. Alcohol was confirmed by almost half of the patients surveyed (49 %). Regarding the question on physical activity, it was found that 46 % practiced physical exercises weekly, 32 % monthly and 22 %

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daily. When asked "Are you satisfied with the healthcare provided?" 88 % of patients responded affirmatively – figure no. 5.

Figure no. 5. Patients' distribution according to their point view on the health care provided



When asked "What do you think it should be improved in healthcare?", 46 % of patients have opted to increase the quality of care in hospital, the remaining patients opting for the improvement of the quality of community assistance.

DISCUSSIONS

Hypertension is considered "an adjustment disease" in whose pathogenesis there are involved genetic and environmental factors. The share of each of them varies from one type etiology to another, from one hypertensive to another. The fact that the etiology also involves genetic factors should not be regarded as a fatality. Some etiopathogenic component of the external environment (salt intake, stress, use of prohypertensive drugs) should be fought against, which thus can mitigate the severity of disease in a considerable number of people. Prophylaxis refers to lifestyle changes: the active life that combines physical and mental exercise, practicing different sports, rational nutrition, both in quantity and quality.(2)

Nurse holds a very important position in the care of hypertensive patients. Its role lays in the character of cardiovascular disease such as hypertension, requiring prolonged hospitalization, so continued surveillance.(3)

The nurse has a duty to record all data on pulse, urine, blood pressure, edema, diet, medication etc. She should ensure the patient' physical and mental rest, which in hypertension are essential. We must not forget the disadvantages of prolonged bed rest, for which it is necessary to recommend the choice of seating position. Often, hypertensive patients are unable to do it themselves, so it is the nurse who must ensure and follow the correct position when sitting in bed, linen change, transportation, the massage to legs and feet daily to prevent thrombosis. The daily toilet of the sick also falls in the nurse's responsibility. She should not forget that a patient with advanced hypertension is prohibited to make the toilet effort daily. Equally important is the mental rest. In hypertension, diet is often a key factor. A diet without liquids, salt restriction can often be more useful than a series of drugs. In the treatment of high blood pressure, it should be taken into consideration the stage of the disease, the compliance of the patient, the treatment efficiency and the cost of treatment.(3)

For any treatment strategy used, it is necessary to inform and educate hypertensive patients, who should know the importance of the effective participation in treatment (treatment stages and its effects), the impact of therapeutic measures on the quality of life are also essential for treatment compliance. The major elements of the patient's life that can be influenced by certain classes of drugs concern: cognitive abilities, sleep

disorders, psychiatric symptoms, sexual function and everyday life satisfaction.(4)

CONCLUSIONS

1. In most cases, hypertension was associated with other cardiovascular risk factors (smoking, obesity, dyslipidemia, sedentary).
2. The patient satisfaction is very high, but 46 % of patients have opted for the increase of the quality of care and the improvement of community health.
3. Enhancing health education of the population on hygienic-dietary regime, medication, evolution, complications and medical checks is essential. As well as the intensive involvement of all health professionals along with the cooperation and support of the family.

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