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Cuidados de enfermagem a pacientes com condições crônicas de saúde: uma revisão integrativa

Nursing care for patients with chronic health conditions: an integrative review

Cuidados de enfermería para pacientes con problemas de salud crónicos: revisión integradora

Clarissa Galvão da Silva1; Luciana Batalha Sena2; Isaura Leticia Tavares Palmeira Rolim3; Santana de Maria Alves de Sousa4; Ana Hélia de Lima Sardinha5

How to quote this article:

ABSTRACT

Objective: To describe the nursing care to individuals with chronic health condition. Methods: An integrative literature review conducted from November 2014 to January 2015, through search using the controlled descriptors: “nursing care”, “chronic disease” and “adult health” in the databases SciELO, LILACS, MEDLINE/PubMed, BDENF and Cochrane. Seven studies complied with the inclusion criteria, mainly cross-sectional studies. Results: Nursing care identified in the studies analyzed were: diagnosis and nursing interventions, nursing consultations, practice with technology, patient assessment of chronic illness care, health care quality, professional and client relationship, technical procedures and emotional skills. Conclusion: It was concluded that nursing care followed different content, Evidencing the need for standardization in the use of Nursing Care Systematization.

Descriptors: Nursing Care, Chronic Disease, Adult Health.
RESUMO

Objetivo: Descrever os cuidados de enfermagem a indivíduos portadores de condição crónica de saúde. Métodos: Revisão integrativa da literatura realizada por meio da busca, nos períodos de novembro de 2014 a janeiro de 2015 com os descritores controlados: "cuidados de enfermagem", "doença crônica" e "saúde do adulto" nas bases de dados SciELO, LILACS, MEDLINE/Pubmed, BDENF e Cochrane. Sete estudos atenderam aos critérios de inclusão, prevalecendo dentre eles os estudos transversais. Resultados: Os cuidados de enfermagem identificados nos estudos avaliados foram: diagnósticos e intervenções de enfermagem, consultas de enfermagem, prática com a tecnologia, avaliação de cuidados de paciente com doença crónica, qualidade da assistência, relação profissional e cliente, procedimentos técnicos e habilidades emocionais. Conclusão: Conclui-se que os cuidados encontrados seguiram diferentes conteúdos, evidenciando a necessidade de padronização no uso da Sistematização da Assistência de Enfermagem.

Descritores: Cuidados de Enfermagem, Doença Crónica, Saúde do Adulto.

RESUMEN

Objetivo: Describir los cuidados de enfermería a personas con enfermedad crónica. Métodos: Revisión integradora realizada mediante la búsqueda, en el periodo comprendido entre noviembre 2014 -enero 2015 con los descritores controlados: “atención de enfermería”, “enfermedad crónica” y “salud de los adultos” en las bases de datos SciELO, LILACS, MEDLINE/ PubMed, BDENF y Cochrane. Siete estudios cumplieron los criterios de inclusión, donde predominaron los estudios transversales. Resultados: Los cuidados de enfermería identificados en los estudios analizados fueron: diagnóstico y las intervenciones de enfermería, visitas de enfermería, práctica con la tecnología, la evaluación de la atención al paciente con enfermedad crónica, la calidad asistencial, la relación profesional y el cliente, procedimientos técnicos y las habilidades emocionales. Conclusión: Se concluye que la atención se encuentra seguida contenido diferente, destacando la necesidad de la normalización en el uso de la sistematización de la asistencia de enfermería.

Descritores: Cuidado de Enfermería, Enfermedad Crónica, Salud del Adulto.

INTRODUCTION

The changes undergone by the world’s population in food, life expectancy and causes of death redefined the susceptibility profile of the disease, that is, socioeconomic and cultural changes reflected in poor eating habits, sedentary lifestyle and consequent overweight. The combination of these factors to the aging population favored the occurrence of chronic conditions.¹

Chronic conditions are health problems that require ongoing management over a period of several years or decades, requiring a certain level of permanent care. They involve both communicable diseases (for example, HIV/AIDS) and noncommunicable diseases (for example, cardiovascular disease, cancer, and diabetes) and long-term mental disorders, physical disabilities and structural impairments (for example, amputations, blindness and joints disorders).²

According to the World Health Organization², chronic conditions are increasing at an alarming rate, reaching, by the year 2020 78% of the global burden of disease in developing countries. Individuals with chronic conditions face different processes of change arising from limitations, frustrations and losses, thus requiring changes to daily habits, the roles and activities they play, changes that trigger a new structure of their lives.³ ⁴

According to Mendes⁵, care for chronic conditions should involve a multidisciplinary team that works with scheduled visits and monitoring of patients; these scheduled visits are structured based on clinical guidelines built by evidence in relevant clinical information and organized actions so that patients receive appropriate care; they can be individual or in groups and include attention to acute exacerbations of chronic conditions, preventive, educational actions and actions supported self-care and monitoring system of those patients, carried out by members of health teams.

In this context, nursing is presented as the profession that directly participate in family training for care, because it has training in its essence directed to the education of the patients assisted.⁶ Thus, it should guide families and caregivers regarding the preparation, training and teaching techniques and concepts for care, promoting coexistence and the maintenance of a healthy living condition of the patient with a chronic condition.⁷

From this understanding, there is the concern to know the nursing strategies used in the care of individual/family who experiences a chronic condition. In this sense, the objective of this study was to describe nursing care to individuals with a chronic health condition.

METHODS

This is an integrative review of nursing care to individuals with a chronic health condition. This method was chosen due to being wider, concerning the various types of reviews and allow the inclusion of results from different methodologies, providing a synthesis of knowledge on the subject studied.⁸

The steps involved in the research included: choice of topic, research question, search or sampling in the literature, categorization of studies, evaluation of studies, interpretation of results and presentation of the review. The main question of the research followed the PICO⁹ strategy, which is an acronym for Patient, Intervention, Comparison and Outcomes that are the key elements of the research question and the construction of the question for the bibliographic search of evidence and determined by “What is the nursing care for individuals with chronic health condition?”

The location of the studies occurred through access to available online collections. Databases were selected in the Virtual Health Library SciELO, LILACS, MEDLINE/ PubMed, BDENF, and Cochrane, using the following keywords: nursing care, chronic disease and adult health, which were crossed with each other. The search was
conducted by two trained authors independently and concomitantly from November 2014 to January 2015.

The inclusion criteria for the recovery of the works were scientific articles available in full and for free, in Portuguese, English or Spanish, published from 2003 to 2014, that addressed nursing care for individuals with chronic health conditions. The exclusion criteria were articles without abstract, literature reviews, editorials, monographs, dissertations, theses, books, chapters, letters and papers which appeared in more than one database.

After data collection, through the intersection of the above keywords, it was obtained a total of 259 articles and later the criteria was selected: available, English, Portuguese and Spanish, from the last ten years. Thus, there were 88 articles, of which, 63 were indexed in MEDLINE/PubMed, 15 in LILACS and 10 in BDENF. There were no results at other bases after crossing the keywords. Then, after the reading of the abstract, it was found that 11 articles answered the main question, however four articles were not available for free, so they were excluded. Seven articles were included in the sample.

To categorize the data from the selected articles, a tool to ensure that relevant data were extracted was used, minimizing the risk of transcription errors and ensuring the accuracy of information. For this, the instrument included the journal, publication year, country, author, title, type of study, objectives, results and conclusion.

The data were organized in tables for the synthesis of the results with information that helped in the data organization and then conducted the analysis of thematic units.

RESULTS

In this integrative review, seven original articles were analyzed that met the selection criteria previously established and they are in the summaries tables below, according to the journal, year/country, title, author, type of study, objectives, results and conclusion (Table 1) (Table 2) (Table 3).

Table 1 - Presentation of the sample according to the journal, year/country, title, author, type of study, objectives, results and conclusion. São Luís, 2015

<table>
<thead>
<tr>
<th>Journal</th>
<th>Year</th>
<th>Country</th>
<th>Author</th>
<th>Title/type of study</th>
<th>Objective</th>
<th>Results</th>
<th>Conclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rev HCPA</td>
<td>2007</td>
<td>Brasil</td>
<td>Franzen E, Almeida MA, Aliti G, Bercini RR, Menegon DB, Rabelo ER</td>
<td>Adults and elderly with chronic diseases: implications for nursing care</td>
<td>Cross-sectional study</td>
<td>To identify nursing diagnoses in the healthcare practice of elderly patients admitted to HCPA.</td>
<td>Diagnosis/Intervention: Changes in nutrition/diet acceptance; self-care deficit/carry out bed bath; risk for infection/implementing routines of care in venous puncture and ineffective breathing pattern/checking respiratory pattern.</td>
</tr>
<tr>
<td>Gac Sanit</td>
<td>2011</td>
<td>Espanha</td>
<td>Badiaa JG, Santos AB, Segura JCC, Casellas MDC, Lombardo FC, Tebar AH, et al.</td>
<td>Nursing workload predictors in Catalonia (Spain): a home care cohort study</td>
<td>Cohort study</td>
<td>To identify the characteristics of chronic patients and their environment to predict the nursing workload required one year after inclusion in a home care program.</td>
<td>Patients receive 8.7 nursing visits per year. Risk factors for more home nursing visits: male, dependence for daily activities and bedsores.</td>
</tr>
<tr>
<td>Heart Lung</td>
<td>2010</td>
<td>USA</td>
<td>Brennan PF, Casper GR, Burke L, Johnson KA, Brown R, Valdez RS, et al.</td>
<td>Technology enhanced practice for patients with chronic cardiac disease: Home Implementation and Evaluation</td>
<td>Cohort study</td>
<td>To design and evaluate an innovative model of nursing home-care referred as practice for technology.</td>
<td>Patients exposed to TEP demonstrated better quality of life and self-management of chronic heart disease during the first four weeks, more than usual care patients without planned hospital or doctor visits.</td>
</tr>
</tbody>
</table>
Table 2 - Presentation of the sample according to the journal, year/country, title, author, type of study, objectives, results and conclusion. São Luís, 2015

<table>
<thead>
<tr>
<th>Journal Year Country Author</th>
<th>Title/type of study</th>
<th>Objective</th>
<th>Results</th>
<th>Conclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>BMC Health Services Research 2012 Holanda Cramm JM, Nieboer AP13</td>
<td>The chronic care model: congruency and predictors among patients with cardiovascular diseases and DPOC in the Netherlands Cross-sectoral study</td>
<td>To assess how nursing care for patients with stroke and DPOC align with the model of chronic care in health practices</td>
<td>The PACIC score found was lower than in previous studies of health plans in the US, but similar to a European primary care. The PACIC score was associated with age and depressive symptoms in both groups of patients.</td>
<td>Younger and less depressed patients have higher PAIC scores, which indicates that their care is better aligned to the CCM.</td>
</tr>
<tr>
<td>Canadian Family Physician 2012 Canadá Houle J, Beaulieu MD, Lussier MT, Grande C, Pellerin JP, Authier M, et al...14</td>
<td>Patients’ experience of chronic illness cares in a network of teaching settings Cross-sectoral study</td>
<td>To evaluate the provision of chronic disease care from the patient’s perspective and examine their main relationships</td>
<td>The results indicate that, in general, the care did not occur or occurred sometimes. However the quality score is 80%, that is, professionals act as clinical guidelines for the care to chronic patients.</td>
<td>Patients with less education reported receiving less care; the professional-patient relationship was the factor with the highest acceptance rate.</td>
</tr>
<tr>
<td>Caderno de Saúde Pública 2007 México Martinez FJM, Ibarra EH15</td>
<td>Las enfermedades crónicas desde la Mirada de los enfermos y los profesionales de la salud: un estudio cualitativo en México Qualitative approach</td>
<td>To compare the views of health professionals and patients for chronic diseases, and analyze the relationship between these two groups.</td>
<td>Participants pointed out that there are unequal relationships between health professionals, families, and the chronically ill as to care, but that relationships between patients, regardless of the chronic condition, are equal.</td>
<td>Care must involve coping, they are complex and need to go beyond prescription.</td>
</tr>
</tbody>
</table>

Table 3 - Presentation of the sample according to the journal, year/country, title, author, type of study, objectives, results and conclusion. São Luís, 2015

<table>
<thead>
<tr>
<th>Journal Year Country Author</th>
<th>Title/type of study</th>
<th>Objective</th>
<th>Results</th>
<th>Conclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Escola Anna Nery 2009 Brasil Montovani MF, Lacerda MR16</td>
<td>The nursing process of taking care of patients with chronic diseases Qualitative approach</td>
<td>To identify the elements of the care process performed by nurses in patients with chronic heart disease</td>
<td>The nurse performs care in the execution of nursing actions through technical procedures, as to observe signs and symptoms to prevent the patient having evolution in complications pictures. The nurse sees care as the application of scientific knowledge in daily life associated with technical and emotional skills.</td>
<td>The study participants use various theoretical models of nursing, demonstrating the lack of an institutional philosophy that favors the basis for the process of care.</td>
</tr>
</tbody>
</table>

As stated before, two articles showed the reality of Brazil, one from Spain, one from the USA, one from the Netherlands, one from Canada and one from Mexico, revealing heterogeneity in research. As regards as the type of journal, three were published in general nursing journals and four in medical journals.

Regarding the design of the study, two were qualitative approach studies, three were cross-sectional studies and two were cohort studies. Thus, three of the studies had evidence level V, two presenting evidence level VI and two had evidence level III.
DISCUSSION

Regarding the nursing consultation, it is contemplated as a private activity of the nurse, in the law of professional practice no. 7,498/86, and has been effective in practice by nurses that believe in it. Studies showed that nurses should provide their professional practice quality care; they must be aware of the importance of implementing the Systematization of Nursing Assistance (SAE) during nursing consultations, as well as the work of this professional becomes more valued, individualized and qualified.

And yet, specialists report that the nursing consultation must, systematically, understand the achievement of a historical, with a focus that goes beyond biological aspects. The elaboration of nursing diagnostics should, in turn, contemplate actions, whether or not consecrated taxonomies are adopted, the denomination of problems or needs of care, and finally, the care plan that includes techniques, norms and procedures that guide and control the execution of actions aimed at obtaining, analyzing and interpreting information about clients' health conditions, decisions regarding orientation and other measures that may influence the adoption of health-friendly practices.

Thus, the identification of nursing diagnoses and appropriate interventions are highlighted to organize and direct assistance. In the literature, it appears that other authors emphasize that the nursing diagnoses have been used to support the planning of care and nursing interventions, however they should not be used in isolation but should be part of the systematization of assistance.

In their everyday, nursing professionals use care strategies for coping with the chronic condition. Strategy is understood a driver for executing an activity aiming to achieve certain goals, and is characterized by flexibility that is the ability to adapt to the context in which it will be used.

Thus, at the institutional level, the identified strategies are related to administrative, human resources and assistance. About administrative aspects, we have to include treatment control visits of chronic disease; about aspects of human resources highlighted the training and technical preparation of professional staff to provide care, and welfare issues concerned the implementation of actions that changed the method of assistance services.

It is noticed that the nursing workplace demands more responsibilities than assistance, that is, the management actions include the management of human resources, the structure and the organization of work to obtain adequate conditions of service and work, as care is intrinsically linked with the administration and education.

Since the nursing theories were developed from the evolution of this area of knowledge to build their knowledge to consolidate as a science, we can see in the study in which the nurse sees care as the application of scientific knowledge in daily life associated with technical and emotional skills, thus demonstrating their theoretical basis for practice.

Assistance to patients with chronic condition requires professional skills, so that is complex and not fragmented, although scientific knowledge based on the theoretical foundations of nursing should be based on the service, the specific knowledge of the needs of patients is necessary, since there is a weakness, especially emotional, installed.

Considering that care is complex and needs to go beyond prescriptions, authors point out that according to the new concepts of chronic conditions, the quality of life of patients and their families is important, highlighting the patient role in achieving this goal. The patient is not a passive participant in the treatment; rather it is considered a “health producer.”

The analyzed studies show the need for quality of care of both health professionals and health institutions. Thus, WHO reveals that patients with chronic problems need more support, not only of biomedical interventions, but require careful planning and attention able to predict their needs. These individuals need integrated care that involves time, scenarios and health providers, as well as training to self-management at home. Patients and their families need support in their communities and comprehensive policies for the prevention and effective management of chronic conditions. The optimal treatment for chronic conditions requires a new health care model.

The study evaluates the nursing care to patients with chronic disease, revealing quality in the professional-patient relationship, particularly about relational continuity and communication elements that we believe are strongly associated with the degree of care reported by the patient. These results are consistent with previous studies and confirm the importance of having time to discuss with patients their needs and expectations, and to establish a collaborative relationship to support more effectively to manage their chronic disease.

Therefore, it is necessary to establish communication and trust between the nurse and the patient to guide, comfort, help, and thus, assist in adapting the period, perceiving as a stressor by the patient. The nursing guidelines are an important part of nursing care and help patients and their families facing the health-disease process.

Regarding the use of health technologies, the studies reaffirm that the integration of information technologies in nursing care is a complex and global challenge when seek, trough this technologies, the interaction, association, interdependence and inter-relation of constituent components or related directly and indirectly to care, whether social, educational, affective, economic, political or psychological.
CONCLUSION

Nursing care identified in this study were: diagnosis and nursing interventions, nursing consultations, practice with the technology, evaluation of care of patients with chronic disease, health care quality, patient-professional relationship, technical procedures and emotional skills.

We realized how nursing care found followed different content because it is not clear in the researches addressed the care that was actually approached, as they are numerous and different approaches which demonstrate a need for standardization in the use of Systematization of Nursing Care.

In spite of the limitations that all work of such nature involves, such as difficulty in access and dependence on available studies, we believe that there is a need to provoke reflections in nurses and also in other health professionals regarding the planning and implementation of care given to individuals with chronic diseases conditions.