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Original research article

Nursing in the development of modern treatment methods for patients with atrial fibrillation

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ABSTRACT

Introduction: Atrial fibrillation (AF) is one of the most common supraventricular arrhythmias. Its prevalence in the general population over the last twenty years has increased significantly. The issue of the perception of nursing care has not yet been examined in detail

Objectives and methods: The aim of this research was to assess how nursing behavior was perceived by nurses and patients with radiofrequency catheter ablation (RFA) for AF. The research was conducted with quantitative methods using a standardized questionnaire CBI-24 (Caring Behaviors Inventory).

Results: The research sample consisted of two groups: patients with AF undergoing RFA (n=264) and cardiological nurses (n=92). The research was conducted between 2012 and 2014. On the basis of an overall evaluation of the perception of nursing behavior from the perspective of the patients and the nurses, there were no statistically significant differences (p=0.15). When evaluating the dimensions, i.e. "security", "knowledge and skills", "respectfulness" and "connectedness", it was apparent that there was a statistically significant difference between the nurses and the patients perception of the dimensions of "knowledge and skills" (p=0.04) and "connectedness" (p=0.003), as the patients evaluated nursing care more positively than the nurses.

Conclusion: The patients undergoing RFA AF evaluated the overall nursing behavior more positively than the nurses. The nurses perceived technical prowess more positively than the humanistic approach to patients. The patients evaluated the nurses' performance more positively than the creation of a sense of security and safety. The areas of communication and education were identified as other problematic sections.

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Introduction

Because of the reactions to the technical progress that has penetrated nursing, more attention has been paid to humanism in nursing [1-3]. In the mid-twentieth century, a so called technology cult appeared in healthcare. Modern technologies and instruments began to enter the relationship between nurses, doctors and patients, which led to a technocratic focus on the performance and biological aspects of man. In response to the reported "overtechnicization" of medical and nursing care as a result of scientific knowledge, a larger effort to focus on the humanistic philosophy has been created, with respect to the holistic principles [4,5]. This is facilitated by conceptual models that enrich the theoretical basis of nursing as a scientific discipline. In practice, these models control both the thought and conduct of nurses in specific situations [5,6]. One of the humanistic models is the model of "Philosophy and Science of Nursing" by Margaret Jean Watson. According to this model, nurses should be able to integrate humanistic nursing care into their practice, leading individuals to better development in the fields of preservation and promotion of health [7]. Nursing in cardiology focuses on health promotion, prevention and rehabilitation, acute and chronic care and palliative care for patients with cardiovascular disorders. Nursing staffs are trying to guide individuals, families and communities to be able to meet their bio-psycho-social and spiritual needs separately. They support cardiological patients in self-care and they educate them and their loved ones [8].

One of the most common cardiac disorders is atrial fibrillation (AF), which is also one of the most common supraventricular arrhythmias [9]. It is currently considered an epidemic of the 21st century because its prevalence and incidence is still increasing. In the last decade, there has been rapid development in modern non-pharmacological methods in the treatment of this type of arrhythmia and, thereby, in the influence on nursing care [10].

One of the modern non-pharmacological methods of the treatment of AF is radiofrequency catheter ablation (RFA). This interventional procedure, which lies in the need to prepare the patient for surgery and also to participate in the care during and after it, is associated with nursing care. Usually, every patient is first examined and advised before the performance of the arrhytmological ambulance. This task involves both doctors and nurses. The preparation and the care of patients with AF is focused on supporting their mental and physical needs. Stabilization of the mental condition of the patient has a considerable impact, not only on the disease, but also on the progress of the healing process, collaboration and the relationship with the nursing staff [11,12].

Materials and methods

The research was divided into two phases. In the first phase, a survey was carried out, which was aimed at assessing the needs of patients with AF (before and after RFA). The second phase focused on examining the condition of the patient one year after RFA, where perceptions of nursing care associated with RFA were assessed. This study only presents the results of

the second phase of the research, in which the standardized questionnaire CBI-24 (Caring Behaviors Inventory) was used. This questionnaire is a tool for evaluating nursing approach in the care provided. It is divided into four dimensions of nursing care: the area of "security" (containing 8 items), the area of "knowledge and skills" (containing 5 items), the area of "respectfulness" (containing 6 items), and finally the area of "connectedness" (containing 5 items) [13]. The nurses and patients rated each item in the questionnaire using the modified six-point Likert scale: 1 = never, 2 = almost never, 3 = rarely, 4 = usually, 5 = almost always, 6 = always. Each dimension was first evaluated from the perspective of the significance of the differences in the perception of the patients and nurses. Answers "never" to "always" were subsequently marked with 1-6, and the questions were evaluated on average in both groups of the respondents.

The research was conducted between 2012 and 2014, and the sample group consisted of two groups of respondents. The first group consisted of patients from the Cardiology Department of the Hospital České Budějovice, a. s., with AF undergoing RFA. The second sample group consisted of nurses working in the Cardiology Department who care for the patients with AF before and after RFA. This group of respondents came from the Cardiology Department of the Hospital České Budějovice, a. s., and the Institute for Clinical and Experimental Medicine (IKEM) in Prague.

The statistical software, STATISTICA, PSPP and MS Excel were used for statistical data processing. To evaluate the results, descriptive statistics was used, and all provided tests were interpreted at the significance level of α = 0.05.

Results

The basic demographic data of both groups are presented in Tables 1 and 2. The study involved a total of 158 men (59.8%) and 106 women (40.2%) of the total of 264 patients who had an average age of 63.6 ± 9.6 years. Approximately half of the patients suffered from a paroxysmal form of AF. Of the associated diseases, hypertension and diabetes mellitus were most prevalent. 92 nurses, of whom 78 were women (84.8%) and 14 were men (15.2%), participated in the study. The

Table 1 – Basic clinical characteristics of the sample group of patients.

Demographic data	
Total number of respondents (n)	264
Men/women	158 (59.8%)/106 (40.2%)
Average age (in years)	63.6 ± 9.6
Patients with a paroxysmal	139 (52.7%)
atrial fibrillation	
Patients with a persistent atrial	125 (47.3%)
fibrillation	
Associated diseases	
Hypertension	182 (68.9%)
Diabetes mellitus	61 (23.1%)
Hyperlipoproteinimia	59 (22.3%)
Stroke	16 (6.1%)
Ischemic cardiac disorder	46 (17.4%)

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