

REVIEW ARTICLE

Patients' experience during weaning of invasive mechanical ventilation: A review of the literature[☆]



M.E. Merchán-Tahvanainen (MSN)^{*}, C. Romero-Belmonte (RN), M. Cundín-Laguna (RN), P. Basterra-Brun (RN), A. San Miguel-Aguirre (RN), E. Regaira-Martínez (MSN)

Unidad de Cuidados Intensivos, Clínica Universidad de Navarra, Pamplona, Spain

Received 17 February 2016; accepted 12 November 2016
Available online 19 May 2017

KEYWORDS

Patients;
Life change events;
Ventilator weaning;
Intensive care unit

Abstract

Objective: Weaning from invasive mechanical ventilation (IMV) is influenced by physiological and psychological factors, the latter being the least studied. The aim was to identify, through the literature, patients' experiences during weaning from IMV and report its influencing factors. **Method:** The literature search was conducted using the Pubmed, CINAHL and PsycINFO databases. The search terms were: "patient", "experience" and "ventilator weaning". The research limits were: age (>19 years) and language (English, Spanish and Finnish).

Results: Fifteen publications were analyzed. The main results were grouped into three main categories according to patient's perceptions, feelings and experiences, influence of professionals' attention and determinants for successful weaning. Patients remember IMV weaning as a stressful process where they experience anxiety, frustration, despair or uncertainty. Nurses have a key role in improving communication with patients and foreseeing their needs. Family support and the care provided by the caregivers were shown as essential during the process. The patient's self-determination, self-motivation and confidence are identified as important factors to achieve successful IMV weaning.

Conclusions: Psychological care, in addition to physical and technical care, is important at providing holistic care. Interventional studies are needed to improve the care during the weaning experience.

© 2016 Sociedad Española de Enfermería Intensiva y Unidades Coronarias (SEEIUC). Published by Elsevier España, S.L.U. All rights reserved.

[☆] Please cite this article as: Merchán-Tahvanainen ME, Romero-Belmonte C, Cundín-Laguna M, Basterra-Brun P, San Miguel-Aguirre A, Regaira-Martínez E. Experiencias del paciente durante la retirada de la ventilación mecánica invasiva: una revisión de la literatura. *Enferm Intensiva*. 2017;28:64–79.

^{*} Corresponding author.

E-mail address: elenamerchant@yahoo.es (M.E. Merchán-Tahvanainen).

PALABRAS CLAVE

Pacientes;
Experiencias de vida;
Destete del
ventilador;
Unidad de cuidados
intensivos

Experiencias del paciente durante la retirada de la ventilación mecánica invasiva: una revisión de la literatura

Resumen

Objetivo: La retirada de la ventilación mecánica invasiva (VMI) es un procedimiento en el que influyen factores fisiológicos y psicológicos, siendo estos últimos los menos estudiados. El objetivo fue identificar en la literatura, las experiencias de los pacientes durante la retirada de la VMI y cómo intervienen en dicho proceso.

Método: Se realizó una búsqueda bibliográfica en las bases de datos Pubmed, CINAHL y PsycINFO. Los términos de búsqueda fueron: «patient», «experience» y «ventilator weaning». Los límites fueron la edad (> 19 años) y el idioma (inglés, español y finlandés).

Resultados: Se analizaron 15 publicaciones. Los principales resultados se agruparon en tres grandes temas según las percepciones, sentimientos y experiencias del paciente, la influencia de la atención de los profesionales y los factores determinantes para la retirada exitosa de la VMI. Los pacientes recuerdan la retirada de la VMI como un proceso estresante y experimentan ansiedad, frustración, desesperación o incertidumbre. Las enfermeras tienen un papel fundamental en la mejora de la comunicación con el paciente y en la anticipación a sus necesidades. El soporte familiar y el cuidado proporcionado por los profesionales se destacan como fundamentales durante el proceso. Para conseguir una retirada exitosa de la VMI se identifica la importancia de la autodeterminación, la automotivación y la confianza de los pacientes.

Conclusiones: La atención psicológica, además de la física y la tecnológica, es importante durante la retirada de la VMI para proporcionar un cuidado holístico. Son necesarios estudios de intervención para lograr mejorar la atención a los pacientes durante dicho proceso.

© 2016 Sociedad Española de Enfermería Intensiva y Unidades Coronarias (SEEIUC). Publicado por Elsevier España, S.L.U. Todos los derechos reservados.

Interest and originality

According to the Weaning Continuum Model of the AACCN, the results of the process of withdrawing the invasive mechanical ventilation is directly related to the emotional sphere and changes in the patient's mood. Through this paper we intend to know the psychological repercussion that the weaning process has on the patient. This will make us aware of its importance, reflect on the role of the nurse, and determine the specific strategies to respond to the needs of the patient that will favour holistic assessment and care.

Introduction

Invasive mechanical ventilation (IMV) is frequently provided to patients in the intensive care units (ICUs). It is a technological breakthrough that provides ventilatory support in life-threatening situations of respiratory failure. However, the disconnection process of IMV, through which the patient regains his/her spontaneous and effective ventilation (also known as weaning), is a complex process and is influenced by the patient's physiological and psychological factors, the latter being the least studied.¹

The *Weaning Continuum Model (WCM)* of the *American Association of Critical Care Nurses (AACCN)*^{2,3} poses weaning as a continuous and dynamic process influenced by physiological (myocardial function and oxygenation, ventilatory muscles, nutritional status), psychological and environmental variables. These aspects combined lead to three possible outcomes: complete weaning, partial incomplete weaning

and total incomplete weaning. The nursing professional plays a key role in the success of this process. The nurse must know the patient and, as Benner et al.⁴ confirmed, must be the *coach* and promote collaboration and interaction (nurse-patient) to facilitate weaning.

In this sense, several authors⁵⁻¹⁰ affirm that when patients face the process of IMV withdrawal, they experience feelings of uncertainty, dependence, fear and frustration, etc. And these feelings influence directly on the success or failure of weaning. For example, the fact that the patient experiences dyspnoea during this process favours the onset of anxiety and makes weaning difficult.¹¹ Also, feeling that they lack the strength to be able to communicate or to hold objects with their hands causes them vulnerability and feelings of weakness.^{1,12}

By contrast, other authors show that the nursing care provided to the patient during *weaning*^{5,12-14} and the information and care that is provided to the family members^{1,7} is a positive influence, which plays a crucial role in reducing the intensity of these adverse experiences.¹²

Similarly, the nurses' knowledge about the experiences of the patients during weaning can offer a holistic and personalized care.¹ On numerous occasions, the patients view withdrawing from the IMV as very negative.¹⁵⁻¹⁷ For this reason, the nursing professional requires training and an expert knowledge that will provide him/her with the skills and competences^{7,15,17} to be able to help the patients to participate in decision-making. In addition, it adds confidence and a suitable environment that reduces anxiety and fatigue, and maximizes the chances of the weaning success.^{7,18} On the other hand, the emotional repercussion

Download English Version:

<https://daneshyari.com/en/article/8928777>

Download Persian Version:

<https://daneshyari.com/article/8928777>

[Daneshyari.com](https://daneshyari.com)