



Enfermería Neurológica (English ed.)

www.elsevier.es/rctedene



ORIGINAL ARTICLE

Most frequent nursing diagnoses in patients admitted to the Epilepsy Unit^{☆,☆☆}

María Palanca Cámara

Unidad Multidisciplinar de Epilepsia Refractaria, Hospital Universitario y Politécnico La Fe, Valencia, Spain

Received 21 November 2015; accepted 30 May 2016

KEYWORDS

Epilepsy;
Diagnosis;
Physiological monitoring;
Education;
Nursing care

Abstract

Introduction: Epilepsy is a neurological disease consisting of abnormal electrical discharges in the brain that produce a clinical condition, affecting 1–3% of the population. The Multidisciplinary Epilepsy Unit of the *Hospital Universitario y Politécnico La Fe de Valencia*, since 2006, has conducted studies with prolonged video-EEG monitoring of patients diagnosed with refractory epilepsy. The role of the unit is to provide these patients with both a diagnostic and a treatment solution.

Objective: This study aims to determine, using NANDA-NIC-NOC language, the basic needs of these patients and to assess how the quality of nursing care can be improved in this type of patient, during their admission and afterwards.

Methodology: Data were collected from a sample of 46 patients monitored in the unit between May and September 2013, and by using nursing assessment, data was obtained on the percentage occurrence of diagnosis.

Results and conclusions: The patients are very limited socially and occupationally, with added risks specific to the disease that we must not forget. The nursing role should be to standardise their situation as much as possible so that they can lead as full a life as possible, have proper health education, and prevent further injuries during admission (falls, etc.). From our experience, the epileptic patient support program from the Epilepsy Association of the Community of Valencia, and its incorporation into the *Programa Respira* for admission to the monitoring unit, gives good results.

© 2016 Sociedad Española de Enfermería Neurológica. Published by Elsevier España, S.L.U. All rights reserved.

[☆] Please cite this article as: Palanca Cámara M. Diagnósticos enfermeros en pacientes ingresados en la Unidad de Epilepsia. Rev Cient Soc Enferm Neurol. 2017. <http://dx.doi.org/10.1016/j.sedene.2016.05.003>

^{☆☆} Prize for the best SEDENE poster at the XXI Annual SEDENE Congress 2014.

E-mail addresses: tapirawa@icloud.com, tapirawa@yahoo.es

PALABRAS CLAVE

Epilepsia;
Diagnóstico;
Monitorización
fisiológica;
Educación;
Cuidado de
enfermería

Diagnósticos enfermeros en pacientes ingresados en la Unidad de Epilepsia**Resumen**

Introducción: La epilepsia es una enfermedad neurológica consistente en descargas eléctricas del cerebro de forma anormal que producen una clínica, llegando a afectar a entre un 1-3% de la población. La Unidad Multidisciplinar de Epilepsia del Hospital Universitario y Politécnico La Fe de Valencia realiza, desde el 2006, estudios con monitorización prolongada por video-electroencefalograma a pacientes diagnosticados de epilepsia refractaria. Desde la unidad, se busca dar una solución a estos pacientes tanto en el diagnóstico como en el tratamiento.

Objetivo: Con este estudio se pretende dejar constancia, mediante el lenguaje NANDA-NIC-NOC, de cuáles son las necesidades fundamentales de estos pacientes y valorar en qué se podría mejorar la calidad asistencial enfermera en ellos, tanto durante el ingreso como después del mismo.

Metodología: Se recogieron datos en una muestra ($N=46$) de pacientes monitorizados en la unidad entre mayo y septiembre 2013, a través de la valoración de enfermería, obteniendo datos de porcentaje de aparición del diagnóstico.

Resultado y conclusiones: Son pacientes muy limitados social y laboralmente, con unos riesgos añadidos propios de la enfermedad que no debemos olvidar, y la función de la enfermera debería ir encaminada a normalizar lo más posible su situación para que puedan llevar una vida lo más plena posible, hacer una correcta educación en salud y evitar daños mayores durante el ingreso (caídas, etc.). Desde nuestra experiencia, el programa de apoyo al paciente epiléptico desde la Asociación de Epilepsia de la Comunidad Valenciana y su consolidación en el programa respira durante el ingreso en la Unidad de monitorización, da buenos resultados.

© 2016 Sociedad Española de Enfermería Neurológica. Publicado por Elsevier España, S.L.U. Todos los derechos reservados.

Introduction

An epileptic crisis is the clinical manifestation of abnormal electrical discharges in the brain from a group of neurones (focal seizure) or the whole brain (generalised seizures).¹

It has been estimated that there are approximately 50 million people worldwide who suffer or have suffered from epilepsy at some time in their lives. Calculations suggest that epilepsy affects around 1% of the population and that between 1% and 3% of the population will suffer from an epileptic seizure in their lives.² In Spain, although there is a lack of data regarding prevalence, it has been calculated that there are some 400,000 epilepsy patients. Around 5%-10% of the population will at some time experience a seizure and up to 20% will suffer from recurrence of the same. Hospital admittance for epilepsy accounts for 35 patients out of every 100,000 admitted, with a mean cost of €6,935 per patient with refractory epilepsy³: i.e. those patients who do not respond appropriately to the antiepileptic drugs, which have been taken correctly and for a considerable time, since the presence of seizures persists with relatively high frequency and/or prevents them from leading a normal life.⁴

A Multidisciplinary Epilepsy Unit has existed in the Hospital Universitario y Politécnico La Fe of Valencia since 2006, and it has been endorsed by the Ministry of Health as a unit of national reference (CESUR Centre) since December 2010. In this unit they essentially treat cases of drug-resistant epilepsy with prolonged video-EEG monitoring. Both surface electrodes applied with the international 10:20 system are

used and also invasive electrodes (oval foramen electrodes, deep electrodes or subdural electrode blankets), aimed at:

- Assessment the possible treatment alternatives (vagus nerve stimulator, resective surgery, etc.).
- Implementing a precise pharmacological adjustment.
- Correct diagnosis of the condition (non epileptic seizures, type of epilepsy).

The nurse, as the bedside professional, is the link with the patient, and a specific healthcare plan will help to improve the patient's quality of life.

Objectives

- Be aware of the situation of the patients admitted to a multidisciplinary epilepsy unit through nursing evaluation.
- Establish which nursing diagnoses and interventions are the most standard in these patients.
- Establish several nursing objectives and interventions to propose quality care in these patients from the NANDA, NOC diagnoses, the NOC and NIC indicators with their activities, measurable through the NOC indicator scales and the NIC activities.

Download English Version:

<https://daneshyari.com/en/article/8923788>

Download Persian Version:

<https://daneshyari.com/article/8923788>

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