



# Enfermería Clínica

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## ORIGINAL ARTICLE

# Knowledge and attitudes of primary care nurses about the management of patients with insomnia<sup>☆</sup>

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### KEYWORDS

Insomnia;  
Primary care;  
Treatment;  
Attitudes;  
Nursing

### Abstract

**Objective:** To describe the knowledge, attitudes, and performance of primary care nurses in the management of patients with insomnia.

**Methods:** Descriptive study. An online questionnaire was sent to all primary care nurses of the Majorca Primary Care Department between June and July 2014. Measurements: sociodemographic variables, professional characteristics, tuition, usual clinical practice in the management of patients with insomnia.

**Results:** 138 nurses answered the questionnaire (47%). Most of them were women (92.8%), 50.42 years old (SD=8.9). The majority considered insomnia an important health problem. Only 11% had received some formative activity on insomnia in the last 5 years. Nearly half declares to ask patients about consequences of insomnia in their jobs and about habits that alter their sleep quality. 79.7% considered the possible adverse effects of insomnia drugs and take into consideration the age of patient (80.4%). The usual treatments were sleep hygiene (76%), phytotherapy (44.9%) and 22.4% cognitive behavioural therapy (CBT). This therapy is considered effective and applicable by nurses (63.7%) and doctors (58%). Those nurses who attended courses in the last 5 years apply CBT more frequently.

**Conclusions:** Nurses conduct a correct anamnesis and evaluation of patients with insomnia. However some therapies of known effectiveness, such as CBT, are still scarcely applied.

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**PALABRAS CLAVE**

Insomnio;  
Atención Primaria;  
Tratamiento;  
Actitud;  
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## Conocimientos y actitudes de las enfermeras de Atención Primaria sobre el manejo del paciente con insomnio

**Resumen**

**Objetivo:** Describir los conocimientos, actitudes y actuación de las enfermeras en un área de Atención Primaria sobre la atención al paciente con insomnio.

**Métodos:** Estudio descriptivo. Se envió cuestionario online a todas las enfermeras de centros de salud del área sanitaria de Mallorca entre junio-julio de 2014. Variables: sociodemográficas, del profesional, formación, preferencias de manejo clínico del insomnio.

**Resultados:** Respondieron 138 enfermeras (47%). La mayoría mujeres (92,8%), media de edad 50,42 años (DE = 8,9). La mayoría lo considera un problema importante de salud. Solo un 11% ha realizado alguna actividad formativa sobre trastornos del sueño en los últimos 5 años. Casi la mitad declara interrogar habitualmente sobre las repercusiones del insomnio en la vida laboral y sobre los hábitos que pueden alterar el sueño. El 79,7% valora posibles reacciones adversas de los medicamentos que toma el paciente para el insomnio y valora de forma diferente a los ancianos el 80,4%. Los tratamientos que declaran realizar habitualmente son medidas higiénicas (76%), fitoterapia (44,9%) y 22,4% terapia cognitivo-conductual. La terapia cognitivo-conductual es considerada efectiva y aplicable por las enfermeras (63,7%) y médicos (58%). Los profesionales que más se forman son los que practican de forma significativa terapia cognitivo-conductual con mayor frecuencia.

**Conclusiones:** Las enfermeras realizan una correcta anamnesis y evaluación del insomnio, sin embargo algunas terapias de demostrada efectividad son todavía escasamente utilizadas.

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**What is known?**

Insomnia is one of the most common sleep disorders. It is associated with increased mortality and morbidity and healthcare resource consumption. Most people with insomnia are attended by the primary care services. There are therapies of proven effectiveness that are not routinely used by nurses.

**What is contributed?**

This study shows that primary care nurses have a role in the clinical assessment of patients with insomnia. This role can be improved since we have observed that one of the most effective therapies, *i.e.* cognitive-behavioural therapy, is seldom used. It is necessary to disseminate and integrate the most effective therapies in care given by nurses to patients with insomnia.

**Introduction**

Insomnia is one of the most common sleep disorders. ICD-10 defines insomnia as ‘‘difficulty getting to sleep or staying asleep or having non-refreshing sleep for at least one month, accompanied by fatigue during the day, emotional and cognitive-behavioural difficulties, such as irritability,

dysphoria, stress or depressed mood’’.<sup>1</sup> This disorder is associated with increased morbidity and mortality in general, road accidents and greater consumption of health resources. It is also associated with impaired quality of life and interferes in the working, social and family life of sufferers of the condition.<sup>2,3</sup>

The World Health Organisation considers insomnia a public health problem, since it is estimated that a high percentage of the world’s population (40%) are sufferers.<sup>4</sup> Ohayon and Sagalés’s<sup>5</sup> study estimates that 20.8% of the population in Spain has at least one insomnia-related symptom three or more times a week. In another study undertaken in Mallorca,<sup>6</sup> it was observed that 27% of the population attended by Primary Care (PC) complained of poor sleep. These data equate with those of other western countries.<sup>7-9</sup>

Insomnia is a common reason for PC consultation, and many of these problems are and can be resolved at this level of care.<sup>10,11</sup> PC professionals are the first, within the health system, to be consulted by patients for advice and treatment, and therefore play a key role in the management of this health problem.

The clinical practice guidelines and other recommendations consider the involvement of PC nursing professionals in the treatment of insomnia essential, either with an individual or group approach.<sup>12,13</sup> One of the nurse’s functions is to detect and assess the type of insomnia, its repercussions on the sufferer’s quality of life, and to recommend appropriate care and/or refer to other practitioners. The most frequently used non-pharmacological therapies are sleep hygiene advice, acupuncture, phytotherapy and cognitive-behavioural therapy (CBT). There is no evidence as yet for the effectiveness of acupuncture.<sup>14</sup> Similarly, treatment

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