HEALTH AND SOCIETY PORTAL JOURNAL

Original

NURSING DIAGNOSES IDENTIFIED IN ELDERLY PATIENTS SEEN AT A RADIOTHERAPY SERVICE

DIAGNÓSTICOS DE ENFERMAGEM IDENTIFICADOS EM IDOSOS ATENDIDOS EM UM SERVIÇO DE RADIOTERAPIA

DIAGNÓSTICOS DE ENFERMERÍA IDENTIFICADOS EN ANCIANOS ATENDIDOS EN UN SERVICIO DE RADIOTERAPIA

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RESUMO

Objetivo: este trabalho teve como objetivo identificar os diagnósticos de Enfermagem apresentados por pacientes idosos submetidos à radioterapia. **Método:** trata-se de um estudo quantitativo e descritivo. A coleta de dados ocorreu por meio do levantamento de dados secundários provenientes dos registros de Enfermagem presentes no prontuário eletrônico do sistema MV/PEP/HUPAA. A amostra foi restrita a informações relativas à consulta de Enfermagem a pacientes idosos em tratamento radioterápico, sendo selecionados 22 prontuários. **Resultados:** identificaram-se 123 diagnósticos de Enfermagem onde 100% dos idosos apresentaram o diagnóstico de risco de integridade da pele prejudicada. **Conclusão:** o estudo oportunizou compreender a relevância do processo de Enfermagem e evidenciou que o uso dos diagnósticos de Enfermagem pode propiciar a autonomia do enfermeiro.

Descritores: Processo de Enfermagem; Idoso; Oncologia; Radioterapia.

ABSTRACT

Objective: this study aimed to identify nursing diagnoses presented by elderly patients submitted to radiotherapy. Method: it is a quantitative and descriptive study. Data collection was done through the collection of secondary data from the Nursing records present in the electronic medical record of the MV / PEP / HUPAA system. The sample was restricted to information related to the Nursing consultation of elderly patients in radiotherapy, with 22 medical records being selected. **Results:** 123 Nursing diagnoses were identified in which 100% of the elderly presented a diagnosis of impaired skin integrity risk. **Conclusion:** the study facilitated the understanding of the relevance of the

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Nursing process and showed that the use of Nursing diagnoses can provide nurses autonomy.

Descriptors: Nursing Process; Aged; Medical Oncology; Radiotherapy.

RESUMEN

Objetivo: este trabajo tuvo como objetivo identificar los diagnósticos de Enfermería presentados por pacientes ancianos sometidos a la radioterapia. **Método:** se trata de un estudio cuantitativo y descriptivo. La recolección de datos ocurrió por medio del levantamiento de datos secundarios provenientes de los registros de Enfermería presentes en el prontuario electrónico del sistema MV / PEP / HUPAA. La muestra fue restringida a informaciones relativas a la consulta de Enfermería a pacientes ancianos en tratamiento radioterápico, siendo seleccionados 22 prontuarios. **Resultados:** se identificaron 123 diagnósticos de Enfermería, donde el 100% de los ancianos presentaron el diagnóstico de riesgo de integridad de la piel perjudicada. **Conclusión:** el estudio proporcionó comprender la relevancia del proceso de Enfermería y evidenció que el uso de los diagnósticos de Enfermería puede propiciar la autonomía del enfermero.

Descriptores: Proceso de Enfermería; Anciano; Oncología Médica; Radioterapia.

INTRODUCTION

As the world population ages, the aggravations of the aging process begin to be identified. These diseases include the progression of chronic diseases. It is estimated that in 2020 these pathologies will account for 80% of health problems, including neoplasms with a higher incidence in populations over 60.[1]

The World Health Organization (WHO) estimates, by the year 2025, about 20 million new cases of cancer. In Brazil, data point to the 2016-2017 biennium a total of 600,000 new cases predicted, reinforcing the magnitude of this disease as a public health problem.[2]

In Alagoas, the estimate was 4,680 new cases of cancer for the 2016-2017 biennium, representing a gross rate of 281.5 cases per 100,000 inhabitants. This pathology is referred to as the second major cause of death, falling below only cardiovascular diseases.[2]

In view of the above, considering the epidemiological panorama of neoplasias in the population and the diverse therapeutic lines existing at the present time, we highlight the radiotherapy, a local treatment that uses ionizing radiation produced by devices or emitted by natural radioisotopes to prevent cell multiplication or induce the apoptosis death of neoplastic cells.[3] However, despite its benefits in the treatment of cancer, radiation can lead to manifestations of toxicity to the individual. It is necessary, therefore, to include prevention measures to minimize radiotoxicity during treatment.[1]

A study aimed at evaluating the patients' adherence to the guidelines provided in the radiotherapy nursing consultation, showed that the majority of patients (54%) who adhered to the self-care guidelines did not develop radiodermites.[4] Thus, the nursing consultation in the radiotherapy sector deserves special focus, since it is the most specific activity performed by the nurse in the sector, being an essential tool for the quality of life of the patient and a favorable condition to offer a safe care.[3]

Article 11, item I, item "i" of Law No. 7,498, of June 25, 1986, [5] regulates and legitimizes the Nursing Consultation as a private activity of the nurse, which uses components of the scientific method to identify situations health and illness, as well as prescribe and put into practice nursing actions that contribute to health promotion, prevention and protection of injuries, recovery and rehabilitation of the individual, family and community.

The Systematization of Nursing Care, characterized as a method by which nurses organize their actions and direct care, constitutes an important foundation for the establishment of the Nursing Process. It is through this process that the patient's needs are identified and a care plan is drawn up so that it can be performed by the nursing team in order to provide for their well-being.[6]

In this sense, nursing has several classification systems, especially the International Classification for Nursing Practice (ICNP), a technological instrument that, during the execution of the Nursing Process, assists clinical reasoning and decision making; provides communication among nursing professionals and other areas; and facilitates the documentation of professional practice, a fundamental fact both for the evaluation and visibility of the contribution of Nursing to the health of human persons, families and human collectivities.[7-8]

Therefore, as a consequence of the toxicity of the treatment with ionizing radiation to cancer patients and the relevance of the systematization of nursing care in radiotherapy, the following guiding question emerged: Which nursing diagnoses present in the nursing records of elderly patients attended at a service of radiotherapy? To answer this question, the study aimed to identify the nursing diagnoses of elderly patients treated at a radiotherapy service.

METHOD

A descriptive quantitative study developed during the Multi-professional Residency Program in Adult and Elderly Health of the Federal University of Alagoas during a period of practice in the radiotherapy sector.

The research was carried out in a University Hospital located in the city of Maceió-AL, belonging to the public network, secondary and tertiary level of health care, in the Radiotherapy Sector of the Center for High Complexity in Oncology Care - CACON, in which it sought to identify nursing diagnoses presented by elderly patients over 60 in the period of August 2017.

The sample was restricted to information related to nursing consultation for elderly patients undergoing radiotherapy, with the inclusion criteria being the medical records of people over 60 years of age who were in radiotherapy during the month of August 2017; and as exclusion criterion, to those medical records that did not present nursing records. Thus, 22 medical records of the elderly were selected from a total of 40 medical records.

Data collection was done through the collection of secondary data from the nursing records present in the electronic medical record of the MV / PEP / HUPAA system. The numbers obtained were subjected to descriptive analysis, by means of absolute and relative frequency (N and %) and, later, compiled and tabulated in Microsoft Excel2016 software by Windows®.

The study was approved by the Research Ethics Committee of the Federal University of Alagoas, under protocol No. 2,682,221, according to Resolution No. 466/12 of the National Health Council for research on human beings.

RESULTS

Considering the number of patients in the study attended by the HUPAA radiotherapy department, 72.7% were female, with a range between 60 and 106 years of age, and a median of 70 years. Regarding treatment time, 54.5% underwent treatment in five weeks, 18.2% in up to four weeks, 13.6% in six weeks and 13.6% in seven weeks or more.

Regarding the medical diagnoses in the period studied, it was possible to observe that gynecological cancer ranked first in the percentage of cases, presenting 27.3%, followed by breast and esophageal cancers accounting for

18.2% each. Head and neck cancers accounted for 9.1%, as well as cancer of the rectum / anus. While the remaining 18.5% were related to prostate cancer, central nervous system cancer, skin cancer and lung cancer, computing one case for each diagnosis (Table 1).

Table 1. Medical diagnoses of patients treated at the radiotherapy service of CACON / HUPAA.

Medical Diagnostics	N*	%**
Gynecological cancer	6	27.3
Esophageal cancer	4	18.2
Breast cancer	4	18.2
Head and neck cancer	2	9.1
Rectal / anus cancer	2	9.1
Prostate cancer	1	4.5
Cancer of the central nervous system	1	4.5
Skin cancer	1	4.5
Lung cancer	1	4.5
Total	**22**	**100**

Source: PEP from a UH. Key: *absolute frequency; **relative frequency.

Table 2 shows the Nursing Diagnoses identified in elderly cancer patients submitted to radiotherapy, according to ICNP 2015. The total number of diagnoses and the percentage in relation to their prevalence are presented. We highlight the presence of 123 nursing diagnoses identified in these patients, totaling an average of six diagnoses per individual.

It is possible to verify that 100% of the elderly presented the diagnosis of "impaired skin integrity". While diagnoses of "lack of knowledge about radiotherapy" and "impaired skin integrity", they ranked second and third, with 86.4% and 45.5%, respectively, in the period studied. It is inferred that these diagnoses less frequently may be associated with the particularities of the individual and their illness.

Table 2. Nursing Diagnoses of patients seen in the radiotherapy service of CACON / HUPAA.

Nursing diagnosis	N*	%**
Skin integrity risk impaired	22	100
Lack of knowledge about radiotherapy	19	86.4
Skin integrity. impaired	10	45.5
Standard of ingestion of liquids. impaired	7	31.8

Pain	4	18.2
Nausea	4	18.2
Wound. present	3	13.6
Standard of food intake. impaired	3	13.6
Appetite. impaired	3	13.6
Abdominal pain	3	13.6
Ingestion of liquids. impaired	3	13.6
Food intake. insufficient	3	13.6
Knowledge about radiotherapy. low	3	13.6
Constipation	2	9.1
Diarrhea	2	9.1
Standard of fluid intake. improved	2	9.1
Eating itself impaired	2	9.1
Sleep impaired	2	9.1
Blood pressure. altered	2	9.1
Urinary incontinence	1	4.5
Mobility of the right arm. impaired	1	4.5
Oral Hygiene Standard Impaired	1	4.5
Peripheral edema	1	4.5
Risk of fall	1	4.5
Self-care. effective	1	4.5
Risk of dehydration	1	4.5
Dysuria	1	4.5
Oral Mucous Membrane. Dry	1	4.5
Presence of enteral tube	1	4.5
Constipation. gift	1	4.5
Acceptance of state of health. impaired	1	4.5
Non adherence to liquids regime	1	4.5
Weight. impaired	1	4.5
Low self esteem	1	4.5
Standard of food intake. effective	1	4.5
Function of the Urinary System. impaired	1	4.5
Palate. impaired	1	4.5
Self-care deficit	1	4.5
Previous smoking	1	4.5
Pruritus. present	1	4.5
Dry skin	1	4.5
Vaginal bleeding	1	4.5
Sadness	1	4.5
Total	**123**	

Source: PEP from a UH. Key: *absolute frequency; **relative frequency.

DISCUSSION

Acute skin reactions, also known as radiodermatitis, are one of the most common effects in patients undergoing radiotherapy, which were represented by

the diagnoses "impaired skin integrity", "impaired skin integrity" and "wound present". These reactions may range from mild erythema with pruritus to tissue necrosis, through dry or moist desquamation.[9]

In relation to these diagnoses, preventive measures are paramount and must be prescribed during the nursing consultation, in order to reduce the radiotoxicity.[4] Among the interventions implemented by the nurse, the most important are the guidelines on skin care, regarding hydration, not sun exposure, hygiene and feeding. In addition, the use of aloe vera gel is included throughout the treatment, which according to Andrade et al, [4] aims to prevent the occurrence and/or increase of the degree of radiodermatitis, as well as to minimize the effects of radiation on the skin.

In the case of the diagnoses "lack of knowledge about radiotherapy" and "knowledge about low radiotherapy", the nursing consultation elucidates common and isolated doubts of patients who initiate the therapeutic process, constituting as an opportune moment for the better understanding of the patient on the disease and the importance of adherence to radiotherapy sessions.[4, 10] At that moment, the nursing consultation provides the elderly with information about radiotherapy, possible adverse reactions and their management, as well as the importance of continuing treatment. At the same time, this user is encouraged to expose their doubts and yearnings about the therapeutic process.

Low intake of food and fluids by the elderly, observed and evidenced by diagnoses of "ingestion of impaired / inadequate food or liquids", "impaired fluid intake or food intake" and "risk of dehydration". This finding equips the nurse in the nursing consultation to emphasize adherence to an appropriate diet and adequate fluid intake.[4]

The nursing diagnosis "dry oral mucous membrane", is related to mucositis, which is an inflammatory reaction of the oral mucosa, characterized by erythema and edema in the mucosa, followed by commonly ulceration and desquamation. Radiation, when in doses between 40 and 65 Gy, can cause degenerative inflammatory reaction, especially of the serous cells of the salivary glands, causing a decrease of the salivary flow and consequently the xerostomia.[3]

Interventions for the prevention and treatment of oral mucositis in radiotherapy are of paramount importance in the nursing consultation, where the

nurse guides the practice of oral hygiene as a strategy that reduces the development of microorganisms, reducing the risk of severe mucositis.[11]

In addition to the diagnoses mentioned above, reactions related to pain, mobility and altered sensations on the affected side, fatigue, loss of self-esteem, anxiety, fear and feeling of isolation are also associated with radiotherapy.[9]

The symptoms of cancer treatment are one of the greatest difficulties faced by elderly patients during radiotherapy sessions; this, associated with the disease, results in a reduction in the functional performance level of the elderly and an increase in depression, which alters their quality of life. life and, consequently, their perception of their general state of health.[10]

It is observed that for cancer patients, especially the elderly, living with cancer can cause suffering. It is believed that this feeling may be related to their life perspectives, beliefs and fears related to illness and treatment, a fact that denotes the importance of the development of nursing care that helps them during this confrontation.[9]

Given the above, assisting the patient and family members to understand the process in which they are inserted is to make the individual able to face this moment of his life, supporting him to the possible complications. A more effective communication between the team and the patient is essential since it can favor adherence to the treatment and care to be implemented, as well as contribute to minimize the risks of the therapeutic strategy.[12] Therefore, it is verified that the nursing process is an essential instrument for the organization of clinical practice and the ICNP is a classification that uses practical methods to elaborate the diagnosis and selection of interventions that facilitate the systematization of nursing care.[12]

CONCLUSION

The experience with the elderly in the radiotherapy sector of CACON made it possible to understand the importance of the nursing process in the care of these individuals, since it is a useful tool that the nurse uses to systematize the care in order to improve the health status and quality of life of these patients. At the same time, it was possible to show, through the results of the present report, that the use of nursing diagnoses propitiates the nurse's autonomy, since it is the basis for the development of nursing interventions, thus facilitating the exercise of reasoning critical and clinical judgment of this professional.

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