

The palliative care experienced in the assistance of a league of wounds: experience report

Os cuidados paliativos vivenciados durante a assistência de uma liga de feridas: relato de experiência

Los cuidados paliativos experimentados durante la asistencia de una liga de heridas: relato de experiencia

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This is a descriptive, experience report study, carried out in 2016, which aimed to describe the experience lived by the nursing students of a Wound League, describing the importance of palliative care in the prognosis of patients with spinal cord injury. During this period, it was provided assistance to several patients in palliative care, bedridden and with spinal cord injury. It was possible to obtain improvement in physical and psychological medical conditions of all patients, in addition to the family, who felt reassured. It was noted that patients felt more secure in the presence of members of the Wound League. With regard to injury, there was regression of the wound bed in all of them, as well as some healing. The necrotic tissue has become extinct, mostly. It was used coverage available, such as papain of various percentages and essential fatty acid (EFA). In turn, the lesions epithelialized, avoiding the need of tissue graft. The approach of palliative care provided to bedridden patients with spinal cord injury contributed to a positive prognosis, improving adaptation and self-esteem.

Descriptors: Young adult; Occlusive dressings; Patient care time; Paraplegia.

Este é um estudo descritivo, do tipo relato de experiência realizado no ano de 2016 e, teve-se como objetivo relatar a experiência vivenciada pelos acadêmicos de enfermagem de uma Liga de Feridas, descrevendo a importância dos cuidados paliativos no prognóstico de pacientes com lesão medular. Durante esse período, foi prestado assistência à diversos pacientes em cuidados paliativos, acamados e com lesão medular. Foi possível obter melhora nas condições clínicas físicas e psicológicas de todos os pacientes, além dos familiares, que se sentiram tranquilizados. Notou-se que os pacientes se sentiam mais seguros na presença dos membros da Liga de Feridas. No que se refere às lesões, houve regressão do leito da ferida em todas elas, assim como cicatrização de algumas. Os tecidos necróticos tornaram-se extintos, em sua maioria. Utilizou-se coberturas disponíveis, como Papaína de diversas porcentagens e Ácido Graxo Essencial (AGE). Por sua vez, as lesões se epitelizavam, evitando até a necessidade de enxerto tecidual. A abordagem dos cuidados paliativos proporcionados à pacientes acamados, com lesão medular, contribuiu para um prognóstico positivo, melhorando a adaptação e autoestima.

Descritores: Adulto jovem; Curativos oclusivos; Equipe de assistência ao paciente; Paraplegia.

Este es un estudio descriptivo, del tipo relato de experiencia realizado en el año de 2016 y, tuvo como objetivo relatar la experiencia experimentada por los académico de enfermería de una Liga de Heridas, describiendo la importancia de los cuidados paliativos en el pronóstico de pacientes con lesión medular. Durante ese periodo, fue prestado asistencia a diversos pacientes en cuidados paliativos, acamados y con lesión medular. Fue posible obtener mejora en las condiciones clínicas físicas y psicológicas de todos los pacientes, además de los familiares, que se sintieron tranquilizados. Se notó que los pacientes se sentían más seguros en la presencia de los miembros de la Liga de Heridas. En lo que se refiere a las lesiones, hubo regresión del lecho de la herida en todas ellas, así como cicatrización de algunas. Los tejidos necróticos se volvieron extintos, en su mayoría. Se utilizó coberturas disponibles, como Papaína de diversos porcentajes y Ácido Graso Esencial (AGE). Por su vez, las lesiones se epitelizaban, evitando hasta la necesidad de injerto de tejido. El abordaje de los cuidados paliativos proporcionados a los pacientes acamados, con lesión medular, contribuyó para un pronóstico positivo, mejorando la adaptación y autoestima.

Descriptoros: Adulto joven; Apósitos oclusivos; Grupo de Atención al paciente; Parapleja.

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INTRODUCTION

The palliative care (PC) arrived in Brazil in the early 1980s when the health system prioritized the hospital-centered mode, based on curative approach¹. In 1997, it was founded the Brazilian Association of Palliative Care (ABCP), consisting of a group of professionals interested in the subject, proposing the release of the philosophy of palliative care in Brazil².

In February 2005, it was created the National Academy of Palliative Care (PCNA). The creation of PCNA is considered an important milestone for Brazil, mainly due to the benefits it has brought to the Brazilian medicine. The academy was founded to contribute to the teaching, research and optimization of PC in Brazil³.

According to the World Health Organization⁴, palliative care is a form of multi-therapeutic assistance aimed at improving the quality of life of patients, and their families, who are under diagnosis of chronic degenerative diseases, most of which can be life threatening. It is signed through the prevention and relief of pain and suffering through early identification and proper evaluation, as well as coverage of issues of physical, psychosocial and spiritual order.

Seen this way, the PC is not based on protocols, but in principles, they do not only address diseases, which are terminally, but also life-threatening ones. It is a care indicated from diagnosis of the disease, because even with the impossibility (or not) of healing through a conventional treatment, dispels any notion that there is no alternative, or there are other solutions to improve the patient's living condition. It is emphasized that this care should appreciate aspects that are usually in the background, such as human and ethical-spiritual dimensions⁵.

In this context, it is possible to exemplify some of the main situations requiring palliative care; they are: promotion of autonomy and independence, psychosocial and spiritual intervention, prevention and control of symptoms, patient and family as the unit of care, as well as communication and teamwork⁶.

It is known that bedridden patients with spinal cord injury are subject to a functional disability framework, and therefore must daily deal with situations of dependency, especially when it comes to mobilization, to hygiene with his own body, food, and even to leisure activities⁷. That is the reason palliative care can help patients with spinal cord injury, contributing to autonomy promotion.

Paraplegia due to spinal cord injury causes multiple psychomotor, psychosocial changes, and various complications besides the occurrence of pressure injuries (PIs). In addition, these facts establish challenges for the team of nursing professionals⁸. However, the assistance offered to these customers includes highly complex activities, making it necessary to plan and perform actions in a multi and interdisciplinary team, which collaborates with the fullness of care.

It emphasizes the importance and responsibility of the multidisciplinary team in the rehabilitation of patients and their families, since guidance for self-care, as well as the necessary precautions to prevent the possible complications of traumatic accident. Thus, it is possible to promote the social reintegration of these patients and thus improve the quality of life with its remaining potentials⁸.

Given this, it is important the assistance to patients with spinal cord injury, not back only to the physical body, but mostly occurring in full by viewing the patient as a complex being with restricted biopsychosocial needs. In addition, health professionals target is, if possible, to rehabilitate the patient, in addition to the hospital, promoting autonomy and prioritizing his reintegration in the social context^{8,9}.

This study aimed to describe the experience lived by the nursing students of a Wound League, describing the importance of palliative care in the prognosis and biopsychosocial evolution of patients with spinal cord injury.

METHOD

This is a descriptive, experience report study, which was carried out by students of the nursing course of a Wound League university in the state of Minas Gerais, whose practical activities occurred in 2016.

After the start of the Wound League school, academics were designed to two main areas: theoretical training and practical assistance with injuries. The theoretical meetings were held weekly, providing a better scientific basis. The practices included the care of patients with skin lesions admitted to a general hospital.

The assisted patients were not selected for specific sectors, but for lesion complexity. Although the most prevalent sector has been the Medical Clinic, mainly by the characteristics of the hospitalized patients (bedridden, high complexity), it also covered patients from Surgical Clinic, Orthopedics and Neurology, of the aforementioned hospital.

To start the consolidated practices, students were divided into groups of 3 to 4 and it was held a search in hospital on patients with wounds in the body, so that the league took a patient who had severe injuries. Evaluation of these wounds was made. Then, appropriate procedures and specific dressings were drawn for each tissue. Dressings were performed twice a day, in the morning and evening, using sterile technique, alternating among the groups.

During the period of 6 months (time of the practical activities of the League), 10 patients were followed, including young adults and elderly, male and female. The next selection occurred as the injuries of the latter patient progressed, and the same process was carried out (evaluation, conducts, and dressings).

All of them were bedridden, specifically having the diagnosis of spinal cord injury, most been hospitalized for a long time. They were welcomed by a multidisciplinary team, which started the palliative care with a view to improving the quality of life, relieve pain and promote rehabilitation and autonomy for those who fit this context.

In addition to the care of injuries, academics helped the patients in other

activities, such as in food, in care with hygiene and other needs to promote comfort and well-being.

RESULTS

It was revealed through empirical observation that patients in palliative care who had a diagnosis of spinal cord injury showed no more anxiety and sadness as before, although presenting moderate pain. The family, as well as the patients themselves, reported that after the League Wound care and multidisciplinary team they felt more welcomed.

In addition, scholars have noted improved communication of the patients after the onset of care, especially when helping with the food, setting up a mutual trust. It was apparent the patients' motivation to perform the activities, even on a minimum basis, such as hold the food with their own hands, showing that, despite the difficulties the motivation led to search for autonomy.

With regard to injuries, there was regression of the wound bed in all of them, as well as some healing. The necrotic tissue has become extinct, mostly. It was used available dressings, such as papain in various percentages and essential fatty acid (EFA). In turn, the lesions epithelialized, avoiding the need of tissue graft.

DISCUSSION

Palliative care offered to patients with spinal cord injury and consequent paraplegia, were efficient in this study, both in improved self-esteem and promoting quality of life, even in the smallest details. Listening in communication, humanized care, the approach of physical and psychological aspects, somehow harmonize the coping of these limitations and nurture patient's better acceptance of reality¹⁰.

It was also observed that the multidisciplinary team provided specifically and integral assistance to each patient, culminating in the scope of various needs. Therapeutic activities developed by professionals in an interdisciplinary way promote faster rehabilitation due to practices that are geared for self-care and well-being

context¹¹. However, even today, the comprehensive care is not very developed.

The experience lived in this report is similar to studies¹¹⁻¹⁴, revealing the importance of evidence-based practice to provide comprehensive care with safety and quality. Also, consequently, the reduction of risks/complications that may result in death. The integral approach, early identification and critical evaluation of daily care, promotes improvement in the clinical conditions of patients and in the assistance provided by the professionals¹⁴.

Regarding injuries, assistance directed to each one in a unique way, subsidized positive improvement and healing of various wounds, since with simple dressings, care planning and appropriate decision making, it was possible to cause a regression of all injuries. It is known that the acceleration of the healing process promotes reduction of expenses, since they are high. A study shows that the average is \$ 36,629.95 monthly¹², in a general hospital, as in this report.

In addition, it is necessary that the professional is aware about what are the ideal dressings for certain injuries, taking into account the composition and the indication, the period of use, exchange frequency and healing time, avoiding waste. Lack of knowledge and inadequate use of available resources also lead to big financial problems for the hospital and the patient¹³.

CONCLUSION

The approach of palliative care provided to patients with spinal cord injury contributed to a positive prognosis, improving adaptation and self-esteem. The integrated care with the implementation of multidisciplinary practices contributed to the evolution of the patients, as well as in their clinical, physical and psychological manifestations.

In addition, it was noted that nursing professionals, as they were closer to the victims with spinal cord injury, as well as their families during the hospitalization period, have an important duty to provide teaching and learning resources for self-care after discharge, in order to prevent health

problems and promote the rehabilitation process.

The findings of this report point to the need for further studies in this area due to the small number of researches on palliative care in young people with spinal cord injury, especially with skin lesion.

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CONTRIBUTIONS

Brena Elisa Paulo participated in the conception, design, data analysis and interpretation, writing and review. **Leticia Gabriela Almeida, Joyce Assunção Barros, Leticia Pinto Rodrigues** and **Fernanda Bonato Zuffi** contributed to the writing and review. **Leila Aparecida Kauchakje Pedrosa** participated in the guidance of the activity and review.

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