

## THE REPRESENTATION OF THE NURSING CONSULTATION FOR THE OLDER ADULTS OF HIPERDIA

## A REPRESENTAÇÃO DA CONSULTA DE ENFERMAGEM PARA OS IDOSOS DO HIPERDIA

## LA REPRESENTACIÓN DE LA CONSULTA DE LA PACIENTE PARA LAS PERSONAS MAYORES

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### ABSTRACT

**Objective:** This study aims to describe the representation of the nursing consultation for the elderly accompanied by the Hiperdia program of an Amazon Health Unit. **Methodology:** It is a descriptive study of a qualitative approach, developed in a basic health unit of Abaetetuba-Pará, occurred between September and November of 2018, the data were analyzed by the content analysis method. **Results:** There were three categories, the first on the role of the nurse in the Hiperdia program in the elderly, the most cited words are: evaluate, care, talk, guide, health and food. The second is about the representativeness of the nursing consultation, in that predominated the words: care, health, change, essential and conversation. The last one reports the contribution of the nurse to the lifestyle change of the elderly, highlighting the following words: quality of life, food, walking, medicine, exercise. **Conclusion:** The nursing consultation was fundamental, it still needs improvement; however, the actions performed already demonstrate significant results in the change of lifestyle of the elderly.

**Descriptors:** Nursing; Seniors; Hypertension; Diabetes Mellitus.

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## RESUMO

**Objetivo:** descrever a representação da consulta de enfermagem para os idosos acompanhados pelo programa do Hiperdia de uma Unidade de saúde da Amazônia. **Metodologia:** Trata-se de um estudo descritivo de abordagem qualitativa, desenvolvido em uma UBS de Abaetetuba-Pará, ocorreu entre setembro e novembro de 2018, os dados foram analisados pelo método de análise de conteúdo. **Resultado:** Emergiram três categorias, a primeira sobre o papel do enfermeiro no programa Hiperdia na ótica do idoso, as palavras mais citadas são: avaliar, cuidar, conversar, orientar, saúde e alimentação. A segunda é sobre a representatividade da consulta de enfermagem, nessa predominou as palavras: cuidado, saúde, mudança, essencial e conversa. A última relata a contribuição do enfermeiro para a mudança do estilo de vida do idoso, tendo como destaque as seguintes palavras: qualidade de vida, alimentação, caminhada, remédio, exercício. **Conclusão:** A consulta de enfermagem mostrou-se fundamental, ainda necessita de aperfeiçoamentos, contudo, as ações executadas já demonstram resultados expressivos na mudança de estilo de vida dos idosos.

**Descritores:** Enfermagem; Idosos; Hipertensão; Diabetes Mellitus

## RESUMEN

**Objetivo:** Este estudio se objetiva describir la representación de la consulta de enfermería para los ancianos acompañados por el programa del Hiperdia de una Unidad de salud Amazonia. **Metodología:** Es un estudio descriptivo de un enfoque cualitativo, desarrollado en una unidad de salud básica de Abaetetuba-Pará, ocurrido entre septiembre y noviembre de 2018, los datos se analizaron mediante el método de análisis de contenido. **Resultados:** En el caso de la enfermería en el programa Hiperdia en la óptica del anciano, las palabras más citadas son: evaluar, cuidar, conversar, orientar, salud y alimentación. La segunda es sobre la representatividad de la consulta de enfermería, en la que predominó las palabras: cuidado, salud, cambio, esencial y conversación. La última relata la contribución del enfermero para el cambio del estilo de vida del anciano, teniendo como destaque las siguientes palabras: calidad de vida, alimentación, caminata, remedio, ejercicio. **Conclusión:** La consulta de enfermería se mostró fundamental, aún necesita de mejoras, sin embargo, las acciones ejecutadas ya demuestran resultados expresivos en el cambio de estilo de vida de los ancianos.

**Descriptor:** Enfermería; los ancianos; Hipertensión; Diabetes Mellitus.

## INTRODUCTION

Diabetes mellitus (DM) and Arterial Systemic Hypertension (SAH) are responsible for the primary cause of mortality and hospitalization in the Unified Health System (SUS), and represent more than half of the primary diagnosis in people with chronic renal failure undergoing dialysis. In addition, they cause other complications such as amputations of the lower limbs, coronary artery disease (CAD)

heart failure (HF), Hypertensive retinopathy and Peripheral Vascular Insufficiency.<sup>1</sup>

Since cardiovascular disease is the leading cause of death in Brazil and worldwide, having diabetes and hypertension as important risk factors, it is a challenge to the public system of Brazilian health to ensure systematic monitoring of individuals identified as carriers of diseases, and the development of actions related to

health promotion and prevention of Chronic Non-communicable Diseases (NCDs).<sup>2</sup>

Given the importance of constant monitoring, and taking into account the high rate of injuries in patients users of cardiovascular diseases, in 2002 the Care Reorganization Plan to SAH and DM, called Hiperdia, was created. This program aims to reduce injuries, setting goals and guidelines to expand prevention, diagnosis, treatment and control of these diseases, through the reorganization of the health care work of the units of the basic network of Health Services.<sup>3</sup>

Hiperdia, is a registration program and monitoring of hypertensive and/or diabetic patients aimed at the control of diabetes and hypertension and a better quality of life for users. By linking the user to the Basic Health Unit (UBS) and Family Health Strategy (FHS) it is inserted in the prospect of being able to perform a continuous and quality care, providing medications, monitoring and making risk assessment among the users registered.<sup>4</sup>

In this perspective, the Family Health Team has a primary role in the development of prevention and control of diseases. Therefore, it is up to this team to systematize assistance and organize the service, so that the hypertensive and/or diabetic patients have access to all services, as receiving anti-hypertensive and/or antidiabetic agents, measurement of weight,

height, abdominal circumference, blood pressure and blood glucose and others, as well as the availability of medical and nursing consultations.<sup>5</sup>

The Nursing Consultation appears as an important and resolute care technology strategy, aiming a systematic, comprehensive and individualized nursing care, backed by law, private of nurses, offering numerous advantages in care delivery, making it easier to promote health, diagnosis and early treatment, in addition to preventing avoidable situations.<sup>6</sup>

The role of nurses in nursing consultation cannot be separated from health education, as this strategy is in the context of nursing practice, allowing an approach to the user. So, there may be a dialogical-reflexive relationship on the health-disease process of NCDs. This way, the user may perceive himself as the subject of transformation of his own life, that is, the nursing consultation needs to be focused on the older adult, so that he can be protagonist of his therapeutic plan.<sup>7</sup>

However, despite the importance of nursing consultation in Hiperdia program, we cannot always measure the impact of such a consultation in changing older adults' lifestyle. Thus, the evaluation is important so that there is a planning of professionals' actions, guided on user needs, family and community. Thus, this study aims to describe the representation of

nursing consultation for the aged accompanied by Hiperdia program of a health facility in Amazônia, Pará.

## **MATERIAL AND METHODS**

This is a descriptive study of qualitative approach, developed in a UBS-Abetetuba-Pará, located in the northeast of Pará. The research took place between September and November 2018. The study included 17 users with hypertension and DM registered in Hiperdia Program UBS, being 50 the total number of registered users.

To sample selection it was used as an inclusion criterion to have active registration in UBS, be 65 years old or over, have cognitive capacity preserved to understand the questions and answer them properly, in addition to three regular consultations with nurses, as recommended by Hiperdia. Users who receive home visits were excluded from this selection,

Data collection occurred through approaching the user to Hiperdia program. It was first explained the importance of the study, as well as the importance of their participation. After the first contact with the user it was made a prior appointment, in the best day and time to conduct the interview.

The interview was semi-structured with previous script, divided into two parts.

The first with user data to be interviewed (gender, age, marital status, education level, NCD, follow-up at UBS and frequency of nursing consultation). The second part comprised five specific questions, namely: Can you describe what is done in the nursing consultation? What does the nursing consultation represent for you? What is your opinion about the care of nursing consultation? How does the nursing consultation contribute to your lifestyle changing? How do you think the nursing consultation could be improved?

It is emphasized that the interviews were recorded with transcripts being done later. Data analysis was in accordance with the proposal of Bardin, which presupposes the content analysis.<sup>9</sup> The exploitation of speeches was codified in order to achieve the core of understanding, organized in word clouds, using the "WordClouds" program and aggregated into themes. The most prominent words are represented by larger typeface, allowing a description of the relevant characteristics of the content.

The study was previously authorized and approved by the Ethics Committee of the Universidade Paulista (UNIP) (Opinion No: 2.895.953, CAAE: 97705418.6.0000.5512). This study complied with the ethical principles according to resolution 466/12 (CNS/MS) and was carried out with the participants signing the Written Informed Consent

Form. In order to preserve the identity of participants, it was used the alphanumeric code with the letter H from Hiperdia and the sequence number of interviews (eg H1, H2, H3).

## RESULT

Of the 17 respondents registered in Hiperdia program, 14 (82.35%) are female and 3 (17.65%) male. Regarding the age group, 12 people were 65-70 years (70.58%), 1 person 71-75 years (5.88%)

and 4 people 76-80 (23.52). Regarding marital status, 4 (23.53%) are single, 11 (64.71%) are married and one (5.88%) divorced.

The monthly income of the participants mostly is above a minimum salary for a total of 11 (64.71%) and 6 (35.29%) below the minimum wage. With regard to the education level of the participants, 15 (88.24%) have fundamental level and 2 (11.76%) have high school level. One emphasizes that this topic is to characterize the target audience of the research, as seen in Chart 1.

**Chart 1: Characterization of Participants**

Participant	Gender	Age	Marital Status	Income	Education
H1	F	77	S	ACSM	P
H2	F	68	M	ABSM	P
H3	M	65	M	ACSM	P
H4	M	80	M	ACSM	P
H5	F	78	M	ACSM	P
H6	F	65	M	ACSM	P
H7	F	69	M	ACSM	P
H8	F	69	M	ACSM	P
H9	F	68	M	ABSM	P
H10	F	73	D	ABSM	HS
H11	F	65	S	ABSM	P
H12	F	79	S	ACSM	P
H13	F	65	S	ABSM	HS
H14	M	66	M	ACSM	P
H15	F	66	M	ACSM	P
H16	F	69	M	ACSM	P
H17	F	65	M	ABSM	P

GENDER: F=female M=male; MARITAL STATUS: S=SINGLE M=married D=divorced; INCOME: ACSM= salary above a minimum wage ABSM=salary below a minimum wage; EDUCATION: P=primary HS=high school

Source: Authors

As for the follow-up treatment, 12 (70.50%) are monitored by the program for 1-5 years and 4 (23.53%) are followed by 8-20 years. As for chronic non-communicable

disease, 7 (41.18%) have only hypertension, 2 (11.76%) only Diabetes Mellitus and 8 (47.06%) have Diabetes Mellitus and Hypertension, as Chart 2.

**Chart 2: Characterization as non-communicable chronic disease**

Participant	Follow-up time (years)	Chronic non-communicable disease
H1	3	Hypertension and DM
H2	3	Hypertension and DM
H3	3	DM
H4	1	Hypertension and DM
H5	4	Hypertension and DM
H6	20	Hypertension and DM
H7	8	Hypertension and DM
H8	10	Hypertension and DM
H9	3	HAS
H10	3	HAS
H11	3	Hypertension and DM
H12	20	HAS
H13	5	DM
H14	4	HAS
H15	4	HAS
H16	3	HAS
H17	5	HAS

Source: Authors, 2018

In this context, the following thematic categories emerged: the nurse's role in Hiperdia program from the viewpoint of the older adult; The representativeness of consultation and nursing for the aged of the Hiperdia program; The contribution of nurses to the change of the older adult lifestyle in Hiperdia program.

### **Category 1: The nurse's role in Hiperdia program from the viewpoint of the older adult**

In the first category it is highlighted the role of nurses in the perspective of the older adult in Hiperdia program and can be seen in Table 3, showing that older people have a view of nurses as a professional who assesses, cares, questions, talks, guides on the health-disease process, is concerned with the lifestyle.

**Chart 3.** The nurse's role in Hiperdia program from the older adult's point of view of the Health Unith of Abaetetuba-Pará, 2018.

Participant	Testimony	Word cloud
H2	<i>"I come here and the doctor nurse asks me about what I'm eating, if I am taking care of me"</i>	
H7	<i>"She takes care of people here you know? She is concerned, makes a lot of questions, and helps me take care of me too, saying what I have to do "</i>	
H9	<i>The nurse asks me how I'm feeling, if I took my medicines, if I felt something different these days, different from the normal in the case "</i>	
H11	<i>Well, she picks up my data, evaluates and asks me how I'm feeling "</i>	
H12	<i>"She makes a few questions about my life, asks if I'm taking care of my health, and if I am not, she corrects me"</i>	


Source: Authors, 2018.

### **Category 2: The representativeness of consultation and nursing for the aged of the Hiperdia program**

Regarding the representation of nursing consultation for the older adult of

the Hiperdia program, they reported that the nurse is a reliable professional who talks, who cares, that is, a professional who cares, as can be seen in Chart 4.

**Chart 4:** The representativeness of consultation and nursing for the older adult of the Hiperdia program, Abaetetuba Pará, 2018

Participant	Testimony	Word cloud
H2	<i>"It represents the change I needed"</i>	
H7	<i>"It is essential because it helps me to have proper care"</i>	
H9	<i>"It matters because it helps me maintain my health regulated"</i>	
H11	<i>"What she is, it means she takes care of me, right!"</i>	
H12	<i>"I think it's wonderful, she takes away my doubts, guides me on how I have to act on my health"</i>	
H15	<i>"Basically represents the care, I'm well looked after here, at home I do not have this care, you know?"</i>	
H1	<i>"It is very important in my life, helps me to keep my health."</i>	
H17	<i>"It's very good because we have someone to talk, they care about us."</i>	

Source: authors, 2018.

### **Category 3: The contribution of the nurses to lifestyle change of the older adults in Hiperdia program**

One can infer that the nurse is the motivating professional to change the

lifestyle of the aged, as they reported that nurses contributed to changes in diet, improvement in quality of life, healthy habits such as exercise, care with medication, as described in the word cloud in the image of chart 5.



**Chart 5:** The contribution of nurses to change the lifestyle of the older adults in Hiperdia program, Health Unit Abaetetuba Pará, 2018

Participant	Testimony	Word cloud
H2	"She's good like that, after I started to see the nurse, I never forgot to take my medicine, I eat better."	
H7	"Yes I changed my diet, I exercise, take care of myself"	
H9	"Yes, it contributed; I began to take care of myself better."	
H11	"Yes It contributed, since I started my life became better I started to exercise."	
H12	"It contributed ,yes, but in the beginning I found it difficult to adapt myself, today I can eat all right."	
H15	"In improving the quality of life, diet, physical activity, my medicines, I changed everything."	
H1	"It was because of the consultation I had the care as never before."	
H17	"In many ways, it contributed to the improved quality of life." "Anyway,	
H16	today I know what I should eat to control my diabetes, I know I cannot eat, I exercise, live better "	

Source: authors, 2018

## DISCUSSION

The nursing consultation aims to provide a systematic and individualized

assistance, identifying issues of health and illness, through the interview to anamnesis, physical examination, establishment of nursing process, which consists of the

following steps: research, diagnosis, planning, implementation and assessment.<sup>10</sup> In this way, the nurse who adopted these steps will have more resoluteness in the care plan for the aged. From this perspective, one can ascertain the importance of nursing care in monitoring the older adults in Hiperdia program because the approach between user and professional provides a detailed and continuous observation, which enables the prevention and identification of possible injuries and complications.

In the cloud of words exposed in category 1, the word "orientation" was highlighted. The aged report that the program nurse guides them on how to care for health, food, medication, lifestyle, that is, guidelines for self-care, aiming the user to be protagonist of the therapeutic plan.

The theory of Orem, known for self-care theory, presents as basic concept the practical activities performed by the individual on their behalf, for the maintenance of life, health and well-being. It is related to the factors that interfere with the ability to perform it, among which stands out the age, life experiences, culture, gender, standard of living, education and human being belief.<sup>11</sup>

Caring user with NCDs should have as the basic principle to assist the aged, families and communities, helping them to develop skills and attitudes that provide an effective self-care of this chronic health

problem. The community in which this older adult is set should be involved in the process, so that the actions go beyond the treatment of disease, for the prevention and health promotion, aiming to reduce the prevalence of NCDs.

In this context, the role of nurses in health education enables the older adults to have a broad view as to their treatment and can reflect in relation to their habits and lifestyle in front of SAH and DM, and its long-term consequences. That can make the aged to be information multipliers to their peers, perpetuating the chain of health promotion and prevention within their community.

However, it is emphasized that the stimulus to self-care is complex and difficult, both for health professionals and for Hiperdia program users. It is difficult to change lifestyles and maintain these changes, being extremely important that professionals promote individual or collective educational strategies, so that the aged can effectively follow the care plan.

Some authors state that the nurse of the BHU has as a challenge to program the care in building interpersonal relationships of dialogue, making it a humane and respectful listening. The care process is how to give care, so that there is an interaction between the caregiver and the being who receives the care.<sup>12</sup>

The first has an active role as it develops actions accompanied by caring behaviors. The second, the person to be cared, has a more passive role, depending on his situation, being possible to become dependent temporarily, changing to a less passive role in contributing to care and be responsible for his own care.<sup>13</sup>

In this regard, one notes that the care is present in the practice of nursing, since most of the participants described the nurse as a caregiver. Nursing care favors the bond formation of the older adult in Hiperdia program with nurses, which stems both from contact with the user and the community, as the actions and strategies developed by the professional.

People need to feel confident and secure about the work carried out by health professionals, as the opposite can cause suffering or even depression. Thus, due to its unique proximity during care delivery, nurses play an important role in the perception of those feelings of their clients and the effective training of the bond for the maintenance of health.<sup>14</sup>

Health is something dynamic, indivisible, existing when the environmental conditions and access to actions ensure the health are maintained. Among the nursing theories, there is a certain conceptual unanimity as to the performance of the profession. At first, it takes the responsibility to show solidarity

with people, groups, families and communities, with the aim of mobilizing the cooperation of every human being to conquer and preserve health status.<sup>15</sup>

Thus, it is necessary the nurse to make a dialogue between the social determinants of health, so to develop actions based on the older adults' conditions, valuing the cultural knowledge that they have about their disease, by interacting with the common and scientific sense, in order to develop the care plan, in which the decision making is together, so to promote the health of the aged.

Hiperdia has as one of its objectives to provide the quality of life for the old-aged people, as actions to health promotion that instigate physical activities, nutrition and healthy habits are experienced in this program. These practices affect positively on the health status of the user.<sup>16</sup>

The practice of physical exercise and healthy eating habits should be perceived as non-pharmacological drug therapies in the treatment of the older adults in Hiperdia. Physical activities are important both in reducing blood pressure and glycemic control, in addition to the control of risk factors of their practitioners.<sup>17</sup> This way, the nursing actions to patients with hypertension and DM should include promotion strategies of healthy lifestyle and encouragement.

Lifestyle is understood as a way of life that leads the way to be of the subject, habits and expressions. A person's way of life varies according to the social and cultural group in which he/she is. The decision of the individual to maintain a particular way of life involves both external and mental aspects.

When there is an imbalance of the individual with the environment he lives, adaptive forms of daily stress can occur, so that there is a link with risk factors that aggravates the clinical picture of the aged with hypertension and DM. It is known that these factors are mainly associated with smoking, alcohol abuse, unhealthy diet, physical inactivity and stress.<sup>18</sup>

Therefore, one must maintain an ongoing educational process together with the older adult with NCDs, clarifying the health condition and treatment needs. Educational health interventions conducted by the nursing aims to provide the patient's ability to recognize the symptoms and understand the importance of adhering to therapy.<sup>19</sup> Participants demonstrate to know what the means for the control of diseases are, by orientation of the nursing team, even if they do not completely adhere to the care plan. All actions directed at control of NCDs work as a union of forces, learned and incorporated into daily life.

Based on these collocations, one knows the need for frequent monitoring of the aged

with hypertension and DM, in order to sensitize them about the changes in lifestyle to prevent the complications of these diseases and the importance of adherence to the care plan proposed, so to have a better quality of life.<sup>20</sup>

Among the responses of the participants it was also mentioned the fact that the nursing consultation represents the change that they needed in their life, change of the way of living, in the way of self-care. One notes that the health education process becomes much easier when the nurse can maintain a relationship of empathy with the older adult during the follow-up in Hiperdia program.

In order to make this change possible in the lives of the aged, nurses work with one of the fundamental principles of SUS, which is completeness. The importance of addressing assistance in an integrated way is based on the articulation of all steps in the production of care and health re-establishment. Mapping the comprehensive care by care line monitoring is proposed, thus avoiding its fragmentation.

In this way, the nurse works with an individualized treatment plan, which aims the change needed for the modifications in the older adult's life in Hiperdia program, working not only the disease but also the person, so that he can be integrated into therapy not only as an adjunct but also as protagonist.

It is necessary much effort in these actions, since a change in the lifestyle of a population is something that is achieved in a long term, as the access and the acceptance of the population is generally difficult. It is of utmost importance the work of a multidisciplinary team to carry out educational programs, in order to minimize the lack of the population knowledge about the NCDs.

## CONCLUSION

The nursing consultation in primary care for patients with hypertension and diabetes, through Hiperdia program proved crucial. It still needs improvement however, the actions taken already show significantly positive results.

The Hiperdia older adults reported the importance of nurses throughout the treatment, being cited as a professional who assesses, care, talks, guides, worries about food, with the right way to medicate and corrects if needed, encouraging self-care so that the users can have autonomy and knowledge about their disease and treatment.

It was proved by the reports that the nurse's contribution to the change in lifestyle was fundamental, there were numerous positive reports regarding the improvement in lifestyle that we noticed

they were related to changes in diet, improvement in quality of life, adoption of healthy habits, such as regular exercises and careful about taking medications.

Thus, nurses are essential to the treatment of the older adults in Hiperdia program, as he is a skilled professional to do the necessary guidance and care, for the promotion of health of patients with SAH and DM. A greater appreciation of this professional would be important, so that they can develop technologies that can contribute to transforming the lifestyle of the old-aged people.

As this is a qualitative study with the older adults in a health facility, there was a limitation on the actual representation of the municipal nursing consultation, since the nursing conducts are differentiated according to the professional performing the process nursing. Therefore, extensive research on the subject is suggested to greater understanding of the phenomenon, so to improve nursing care to the aged in Hiperdia program.

**Conflicts of interest:** The authors declare no conflicts of interest

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