CASE REPORT ARTICLE

PSYCHIATRIC COMORBIDITY IN DEPENDENT ON CRACK AND OTHER DRUGS: CASE STUDIES

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ABSTRACT

Objective: reporting the students experience of undergraduate nursing in the care of a patient with psychiatric comorbidity of psychosis type (schizophrenia) plus the use of illegal drugs (crack and marijuana).

Method: a descriptive study of type case studies of a qualitative approach. The experience was experienced during the months of August and September 2013, on the premises of the psychiatric hospital in the city of Teresina (PI), Brazil.

Results: the nursing process was applied to the experienced clinical and psychiatric condition, in all its completeness. The therapeutic relationship, individualized care and better health in evidence-based practices are essential for a good prognosis.

Conclusion: the experience with a chemical dependency framework, followed by psychotic symptoms helped us to understand the importance of the nurse's role and its work object, the systematization of nursing care.

Descriptors: Psychiatric Nursing; Nursing Care; Crack; Comorbidity.

RESUMO

Objetivo: relatar a experiência de discentes da graduação em enfermagem no cuidado a uma paciente portadora de comorbidade psiquiátrica do tipo psicose (esquizofrenia) somada a uso de drogas ilícitas (crack e maconha).

Método: estudo descritivo, do tipo relato de experiência, de abordagem qualitativa. A experiência foi vivenciada durante os meses de agosto e setembro de 2013, nas dependências do hospital psiquiátrico do município de Teresina (PI), Brasil.

Resultados: o processo de enfermagem foi aplicado ao quadro clínico-psiquiátrico vivenciado, em toda sua completude. O relacionamento terapêutico, o cuidado individualizado e as melhores práticas em saúde baseadas em evidências são essenciais para um bom prognóstico.

Conclusão: a experiência com um quadro de dependência química, acompanhada de sintomas psicóticos contribuiu para que compreendêssemos a importância do papel do enfermeiro e de seu objeto de trabalho, a sistematização da Assistência de Enfermagem.

Descriptores: Enfermagem Psiquiátrica; Cuidados de Enfermagem; Crack; Comorbidade.

RESUMEN

Objetivo: reportar la experiencia de los estudiantes de pregrado en enfermería en el cuidado de un paciente con comorbilidad psiquiátrica tipo de paciente psicosis (esquizofrenia), más el uso de drogas ilegales (de crack y marihuana).

Método: un estudio descriptivo del tipo informe de la experiencia de un enfoque cualitativo. La experiencia se vivió durante los meses de agosto y septiembre de 2013, en las instalaciones del hospital psiquiátrico de la ciudad de Teresina (PI), Brasil.

Resultados: el proceso de enfermería se aplicó a la condición clínica y psiquiátrica con experiencia, en toda su integridad. La relación terapéutica, la atención individualizada y una mejor salud en las prácticas basadas en la evidencia son esenciales para un buen pronóstico.

Conclusión: la experiencia con un marco de dependencia química, acompañada de síntomas psicóticos nos ayudó a entender la importancia del papel de la enfermera y su objeto de trabajo, la sistematización de la atención de enfermería.

Descriptores: Enfermería Psiquiátrica; Cuidados de Enfermería; Crack; Comorbidad.

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INTRODUCTION

In Brazil there was an increase in the consumption of licit or illicit drugs. Additionally, an increase of cases of violence, prostitution, theft, trafficking, homicides, and sexually transmitted infections (STIs). Among these drugs, crack is not the exception; nursing assistance of patients with psychiatric comorbidity as concurrency of psychiatric disorders and alcohol and other drugs.1-7

The relevance of the study is based on the intention to propose a systematization of nursing assistance (SAE) as a methodology and organized treatment option, humane and efficient, aimed at socialization and reducing the harm caused by the use of these substances and pathological schizophrenia process. In this perspective came the motivation to carry out this study, which aims to:

- Reporting the students experience of undergraduate nursing in the care of a patient with psychiatric comorbidity patient type psychosis (schizophrenia) plus the use of illegal drugs (crack and marijuana).

METHODOLOGY

This is a descriptive study of a qualitative approach of the type experience report. Thus, there was a description by means of memorization and documentation of students’ experience of undergraduate nursing of a university center of Teresina (PI) during the academic activities of the Mental Health discipline in the Specialized Services, offered on the 6th period of theoretical-practical character and mandatory in the undergraduate curriculum.

On the first day, the service, objectives and guidelines was presented, and was provided to students a schedule of activities to be developed, suggested references and a roadmap for implementation of SAE.

During implementation of the planned activities, patients there were defined to be monitored routinely by students during the two months, August and September 2013, supervised practice.

The operationalization of the SAE occurred through the implementation of all phases of the process, namely: history of nursing, which have been raised customer needs through the implementation of all phases of the process, namely: history of nursing, which have been raised customer needs through the implementation of all phases of the process, namely: history of nursing, which have been raised customer needs through the interpretation and analysis of information, identifying the defining characteristics and risk factors or in connection with the foundation of the experience of students, teaching and specialized literature in the field; planning, implementation and evaluation of nursing actions as priority needs of the client. After the operation of SAE was up by students evaluated the activities.
The systematization of nursing care is a methodology for organizing and conducting the care grounded in the principles of the scientific method, requiring a dynamic and inter-relationship of its phases, in order to assist the customer in its needs, providing security in planning, implementation and evaluation of nursing behaviors, individualization of care, visibility and autonomy to the nurse. Thus, the Nursing Process properly used in Mental Health provides order and direction to the care provided, constituting the essence of nursing practice, as a methodological tool.

Following the instructions given by the teacher operated nursing consultation, in which it was used in a directed history and physical examination. Based on previous knowledge and practical experience, it rose the following conclusions about the biological standards and health promotion: living with HIV/AIDS, starvation, bulimia, constipation, loss of patterns of sleep and rest, frequency nightmares, compromised hygiene, dehydration, self-care deficit and poor treatment adherence.

In subsequent visits analyzed the medical records of the client in order to get more information, because, nursing query data were not sufficient for communication difficulties, such as slurred speech and flight of ideas.

With regard to psychosocial standards met: impaired family composition, ineffective family relationships, monthly income incompatible with basic human needs, use of illegal drugs (crack and marijuana), aggression, agitation, excessive talkativeness, psychotic episodes, delusions recurring, confused ideas, disorientation and social isolation.

It should be noted, is a frame that has a poor prognosis; therefore, present a range of negative symptoms, among them, incoherent communication and impoverished, slowing and psychomotor impoverishment, neglected appearance, extreme social disorder, hypobulia, and emotional blunting, concurrent with positive symptoms, like, disorganized hyperactivity, bizarre behavior, incoherent and broken thoughts, sexual delusions and auditory hallucinations; observing the pattern of findings, was diagnosed (medical-psychiatric diagnosis) Hebephrenic schizophrenia.

It clearly presents a range of risk factors, and other range of stressors, these, in line with a weak ego, makes the individual adjustment mechanisms insufficient, generating a poor response, which will produce an initial psychotic episode and further exacerbation of schizophrenic symptoms, and from this historic priority needs were raised to this table, prescribed and implemented the following care as nursing diagnostics (DE) based on the NANDA taxonomy and in the literature (Figure 1).

<table>
<thead>
<tr>
<th>Problems</th>
<th>DE</th>
<th>Expected Results</th>
<th>Prescribed Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delusional thinking</td>
<td>Change in thought processes</td>
<td>Customer will eliminate delusional thinking patterns.</td>
<td>Encouraging the client to keep in fact, enjoying every touch with him; not discuss nor deny the belief. Use reasonable doubt; fulfill the promises made.</td>
</tr>
<tr>
<td>Audiovisual hallucinations; anxiety</td>
<td>Auditory and visual sensory-perceptive change</td>
<td>Recognizes that the perceptions arising from the hallucinations are unreal; demonstrates control of anxiety.</td>
<td>Observing the client when the signs of hallucinations; avoid touching the client without warning; don’t reinforce the hallucination; help the customer to understand the connection between anxiety and hallucinations; try to keep it focused on specific issues or activities.</td>
</tr>
<tr>
<td>Isolation and social withdrawal; difficulty of communication</td>
<td>Social isolation</td>
<td>Client will voluntarily spend time with other clients and team members in group activities of the unit.</td>
<td>Offering to stay with the client during the activities; give recognition and positive reinforcement to the positive interactions and client with other volunteers.</td>
</tr>
<tr>
<td>Immune compromised protection</td>
<td>The safety and comfort of client will</td>
<td>Implementing universal precautions as the blood and body</td>
<td></td>
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</tbody>
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