



THE APPLICATION OF THE NURSING PROCESS IN THE FULFILMENT OF A WOMAN WITH RHEUMATOID ARTHRITIS

A APLICAÇÃO DO PROCESSO DE ENFERMAGEM NO ATENDIMENTO A UMA MULHER COM ARTRITE REUMATOIDE

LA APLICACIÓN DEL PROCESO DE ENFERMERÍA EN EL CUMPLIMIENTO DE UNA MUJER CON ARTRITIS REUMATOIDE

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ABSTRACT

Objective: to report on the experience of application of Nursing process in meeting a woman with rheumatoid arthritis, in a health service, in the basic attention. **Method:** account of experience in the healthcare practice curriculum of undergraduate degree in Nursing from a federal University, in a town in the Western border region of Rio Grande do Sul, in 2011. Nursing consultation was held with the five steps of the Nursing process. **Results:** it was possible to realize that the user answered unaware of the chronicity of rheumatoid arthritis and not dried effectively to prescribed drug treatment since the initial diagnosis, situations that have contributed to the aggravation of the symptoms of the disease, manifested primarily by pain. **Conclusion:** the elaboration of this report made it possible to understand the importance of using all the steps of the Nursing process in the consultation by a nurse in the basic health network. **Descriptors:** Primary Health Care; Nursing; Nursing Processes; Rheumatoid Arthritis.

RESUMO

Objetivo: relatar sobre a experiência de aplicação do processo de Enfermagem no atendimento a uma mulher com artrite reumatoide, em um serviço de saúde, na atenção básica. **Método:** relato de experiência vivenciada na prática assistencial da grade curricular do Curso de Graduação em Enfermagem de uma universidade federal, em um município da região da Fronteira Oeste do Rio Grande do Sul, em 2011. Foi realizada a consulta de Enfermagem com a aplicação das cinco etapas do processo de Enfermagem. **Resultados:** foi possível perceber que a usuária atendida desconhecia a cronicidade da artrite reumatoide e não aderiu efetivamente ao tratamento medicamentoso prescrito desde o diagnóstico inicial, situações que contribuíram para o agravamento da sintomatologia da doença, manifestada principalmente por dor. **Conclusão:** a elaboração deste relato possibilitou compreender a importância da utilização de todas as etapas do processo de Enfermagem na consulta realizada pelo enfermeiro na rede básica de saúde. **Descritores:** Atenção Primária à Saúde; Enfermagem; Processos de Enfermagem; Artrite Reumatoide.

RESUMEN

Objetivo: un informe sobre la experiencia de la aplicación del proceso de Enfermería en la reunión de una mujer con artritis reumatoide, en un servicio de salud, en la atención básica. **Método:** relato de experiencia vivida en la práctica asistencial del plan de estudios del Curso de Graduación en Enfermería de una universidad federal, en una municipalidad de la Frontera Oeste del Rio Grande do Sul, en 2011. Consulta de Enfermería se celebró con los cinco pasos del proceso de Enfermería. **Resultados:** es posible notar que la usuaria atendida desconocía la cronicidad de la artritis reumatoide y no adhería efectivamente al tratamiento medicamentoso prescrito desde el diagnóstico inicial, situaciones que contribuyeron para el agravio de la sintomatología de la enfermedad, que se manifiesta principalmente por el dolor. **Conclusión:** la elaboración de este informe ha permitido comprender la importancia de la utilización de todos los pasos del proceso de Enfermería en la consulta hecha por el enfermero en la red básica de salud. **Descriptores:** Atención Primaria de Salud; Enfermería; Procesos de Enfermería; Artritis Reumatoide.

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INTRODUCTION

In Brazil, from the years 70, the understanding of a new model of health-disease-care process led to the expansion of primary health care, organizing health services according to the needs of the population.¹

Thus, the primary or basic care emerged as a gateway to the health care system, becoming the most elementary level of attention this system.² The basic attention is characterized by a set of actions of health at individual and collective level covering promotion, health protection, disease prevention, diagnosis, treatment, rehabilitation and maintenance of health, using technologies of high complexity and low density, and can solve the problems of increased frequency and relevance in its territory.³

In this context, with the transition of the patterns of occurrence/contagious diseases to the chronic non-communicable diseases in Brazil, has advocated changes in the basic attention, broadening the vision of simple health access for medical services-quality assistance. These changes are aimed at tackling the determinants of health throughout their range, requiring healthy public policies and effective intersectoral articulation of public power, with consequent mobilization of the population.⁴⁻⁵

Among the chronic non-communicable diseases, rheumatoid arthritis is characterized by being an incurable disease with significant impact on the patient's quality of life, capable of generating some degree of disability and limited participation in many activities.⁶⁻⁷ Also, is a disease that has control-centric treatment of symptoms and complications arising from the same become essential to patient's orientation with regard to etiology and symptoms, in order to ensure the effective adherence to treatment.

Thus, taking into account the care needs of individuals with chronic non-communicable diseases and the need for reorganization of the caution around these, during practical activities curriculum with the undergraduate program in Nursing, assistance to a woman with rheumatoid arthritis in a health basic attention service, utilizing the Nursing Process (NP) as a tool for effective care.

This important work environment is a mode of reasoning, whose implementation assumes that the nurse bring professional expertise, coupled with the systematization of knowledge that the activity called for demand.⁸ The NP is a methodological tool that

guides the care of nurse and the documentation of professional practice, highlighting their contributions to the health care of the population. Still, it increases the visibility and professional recognition⁹ enabling not only professional autonomy and support in your ducts, but also better quality services and increased link to the user.¹⁰

The realization of efficient action aims at NP nurse through a work mode based on scientific method that result in problem solving to meet health care and the needs of patients. Favors also directing, organizing, controlling and evaluation of the activities inherent to the care, providing the thread of thoughts and judgments that the nurse performs in practice.⁸ The NP consists of five interrelated steps, namely: data collection, diagnosis, planning, implementation and evaluation.¹¹

Even with the indication that the NP should be followed in all kinds of services of rising obesity and its dissemination, in Brazil, since the Decade of 70, this methodology of assistance is still little used by nurses. A number of reasons hampers the Parliament's job, and they related to factors inherent in the very structure of NP and its use in teaching and learning scenarios of care practice.¹²

Given the foregoing, aiming to stimulate the implementation and use of NP in daily practice nurse' employment, the present study aims to report on the experience of application of NP in a woman with rheumatoid arthritis in a health service, in the basic attention.

METHODOLOGY

Case studies of qualitative and reflective approach about the care provided to a woman while conducting practical activities belonging to a discipline of the curriculum of undergraduate degree in Nursing from a federal University. The experience took place in a health basic attention service, located in a municipality of the Western border region of Rio Grande do Sul, in the year 2011. In order to respect the ethical aspects, the name of the service, as well as the name of the user will be kept in anonymity.

During the various activities carried out in the course of care and practice in line with the menu of the discipline, one of the goals of the students was to provide Nursing care to the adult systematically, taking account of their needs for care, based on ethical principles, whereas the human being and their relations in political, economic, social context and culture in which is inserted.

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Thus, in accordance with the proposal of the discipline, the consultations carried out by Nursing students should structure itself inside the NP model, with a view to improved learning and provides qualified assistance to users served.

In this context, was met in the health service a woman of 48 years, white skin, with Chief complaint of pain due to rheumatoid arthritis disease diagnosed in the year 2005. The first contact with the user gave up through application of Nursing history, being collected data from anamnesis and physical examination of the same.

During the survey, the data user complained about throbbing type pain in the joints, which emerged after carrying out daily activities. The same was unaware the chronicity of rheumatoid arthritis and not dried effectively to drug treatment prescribed with anti-inflammatory effects of continuous use.

The user claimed reduced visual acuity and not make use of contact lenses or glasses. Reported present eliminations intestinal vesicoureteral unchanged, with appearance and normal frequency. As for lifestyle habits, said satisfactory sleep and rest; reported do not perform physical activity regularly. Mentioned feed on fruits, vegetables and white meat; perform four meals a day (breakfast, lunch, afternoon coffee and dinner). Among the leisure, activities declared perform walks and go to parties sporadically. Commented that his labor activity is autonomous and requires constant contrariwise.

On physical examination, a user named was conscious; self psychically orientated and with memory unchanged. Featured brevilíneo biotype, weighed 70 kg and measured 53 cm and 1 m. Among the risk factors for overweight, morbidities, identified by calculating the body mass index (BMI) measured with value of 29.9. In relation to the evaluation of vital signs, blood pressure of 120 was verified by 70 mmHg, heart rate of 87 bpm, 94% saturation, respiratory rate of 18 mpm and axillary temperature of 36°C.

The assessment of skin showed smooth texture, with color and normal humidity; the presence of upper and lower limb edema; hyperthermia in upper limbs; the absence of injury; mucous membranes normocoradas and hydrated. The examination of the skull has identified the absence of abnormalities, without stains and/or scarring. Featured normal facial expression and no faces of pain.

The senses of smell, taste and hearing presented themselves with functions

unchanged. To inspection, the neck, thyroid gland, jugular veins and carotid artery were within the normal range, with absence of scars and palpable lymph nodes. During the examination of the chest, was found normal chest expansion and pulmonary auscultation with presence of vesicular breath sounds normal and well distributed in both lungs.

So, from the initial survey data from the user, it was possible to list the following Nursing diagnoses: acute and chronic pain related to inflammation and increased disease activity, fatigue or tolerance level decreased due to non-adherence to the treatment of rheumatoid arthritis; acute and chronic pain associated with disease progression; acute pain and discomfort due to edema; knowledge deficit related to treatment of the disease; risk of body temperature changed by hyperthermia related to the inflammatory process and, finally, knowledge about the complications arising from overweight.

With the raised, it moved to the stage of the Nursing requirement that should be applied to the user in question, particularly with regard to adherence to treatment as needed to reduce symptoms, as well as the possible systemic complications arising from the disease. In relation to types, dosages and medicinal purposes, it was stressed that these should be used for the control of disease and pain relief, avoiding your food intake just in pain.

In addition, it was highlighted the possibility of non-pharmacological treatment (application of heat or cold therapy) for pain relief, importance of weight reduction to relieve the stress on the painful joints and avoid complications arising from the overweight, as well as adjustment of the daily life activities of the user, in order to balance the movement and home.

In this way, the Nursing interventions included: health education, explaining the etiology, pathogenesis, complications, treatment (and importance) and prognosis of the disease to the user and their families; guide the family to cooperate in handling the user, encouraging the same in this continuity and; stimulate the user her verbalize feelings about pain and the chronicity of the disease because the verbalization favors confrontation of pathology.

Other strategies listed consisted in encouraging the alternation between rest and activity, since this balance saves energy and allows greater productivity; limit interactions that produce stress; help the user to adjust the lifestyle to decrease stress; Guide on the use of non-slip shoes to improve mobility and

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have added security to walk. In addition, because the user did not practice regular physical activity, a necessary intervention consisted in encouraging the same in identifying the sedentary lifestyle and overweight, reinforcing the instructions regarding physical activity and nutrition.

In addition, it is necessary clinical examinations and periodic laboratory evaluations, so that the side effects of prescription drugs to be detected and treated, as well as the progression of the disease to be diagnosed and monitored.

With this, it is believed that the planned care plan is focused to the main need of user answered-the relief of their pain. Still, it aims to improve the quality of life the same, noting that rheumatoid arthritis is a disease that has no cure. Thus, the main goal of the plan drawn up aimed at the improvement of the clinical picture presented.

RESULTS AND DISCUSSION

The consultations provided by Nursing students structured within the NP, which consists of a "systematic method in stages with the aim of establishing from the Nursing diagnosis, care and the necessary actions for the resolution of the problems encountered in each case served in individual and collective perspective".^{13:62} In addition, the NP is the main methodological instrument capable of documenting the professional practice, improving their visibility, recognition and represents a concrete possibility of practical assessment.¹⁴

Their application in a systematic, planned and dynamic, is able to manage care, making it possible to identify, understand, describe, explain and predict how the user will respond to the problems of health and/or life processes and which aspects of these responses need attention, favoring the creation of a quality care directed to the demands presented.¹⁵⁻¹⁶

With regard to the first stage the NP, of data collection, it is the user's data collection, in which one has the possibility to understand and grasp much of the subjectivity of this .¹⁷ identifying actual and potential problems. It should be noted that data collection "is the foundation on which are based on the following steps, and that all decisions and Nursing interventions are based on information available at this time".^{18:2266}

The physical examination, also part of this first step, "can be carried out before, during or after the survey of the history of health, depending on the patient's physical and emotional States and the immediate priorities

of the situation".^{7:30} This is the survey of the physical and psychological conditions of the patient, in order to get meaningful information that may provide the assistance to be provided at the same.¹⁷

After performing data collection and the physical examination of user, other data were collected in the same record, in which were found little information regarding its clinical picture.

Thereby, it highlights the importance of the records in the record, because the absence of these makes the evaluation of the quality of service provided, as well as the management of assistance. Thus, one can see the Handbook as a tool of great importance and significance in Nursing care, being the same considered as inherent part of the process of care, because through it the different team members can make decisions and conduct for (re) plan, continue and evaluate the services provided, in order to achieve the quality of care provided to the user.¹⁹

Then, once you have analyzed the data collected in the previous steps, identified the problems of Nursing, basic necessities affected and the degree of dependency. This step was represented as the drafting of Nursing diagnoses in which scientific knowledge is required and professional clinical ability to identify the most relevant diagnoses.²⁰

After the identification of Nursing diagnoses, prescription, this consists of a set of measures directed at the care of user individually and established by the nurse, by other members of the team and the individual who sought health care, aimed at prevention, promotion, protection, and recovery and health maintenance.²¹

The requirements listed, split for planning of Nursing care, in which the priorities were established, drawn up the objectives and planned actions of Nursing, according to the needs and specificities of the user. At this stage, it should be noted the importance of the inclusion of the individual as protagonist in his care so that the requirements of Nursing are effectively met. Thus, the same should be aware of its importance in the treatment of your health-disease process.

At this time, to minimize disagreements, clinical nurse should pay attention to the selection of interventions, targeting the same to the individual who has the diagnosis and not for diagnosis that this has. This selection may be the influence of several factors and should consider the purpose of the

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intervention, as well as the ultimate goal of the assistance.²²

Therefore, thinking on the improvement of the clinical picture presented, it is believed that the team must work under the conditions of health education. This choice is justified by the fact that the radical health education differs from the traditional model of health education, because the educational approach used in this search a joint work in search of solutions and strategies to change reality, while the traditional model means that the individual must only understand the guidelines that are passed, without any questioning since in this model the subject knows nothing and there is no need for him to develop critical consciousness.²³

In this context, it becomes essential to work the radical health education with the user satisfied, since, well, it would be possible to promote your health at the same time that would stimulate reflection and critical awareness, facilitating it exerts only a supporting role in your care.

Working through this educational approach with the user, professionals could identify the knowledge of the same in relation to the disease and to build together a care plan can be fulfilled, since the individual with rheumatoid arthritis is fundamental to understanding the meaning of disease, as well as the consequences arising from this pathology.

In addition, it is necessary to involve the user in handling family, because the family network can assist by providing support, in the consultations, remembering the times of medications and encouraging the necessary changes in lifestyle. The importance of family involvement in care tends to bring positive responses, both to families and patients.²⁴

From the planning, you can move on to the implementation phase, which covers the prescription of Nursing care plan proposal, concentrating on solving the Nursing diagnoses and interdependent problems of user.⁷

The last step of the NP evaluation corresponded to, being possible to carry out a feedback in order to assess whether the goal set was achieved, taking into account the needs and desires of the user and in view of the satisfaction of this before the qualification of health care.²⁵

In this way, regardless of the stage of NP professional who is performing, you must think about the use of different methodologies, tools and techniques for obtaining dados²² that support and subsidize the care that will be directed to the patient,

evaluating whether each phase was exhausted in its specifics.

FINAL REMARKS

Whereas the basic attention is the gateway to the services provided to families, professionals require complete information regarding bio psychosocial situation of every individual in the family context, in order to promote resolution in attendances and match your strategic role on the network for health care of the population.

In this sense, these case studies enabled the understanding and nurse in basic health network make importance of using steps of NP in the query. Hereby, the relevance of conducting a complete physical examination and history taking, in which all information collected are properly recorded in the medical record, serving as subsidies for future construction and implementation of the next steps of the process.

Still, it should be noted that through the use of the five stages of the NP, managed to realize a new perspective for the systematization of Nursing consultations, since this method directs the attention to the specific health needs of each user, allowing a more qualified and humanized assistance.

Finally, it was noted, that the systematic care process promotes the link between user and nurse, valuing their professional practice and his representation before the multi-professional team. The Nursing consultation held in the manner cited has provided to students to build a learning that, during visits to the theory and practice in the development of curricular activities, prepared them for performance of professional practice.

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