

3rd Euro Nursing & Medicare Summit

July 27-29, 2015 Valencia, Spain

Care competency of informal care givers for Chronic Renal Failure (CRF) patients at home

Rajesh Kumar
India

Introduction: Majority of Chronic Renal Failure (CRF), Chronic Kidney Disease (CKD) and End Stage Renal Disease (ESRD) patients depends on family and friends, to manage their chronic illness throughout the course of CKD. Appropriate home care management of CKD can help to prevent or delay the progression of illness.

Methods: A pre-experimental study with quantitative approach was undertaken on 45 care givers of CKD patients with the objective to study the improvement in competency regarding home care of care-givers of patients with CRF through administration of an instructional program and information booklet which would help the care givers of CRF patients to enhance their knowledge and skills regarding care at home.

Results: The mean difference of knowledge score was statistically significant ($t = 19.156$), at 0.05 level of significance. The mean difference in practice score was statistically significant at 0.05 level of significance and suggested that instructional program regarding home care was effective in terms of enhancing knowledge and practice score among care givers of CRF patients.

Conclusion: Educating the caregivers of CKD patients about importance of nutritional management, rest and exercises, psychological support and communication, fistula care, maintaining skin integrity and maintaining fluid and electrolyte balances will help in providing adequate care in patients of CKD.

rajeshsharma.hcn@gmail.com

Mitral valve prolapse and cerebral ischemia: Nurse specialist experience in echocardiography

S Vučinić and V Perović
Institute of Cardiovascular Disease "Dedinje", Serbia

Background: Mitral valve prolapse (MVP), with 2% general population prevalence (more frequent in younger women) is benign condition. Although rare, this patients can experience serious complications, such as sudden cardiac death (0.5 - 2%) and stroke (0.6%).

Aim: The aim of this study was to identify the prognostic value of a group of risk factors that were obtained by combining non-invasive methods (echocardiography and holter-ECG) in assessment of risk for stroke (embolic/ischemic) in subjects with non complicated MVR.

Methods: There were 158 subjects examined in the period 2012, in ultrasound lab. They were divided into two groups. In the first group there were 40 subjects aged 20-45 (36% male, 64% female) with clearly identified MVP without complications. In the second group there were 87 subjects aged 37-50 (22% male, 78% female) with clearly identified MVP without complications who suffered stroke in observed period. The following statistical tests were used: t-test, variance analysis, chi square test, binary logistic regression and descriptive statistics. In all the tests applied the level of significance was set at 5%.

Results: We determined by using statistical methods that a group of risk factors: anterior mitral leaflet thickness-AMLt (7.15 ± 1.2 mm; $p < 0.05$; HR 5.7), interatrial septal aneurysm ($p < 0.05$; HP 9.6), paroxysmal atrial fibrillation ($p < 0.05$; HR 8.7), left atrium systolic volume-LAVs (42.6 ± 10.7 , $p < 0.05$; HR 3.8) and asystolic pause (3.5 ± 1 s; $p < 0.05$, HR 5.2) defined by a combination of non-invasive methods can predict stroke onset with a 87% sensitivity, in patients with MNP.

Conclusion: This study confirmed that by combining non-invasive methods we can create a group of risk factors with a 87% prognostic sensitivity for onset of stroke, extremely rare (1/6000 patients per year) complication. Our results can help in identification of high risk group of patients with MVP and possibility for onset of this dangerous thromboembolic life threatening complication, and to give opportunity for prevention.

sanjakosticvucinic@gmail.com