

Nursing care in primary care for patients with non communicable chronic diseases

Cuidados de enfermagem na atenção básica a portadores de doenças crônicas não transmissíveis

Atención de enfermería en atención primaria para pacientes con enfermedades crónicas no transmisibles

RESUMO

Objetivo: descrever quais os cuidados de enfermagem na atenção básica a portadores de doenças crônicas não transmissíveis. Método: trata-se de uma revisão integrativa de literatura com caráter narrativo/descritivo, com abordagem qualitativa, publicadas no período de 2017 a outubro de 2021, nos idiomas português, inglês, nas bases de dados LILACS, BDNF e SciELO, foram utilizados os descritores Sistema Único de Saúde (SUS); Doenças Crônicas não Transmissíveis; Cuidados de Enfermagem; Unidade Básica de Saúde. Resultado: as doenças crônicas não transmissíveis são consideradas um problema de saúde pública e apresentam prejuízos na qualidade de vida, com alto grau de limitações, os cuidados de enfermagem na atenção básica, auxiliam no controle das patologias evitando seus agravos, já que a assistência de enfermagem presta um cuidado individual embasado cientificamente para cada paciente. Conclusão: os cuidados de enfermagem na atenção básica são imprescindíveis para a manutenção da qualidade de vida dos portadores de doenças crônicas não transmissíveis.

DESCRIPTORES: Sistema Único de Saúde (SUS); Doenças Crônicas Não Transmissíveis; Cuidados de Enfermagem; Unidade Básica de Saúde.

ABSTRACT

Objective: to describe nursing care in primary care for patients with chronic non-communicable diseases. Method: this is an integrative review of literature with a narrative/descriptive character, published from 2017 to October 2021, in the Portuguese, English, LILACS, BDNF and SciELO databases, the descriptors Single Health System (SUS); Non-communicable chronic diseases; Nursing care, Basic Health Unit were used. Result: chronic non-communicable diseases are considered a public health problem and present impairments in quality of life, with a high degree of limitations, nursing care in primary care, help control pathologies avoiding their injuries, as nursing care provides individual, science-based care for each patient. Conclusion: nursing care in primary care is essential for maintaining the quality of life of patients with chronic non-communicable diseases.

DESCRIPTORS: Unified Health System (SUS); Noncommunicable Diseases; Nursing Care; Basic Health Unit.

RESUMEN

Objetivo: describir la atención de enfermería en atención primaria para pacientes con enfermedades crónicas no transmisibles. Método: se trata de una revisión integradora de la literatura con carácter narrativo/descriptivo, publicada de 2017 a octubre 2021, en las bases de datos portuguesa, inglesa, lila, BDNF y SciELO, se utilizaron los descriptores Sistema Único de Salud (sus); Enfermedades Crónicas no Transmisibles; Cuidados de Enfermería; Unidad Básica de Salud. Resultado: Las enfermedades crónicas no transmisibles son consideradas un problema de salud pública y presentan deficiencias en la calidad de vida, con un alto grado de limitaciones, la atención de enfermería en atención primaria, ayudan a controlar patologías evitando sus lesiones, ya que el cuidado de enfermería proporciona atención individual con base científica para cada paciente. Conclusión: la atención de enfermería en atención primaria es esencial para mantener la calidad de vida de los pacientes con enfermedades crónicas no transmisibles.

DESCRIPTORES: Sistema Único de Salud (SUS); Enfermedades No Transmisibles; Cuidados de Enfermería; Unidad Básica de Salud.

RECEBIDO EM: 20/11/21 APROVADO EM: 02/02/22

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INTRODUCTION

Chronic non-communicable diseases (NCDs) are pathologies characterized by having multiple etiologies of gradual onset that progress with a long or indefinite duration. Of non-infectious origin that can be associated with disabilities and functional incapacities, they can be classified by pre-existing risk factors that cannot be changed, such as: gender, age, genetics and behavioral factors that depend on the individual's lifestyle, such as smoking, alcohol consumption, sedentary lifestyle and obesity, risk factors can be potentiated by socioeconomic and environmental aspects.¹

According to a survey carried out by the Brazilian Institute of Geography and Statistics (IBGE) in 2019, about 52% of the Brazilian population aged 18 and over has some NCD, thus becoming a public health problem. Although this type of pathology affects all socioeconomic spheres, it is a fact that the most socioeconomically vulnerable part of the population is the most affected due to the environment in which they are inserted.^{2, 4}

The unified health system (SUS) guarantees health as a right for all, prevents, promotes and rehabilitates, and tends to reduce social inequalities so that there is balanced care for all, which includes care and assistance for Chronic Noncommunicable Diseases (NCDs)

The non-communicable chronic diseases that are most prevalent in the Brazilian population are diabetes mellitus (DM), malignant neoplasms, circulatory system diseases and chronic respiratory diseases (CRD).³

In 2018, there was a drop in the mortality rate caused by NCDs in the Brazilian population, with emphasis on the reduction of chronic respiratory and circulatory diseases. On the other hand, the death rates from diabetes and cancer had a high increase in the same period. There are some factors that led to this reduction in NCDs, a reduction in smoking in recent years and an improvement in the health system.⁵

The unified health system (SUS) guarantees health as a right for all, prevents, promotes and rehabilitates, and tends to reduce social inequalities so that there is balanced care for all, which includes care and assistance for Chronic Noncommunicable Diseases (NCDs), being more sought after by people who are dependent on the public care network and who are mostly elderly people with multimorbidities.²² Within this context, primary health care services are essential for the control of NCDs and

the consequent risk factors associated with them, where it is composed of a multidisciplinary team with evidence of the nursing professional where home visits are usually usual as interventions, where health education takes place with the patient and family members and/or caregivers, in addition to emphasizing self-care, and collective care that becomes therapeutic in sharing the challenges presented by the disease with the group.⁶

With this organization, the nurse has the role of integrating the PC team, performing individual and collective care for the population groups in their area, in addition to including team management in prevention, promotion and care.¹⁹ Thus, the objective of the study was to characterize nursing care in primary care for patients with NCDs.

METHOD

The present research is an integrative review of the literature of a narrative/descriptive nature, with a qualitative approach. To start the selection of articles, a search for descriptors and a query in DeCS/MeSH was carried out, the descriptors selected and used were: "Unified Health System (SUS)", "Non-Communicable Chronic Diseases", "Nursing Care", "Basic Health Unit". The search and selection of articles was carried out in the following databases: Scientific Electronic Library Online (SciELO), Latin American and Caribbean Literature on Health Sciences (LILACS), Nursing Database (BDENF) extracted through the Virtual Health Library (VHL) and on the pages of the Ministry of Health.

The descriptors were inserted to search for articles in the database, the search was carried out manually from August to October 2021 by three researchers using the technique for data collection. Using the descriptors, 259 articles were found in the databases. To carry out the selection of articles, the inclusion criteria of publication period from 2017 to 2021 were used, complete articles, with publication in English and Portuguese, articles that were within the topics covered and that correlated with

the previously selected descriptors. Studies that did not answer the guiding question, theses, dissertations, course conclusion works, opinion articles, letters to the editor and duplicate studies were excluded, these being the exclusion criteria.

At first, a selective reading of the articles was carried out, with analysis of the title and abstract. For the initial analysis, it was observed: published period, language and country, methodological aspects of the studies and main results and conclusions. Soon after, a detailed analysis of the articles was carried out, considering the rigor and characteristics for the selection of articles if it corresponded to the guiding question of this research and review articles, cohort studies and systematic review articles were selected.

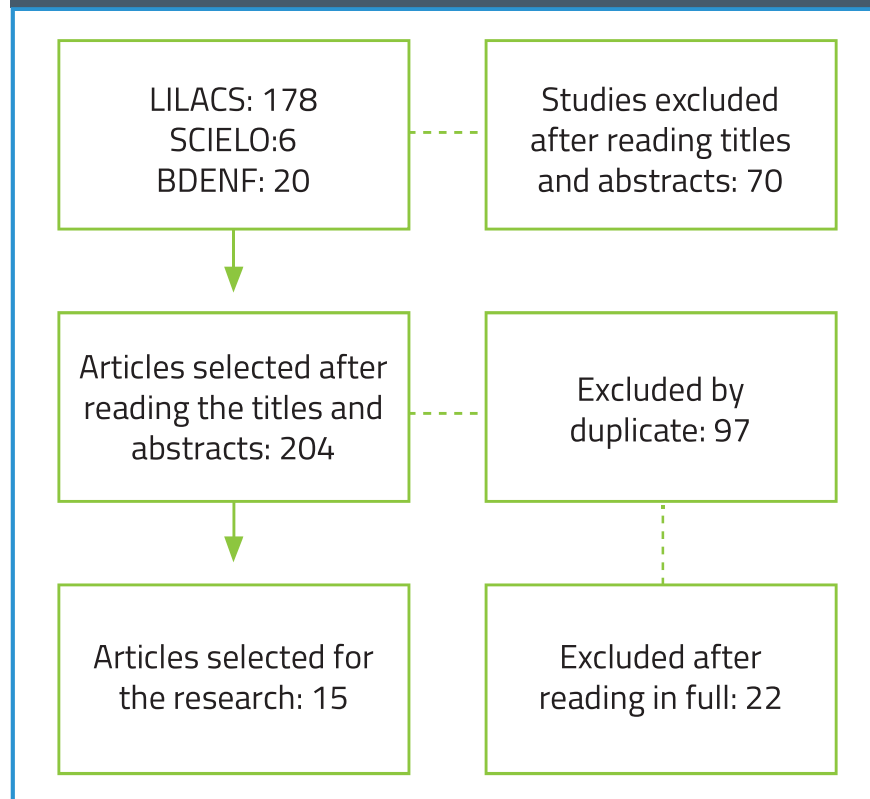
As a search strategy based on the descriptors that defined the guiding question, the

Boolean operators "AND" and "OR" were used in the following ways: non-communicable chronic diseases (doenças crônicas não transmissíveis) AND nursing care (cuidados de enfermagem). non-communicable chronic diseases (doenças crônicas não transmissíveis) AND Health Unic System (sistema único de saúde). non-communicable chronic diseases (doenças crônicas não transmissíveis) OR Basic Health Unit (unidade básica de saúde). The present research is at level 5 of the scientific level scale, considering that evidence from a systematic review of descriptive and qualitative studies was used.

RESULTS

After the inclusion and exclusion criteria, 97 articles were selected for reading the abstracts, of which only 15 fit the proposed

Figure 1- Flowchart of selection of articles and reasons for exclusion, Jaboatão dos Guararapes/PE, 2021.



Source: Prepared by the authors, 2021.

theme and were selected. Of these articles, 6 were found in Scielo, 4 in BNENF, 5 in Lilacs. Figure 1 presents the flowchart of the article selection strategy according to the pre-established eligibility criteria. Table 1 presents the characterization of the analysis of articles referring to titles, country, year of publication, study design, sample and main results.

DISCUSSION

DM is considered one of the NCDs that most affects the Brazilian population, being characterized by a pancreatic dysfunction that causes the deficiency or inexistence of the production of the insulin hormone, the increase of glucose in the bloodstream, resulting in hyperglycemia, without correction of blood glucose levels can result in possible damage to organs, blood vessels and nerves.^{10 11 12}

Nursing care for DM patients includes guidance on insulin therapy, especially on the importance of performing the “rotating” scheme of application areas, thus avoiding the formation of nodules. Furthermore, the management performed by the nurse must be guided by an individual approach for each patient, respecting the specificities of each one, in addition to health education to guide the control of DM through food and physical activity, in order to effectively avoid its possible diseases^{11 9}

Malignant Neoplasms are a subgroup within the CNCD that encompasses more than 100 types of tumor, they can arise in any part of the body, especially after the metastasis phase. Its origin is through an abnormal cellular disorder.^{7 13} Nursing interventions with cancer users go beyond pharmacological measures, requiring physical and emotional comfort, maintaining humanized care, placing the individual as a whole.²¹ NCDs related to the circulatory system are directly linked to the lifestyle of the Brazilian population. Systemic arterial hypertension (SAH).

Hypertension without control and monitoring by a multidisciplinary team leads to the aggravation of the case and more severe cardiovascular problems and can lead

Table 2: Description of the characteristics of the articles used with the levels of evidence, Jaboatão dos Guararapes, 2021.

AUTHOR	COUNTRY/ YEAR	STUDY DESIGN AND SAMPLE	MAIN RESULTS	LEVEL OF EVIDENCE
BECKER, R. M. et al	Brazil, 2021	Qualitative study. Sample: 23 nurses from the Family Health Strategy.	Nursing care for patients with NCDs was observed in AB.	IV
MATIAS, K, SÃO- JOÃO	Brazil, 2021	Methodological study used data from a UBS, people with SAH and DM, Sample: 12018 in total	Nursing care for people with cardiometabolic CNCDs was observed.	IV
SCHRODER, V.G.T.C et al.	Brazil, 2021	This is a cross-sectional study. Sample: 90 participants.	Nursing interventions were observed in front of the DM.	V

Source: Prepared by the authors, 2021.

to death, the nurse acts by encouraging the performance of drug treatment and performing the reception of the patient and the people around them, thus creating a solid and present support network.^{5 8}

Chronic respiratory diseases (CRD) are pathologies that affect the organs of the respiratory system. The most common are asthma, chronic obstructive pulmonary disease and allergic rhinitis, the first two of which are the main causes of death globally, with around 8% of premature deaths from NCDs being attributed to them. In addition, they affect children and the elderly with greater prevalence.^{17 18}

Primary Care (PC) is the first level of health care, thus it is considered the gateway to the SUS, the number of users in family health units who are affected by at least one chronic disease is increasing, around 70% of deaths worldwide, it is necessary to monitor these users so that the treatment can be regulated and made viable.^{19 18 20}

The nurse can act in the prevention of diseases from the nursing consultations, which are usually carried out alternately with the doctor of the unit, and in heal-

th education in alternative ways such as groups, campaigns and lectures in schools, in the units and wherever the insertion fits, when there is a Family Health Support Center (NASF - Núcleo de Apoio a Saúde da família) in the unit.¹⁵ From this, it is possible to perceive that nursing care is provided by the following guidelines: individual and collective care and home visits, which can all be performed with complete autonomy by the unit’s nursing professional, as well as in conjunction with other professionals.¹⁶

CONCLUSION

With the analysis of the collected data, it is noted that the NCDs affect a large part of the population and over time bring numerous disorders to the life of the carrier. Nursing care in primary care begins with the prevention of pathologies and is essential for maintaining treatment. These practices establish a solid relationship with the patient and facilitate adherence and continuity of treatment, and most CNCDs can be treated in primary health care.

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