

**95 - CARDIOVASCULAR DISEASE: THE POSSIBILITIES OF APPLICATION SELF-CARE**

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**INTRODUCTION**

Cardiovascular diseases are responsible for eighteen million deaths a year worldwide, and the coronary and cerebral-vascular diseases account for two thirds of these deaths and approximately 22% of the 55 million deaths from all causes.

In Brazil, cardiovascular diseases account for 33% of deaths with known causes and was the leading cause of hospitalization in the public sector, between 1996 and 1999, for individuals aged between 40 and 59 years (17%) and for those with 60 or more years (29%) (BARRETO, 2003).

In our reality, cardiovascular diseases not only represent important cause of morbimortality as are associated with high costs, both social workers, like those resulting from hospitalization and pensions. And, despite the decline in mortality from these diseases concomitant to the extension of the control of hypertension in developed countries, are still the leading cause of mortality (MATOS; LADEIA, 2003).

An estimated ten to twenty million Brazilians, approximately 15% of the population with twenty years or more, suffer from hypertension. The disease is considered by the federal government, a serious public health problem. It is estimated that this disease is responsible for about 40% of cases of early retirement and absenteeism at work (FUNCAP, 2002).

Despite such evidence, epidemiological studies have shown that cardiovascular disease has become a relatively rare cause of death in the absence of major risk factors. Almost 75% of new cases of these diseases occurring in developed countries, in the decades of 1970-80, could be explained by diet and inadequate physical activity - expressed by unfavorable lipid levels, obesity and elevated blood pressure - linked to the habit of smoking. The study of risk factors related to their presence and intensity of future disease (BARRETO, 2003).

During the twentieth century, the cardiovascular diseases acquired an importance with the increase of life expectancy of the population in general. This reality was perceived in the United States, with the increase in life expectancy of forty-seven years in 1990, to seventy-three years in 1999. And in Brazil, who was born in 2000, they may have an average of 68.6 years (BOASAUDE, 2002).

The high incidence of diseases mentioned, as well as its in our country morbimortality justifies the identification of risk factors (heredity, sex, age, race, smoking, hypertension, stress, diabetes, obesity, among others) that are the direct cause for a particular disease in order to revert this public health problem (FERREIRA, 2000).

**METHODOLOGY**

Descriptive exploratory study, with quantitative approach, held in a public hospital, large-scale, a reference to emergency and trauma, in Natal, capital of Rio Grande do Norte.

The study population consisted of patients with cardiovascular disease seen in the sector of medical emergencies, in January 2007. Were included in this study, those who had a diagnosis of cardiovascular disease established in the bulletin that doctors and agreed to participate. Thus, there were ninety-two interviews structured in the morning and afternoon shifts, with the average duration of ten minutes, guided by a pre-established.

Its achievement was made possible by request prior authorization from that institution of health and its development followed the guidelines of Resolution No. 196/96, of the National Health Council, which provides on research involving humans.

The data were processed quantitatively. According Fontes (1997), working from that perspective is the intention of ensuring the accuracy of results, avoiding distortions of the analysis and interpretation.

**RESULTS AND DISCUSSION**

The distribution of participants regarding gender consisted of 60% female and 40% males. Among them, 45% said being married, are widowed or 27%, 28% are distributed between singles and others. As for age, the age groups ranging between 46 and 75 years of age, are like those of most prevalent. This is due to the predominance of women in the population in focus, and an increase in life expectancy today.

The population studied, as far as the level of schooling, 48% said not to be literate and 83% make as family income from 01 to 03 minimum wages. These figures reflect how precarious is the educational and economic condition of the interviewees, which could probably result in greater difficulties for the understanding and adherence to a plan for the self.

When asked about eating habits, found the data show that 78% eat pasta, 49% eat breakfast, 45% routinely use sugar, 19% feeds off the fat and that 18% use salt. On these data, with regard to coffee, it is known that can cause abnormalities in blood pressure levels when combined with other dietary habits such as fat, coronary diseases and obesity (PESSUDO; CARVALHO, 1998).

This study found that 78% are sedentary, ie, do not have the habit of systematic and regular practice activities. Among the participants, 70% reported not like physical activities, 25% follow the recommendation and 5% acknowledges be good for health. As for the sedentary, 63% say it is impossible, 17% say lack of time and 11% do not like. It is known that exercise helps in reducing obesity and the prevention of coronary disease, contribute to the better functioning of the body, strengthening the heart, muscles, lungs, bones and joints (PESSUDO; CARVALHO, 1998).

Referring to the use of alcohol, 86% of the population in question informed not drink. The consumption of alcoholic beverages can cause increased blood pressure, cardiovascular risk of accidents, increased level of cholesterol, coagulopathy. The relatively high rates of alcohol have toxic effects on the heart, which can precipitate the alcoholic cardiomyopathy (KULLER, 1997).

As for smoking, 45% said it had never smoked, 33% claims to be ex-smokers and smokers is 19%. Numerous studies confirm that smoking is associated with increased morbidity and mortality among the sclerotic coronary disease hence the emphasis on educational campaigns and stimulate the regular physical activity.

About the complaints that led to patients seeking hospital care, chest pain and fatigue with 26% and 23%, are listed as the most respectively, while vomiting and fainting, with 3% each, appear as those of smaller indexes. Deserves mention the information that 39% of the participants of this study say they have returned to First Aid for the same reason. This suggests care superficial, with inaccurate diagnoses, lack of routing and / or the user's inaccessibility to the health system.

According to the results, 48% of respondents claim to have sought hospital care in less than two hours after the onset of the signs and symptoms, contrasted with 16% who sought treatment after twenty four hours, while 67% said they have knowledge about factors and risk for cardiovascular disease. This is probably associated with the degree of education (enlightenment), the socio-economic conditions and raise implications for the prognosis of the patient.

### **CONCLUSION**

The threat of an actual or potential impact cardiovascular disease is very significant from a bio-psycho-social and economic life of the people and increases the need for hospital care based on multidisciplinary specialized educational interventions.

The patients as individuals and dynamic human being has deficits for the self that generate needs for individual interventions scientifically substantiated and provided a systematic way.

In this study, from the data found, it becomes clear the extent of the proposed objectives, expressed words characterize the study population and the identification of deficits in self-related risk factors for cardiovascular disease.

Therefore, we can say that health care in the design of self lends itself to improving the systematization of care being provided and produces changes in the behavior of professionals, patients and their relatives, demanding to do a rethink of practice hospital and the enhancement of life and patient as a subject of active and responsible for driving and controlling their own lives.

Accordingly, work in this perspective involves the search for greater responsibility, autonomy and complicity of those involved in the educational process, requiring preparation and intervention of a multidisciplinary team with cognitive skills, technical and interpersonal, winning the care of the needs of self-care.

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### **CARDIOVASCULAR DISEASE: THE POSSIBILITIES OF APPLICATION SELF-CARE ABSTRACT**

It is a descriptive exploratory study, quantitative, whose objectives are to: characterize the population suffering from cardiovascular accidents attended a service of First Aid; identify factors of risk, and Building a database on cardiovascular diseases. The study population consisted of ninety-two patients in January 2007 in a public hospital, large-scale, a reference to emergency and trauma in the city of Natal / RN. Data collection was by carrying out structured interviews in the morning and afternoon shifts, with the average duration of ten minutes, guided by a pre-established. In the population studied, it is the predominance of women (60%); aged over seventy-five years (35%), married (45%); not literate (48%), and with a family income of Three-wage minimal (83%). As the practice for the self; 19% routinely eats fat, 18% make use of salt daily, 78% feeds off of pasta, 45% sweeten foods with sugar, 78% are sedentary, 8% is used for drinking ; 19% are smokers, 26% reported chest pain as the main complaint, 75% sought hospital care soon after the onset of the signs and symptoms, and 67% of those surveyed are aware of any risk factor associated with the development of cardiovascular diseases. It follows that the actual or potential threat of cardiovascular disease has a significant impact on people's lives, which justifies the need and stimulate the practice of self through the adoption of the education of patients and relatives. From this perspective, it is emphasized importance of a multidisciplinary practice with cognitive skills, technical and interpersonal, winning the care of the needs of self.

**Keywords:** cardiovascular diseases, self care, emergency medical services.

### **LES MALADIES CARDIO-VASCULAIRES: LES POSSIBILITÉS D'APPLICATION LIBRE RESUMÉ**

Il s'agit d'une étude descriptive, quantitative, dont les objectifs sont les suivants: caractériser la population souffrant d'accidents cardio-vasculaires ont assisté à un service de premiers soins; d'identifier les facteurs de risque, et de la construction d'une base de données sur les maladies cardiovasculaires. La population étudiée se composait de quatre-vingt-deux patients en Janvier 2007 dans un hôpital public, à grande échelle, une référence à l'urgence et de traumatisme dans la ville de Natal / RN. La collecte des données a été en procédant à des interviews structurées dans la matinée et l'après-midi, avec la durée moyenne de dix minutes, guidée par un pré-établis. Dans la population étudiée, c'est la prédominance des femmes (60%), âgés de plus de soixante-cinq ans (35%), mariés (45%); analphabètes (48%), et avec un revenu familial de à trois salaires minimum (83%). Comme la pratique de l'auto, 19% de matières grasses mange régulièrement, 18% font usage de sel par jour, 78% se nourrit de

pâtes, de 45% des aliments sucrer avec du sucre, 78% sont sédentaires, de 8% est utilisée pour boire 19% sont des fumeurs, 26% ont signalé des douleurs à la poitrine comme le principal grief, 75% étaient demandeurs d'hôpital de soins peu après l'apparition des signes et des symptômes, et 67% des personnes interrogées sont au courant de tout facteur de risque associé au développement de maladies cardiovasculaires. Il en résulte que la menace réelle ou potentielle de la maladie cardiovasculaire a un impact significatif sur la vie des gens, ce qui justifie la nécessité et de stimuler la pratique de l'auto grâce à l'adoption de l'éducation des patients et de parents. De ce point de vue, il est souligné l'importance d'une pratique multidisciplinaire avec des compétences cognitives, techniques et interpersonnelles, gagnant les soins des besoins de soi.

**Most-clés:** les maladies cardio-vasculaires, auto soins, les services médicaux d'urgence

#### LAS ENFERMEDADES CARDIOVASCULARES: LAS POSIBILIDADES DE APLICACIÓN AUTOCUIDADO.

##### RESUMEN

Se trata de un estudio exploratorio descriptivo, cuantitativo, cuyos objetivos son: caracterizar la población cardiovascular que sufren accidentes asistieron a un servicio de primeros auxilios; identificar los factores de riesgo, y la construcción de una base de datos sobre las enfermedades cardiovasculares. La población de estudio consistió en noventa y dos pacientes en enero de 2007 en un hospital público, en gran escala, una referencia a la emergencia y trauma en la ciudad de Natal / RN. La recolección de datos fue mediante la realización de entrevistas estructuradas en el turnos de mañana y tarde, con la duración media de diez minutos, guiado por un pre-establecido. En la población estudiada, es el predominio de las mujeres (60%); de más de setenta y cinco años (35%), casados (45%); no saben leer ni escribir (48%), y con un ingreso familiar de a tres salarios mínimos (83%). Como la práctica de la autodeterminación; 19% habitualmente come grasa, 18% hacen uso de la sal diaria, el 78% se alimenta de pasta, el 45% endulzar los alimentos con azúcar, el 78% son sedentarios, el 8% se utiliza para beber ; 19% son fumadores, 26% reportó dolor en el pecho como la principal queja, el 75% solicita asistencia hospitalaria poco después de la aparición de los signos y síntomas, y el 67% de los encuestados son conscientes de cualquier factor de riesgo asociado con el desarrollo de enfermedades cardiovasculares. De ello se deduce que la amenaza real o potencial de las enfermedades cardiovasculares tiene un impacto significativo en la vida de las personas, lo que justifica la necesidad y estimular la práctica de la autoevaluación a través de la adopción de la educación de pacientes y familiares. Desde esta perspectiva, se hace hincapié en la importancia de una práctica multidisciplinaria con las competencias cognitivas, técnicas e interpersonales, ganando la atención de las necesidades de sí mismo.

Palavras- clave: enfermedades cardiovasculares, autocuidado, servicios médicos de urgência.

#### DOENÇAS CARDIOVASCULARES: POSSIBILIDADES DE APLICAÇÃO DO AUTOCUIDADO.

Trata-se de um estudo exploratório descritivo, quantitativo, cujos objetivos são: Caracterizar a população vítima de acidentes cardiovasculares atendida em um serviço de Pronto Socorro; Identificar fatores de riscos; e, Formar banco de dados sobre doenças cardiovasculares. A população estudada constou de noventa e dois pacientes atendidos no mês de janeiro de 2007, em um hospital público, de grande porte, referência para urgências e trauma, na cidade de Natal/RN. A coleta de dados ocorreu através da realização de entrevistas estruturadas, nos turnos matutino e vespertino, com duração média de dez minutos, orientadas por um instrumento pré-estabelecido. Na população pesquisada, constatou-se a predominância do sexo feminino (60%); faixa etária acima de setenta e cinco anos (35%); casados (45%); não alfabetizados (48%); e, com renda familiar de um a três salários mínimos (83%). Quanto à prática para o autocuidado; 19% ingere gordura rotineiramente; 18% faz uso de sal diariamente; 78% alimenta-se de massas; 45% adoça alimentos com o açúcar; 78% é sedentário; 8% utiliza-se de bebida alcoólicas; 19% é tabagista; 26% referiu dor torácica como principal queixa; 75% procurou assistência hospitalar logo após o aparecimento dos sinais e sintomas; e, 67% dos pesquisados têm conhecimento sobre algum fator de risco associado ao desenvolvimento de doenças cardiovasculares. Conclui-se que a ameaça real ou potencial de uma doença cardiovascular tem impacto significativo na vida das pessoas, o que justifica a necessidade e o estímulo à prática do autocuidado mediante a adoção de medidas educativas dos pacientes e familiares. Nesta perspectiva, ressalta-se importância de uma prática multiprofissional com habilidades cognitivas, técnicas e interpessoais, na conquista do atendimento das necessidades de autocuidado.

Palavras chave: doenças cardiovasculares, autocuidado, serviços médicos de emergência.