Clinical validation of the nursing diagnosis "Risk of unstable blood pressure (00267)" in hypertensive outpatient treatment

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Introduction

Non-adherence to the antyhypertensive drug treatment is considered one of the main problems of persons with hypertension[1].

Objective

To relate the risk fator "Inconsistency with Medication Regimen" with the Nursing Diagnosis "Risk of Unstable Blood Pressure (00267)" in treated hypertensive people in a highly complex outpatient clinic.

Methods

Secondary analysis of data from the observational, exploratory study.

- Were included: Hypertensive patients; aged ≥ 18 years; followed up at the outpatient clinica at least 6 months, in the city of São Paulo, SP, Brazil.

Were excluded: pregnance and those with cognitive impairment.

• Morisky Eight-Item Therapeutic Adherence Scale (MMAS-8)[2] was used to assess the risk of "Inconsistency with Medication Regimen".

• Three blood pressure (BP) measurements were taken and BP control was considered for values <140 and/or <90 mmHg.

- Sociodemographic data and life habits were evaluated.

• Statistical analysis was performed for values of $p < 0.05$. The study was approved by the Research Ethics Committees (2,831,454 and 3,003,912)

Results

Were included 253 hypertensive patients : 61.7% women; 65(13.3) years; 63.2% white; 52.8% married; 44.3% had completed high school; 56.1% were smokers, 40% using alcohol beverage, 43.1% obese, and 3.7(1.9) number of antihypertensive drugs. Adherence to antihypertensive reported by hypertensive patients, was high (82.2%) but only 69.2% had their blood pressure under control.

Table 1: Analysis of the specificity and sensitivity of the Morisky test in relation to the control of hypertensive blood pressure.

Hypertensive patients	MMAS-8 <7.5	MMAS-8>7.5	Class accuracy	Predictive values
BP controlled	29	146	16.57%	64.44%
BP not controlled	16	62	79.49%	29,81%

Accuracy: 36.0; Cohen Kappa: -0.027

The concordance of the instrument presented a sensitivity of 79.5% and a specificity of 16.5%. The accuracy was merely 36% and the Cohen's Kappa score was -0.027.

Conclusion

The risk factor "Inconsistency with the Medication Regimen", was not predictive of the Nursing Diagnosis "Risk of Unstable Blood Pressure"[3]. Probably due to the fact that MMAS-8 assesses adherence through self-report, which is an indirect method of assessing adherence to antihypertensive treatment.

The study contributes to nursing care for hypertensive patients and the use of taxonomies, which enable the dissemination and comparison of nursing practice in a universal language.

References

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