Introduction

The Failure to include the treatment regimen in daily life is one of the defining characteristics of the Nursing Diagnosis (ND) Ineffective Self-Management of Health (00276), being the main responsible for the lack of blood pressure control in hypertensive patients. The identification of the ND can bring subsidies for nursing care to hypertensive patients and prevent the occurrence of hypertensive crisis.

Objective

To relate the Nursing Diagnose (ND) Ineffective Health Self-Management (00276) with hospital recurrence after attending a hypertensive crisis.

Methods

Performed at the Emergency Unit of the Instituto do Coração of HCFMUSP. Were included ≥ 18 years, SBP ≥ 180 mmHg and/or DBP ≥ 120 mmHg and having telephone contact. After 12 months of the hypertensive crisis, a telephone interview was conducted to investigate hospital recurrence and to assess the defining characteristic "Failure to include the treatment regimen in daily life" of the ND "Ineffective Health Self-Management" by means of the four-item Morisky-Green Medication Adherence Scale (MMAS-4).

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Nursing diagnosis Ineffective Health Self-Management (00276) as a predictor of recurrence in patients after a hypertensive crisis

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Results

246 patients were included, most of them women (59.9%), 68.6 (11.9) years old, white ethnicity (82.1%), married (51.6%), retired (57.6%), 9.6(4.6) years of schooling, monthly income R\$2838.8(3673.4). 62.2% of patients had recurrence and 37.4% were non-adherent according to MMAS-4.

Table 1: Logistic Regression Model of the four-item Morisky-Green Medication Adherence Scale (MMAS-4), monthly income, and the relapse within 12 months of hypertensive crisis.

Morisky-Green Four-item Morisky-Green Medication Adherence Scale (MMAS-4)	Recurrence by 12 months	
	Odds ratio	P value
1. Do you ever forget to take your medicine?		
Yes	0.791	0,538
2. Are you careless at times about taking your medicine?		
Yes	0.646	0.455
3. When you feel better do you sometimes stop taking your medicine?		
Yes	2.858	0.046
4. Sometimes if you feel worse when you take the medicine, do you stop taking it?		
Yes	1.252	0.694
Monthly income	0.909	0.051

There is a 2.85 times greater chance of return for patients who answered yes to the third question on the MMAS-4 (Table 1), and for every \$1000 more in income, the chance of relapse decreases by 9%.

Conclusion

The defining characteristic, "Failure to include the treatment regimen in daily life" assessed by the MMAS-4, showed a prediction with relapse through the third question of the scale. The association of relapse with lower monthly income corroborates the fragility of the sample studied, and economically disadvantaged individuals are part of "Populations at Risk" for the ND Ineffective self-management of health.

References

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