

The role of nurses in the home management of PAH

Forum on Pulmonary Hypertension

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As PAH five-year survival rates are increasing and have reached nearly 60% in patients with PAH and 54% in other subtypes¹ could we finally consider patients with PAH as **chronic**?

	PAH
Patients, n	685
Survival (%)	
At 1 year	88.2
At 3 years	72.2
At 5 years	59.4



In this new scenario the role of home management becomes more relevant as nurses are best placed to coordinate care through patients illness trajectory¹



Education
Advices on disease state
Treatments management
Side effects management
Personalised goals



But what experi of patier

Original Article





Safety and feasibility audit of a homebased drug-transitioning approach for patients with pulmonary arterial hypertension: an observational study European Journal of Cardiovascular Nursing I-7

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A home-based strategy allows changing ERA medications in patients with PAH to be achieved safely and effectively with efficient use of nursing resources.

Coghlan, BE Schreiber and

Implications for practice

- Home-based transitioning of pulmonary arterial hypertension medication is feasible.
- The practice avoids unnecessary hospital visits.
- Patients remained clinically stable and the transition was well tolerated.
- The practice promotes efficient use of nursing resources.



Monaldi Arch Chest Dis 2012: 78: 205-209

ORIGINAL ARTICLE

Multiprofessional and Intrahospital Experience for Diagnosis and Treatment of Pulmonary Arterial Hypertension

Esperienza multiprofessionale intraospedaliera nella diagnosi e nel trattamento dell'ipertensione polmonare

Michele Correale¹, Deodata Montrone¹, Donato Lacedonia², Riccardo leva¹, Romano Bucci³, Addolorata Corrado⁴, Francesco Paolo Cantatore⁴, Carmen Adriana Greco¹, Morena Concilio¹, Gaetano Serviddio⁵, Maria Pia Foschino Barbaro², Matteo Di Biase¹, Natale Daniele Brunetti¹

The presence of dedicated nursing staff, for the telephone follow-up or for the preparation and execution of the test cardiopulmonary, spirometry or 6MWT, has allowed to improve the care of these patients.

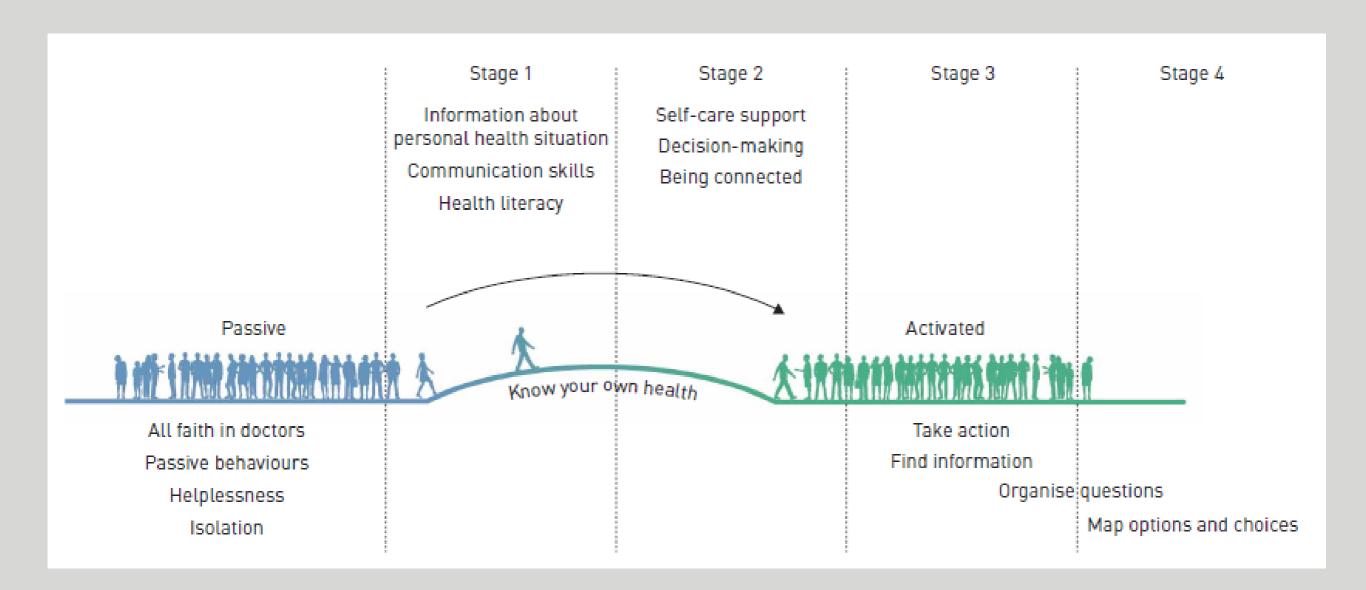


What do telephone follow-ups include?



Are the solution?





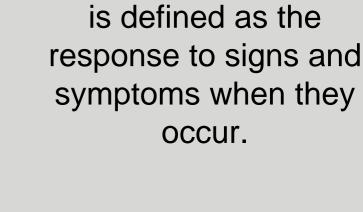


Self-care monitoring

refers to the process of observing oneself for changes in signs and symptoms.

Self-care maintenance

is defined as those behaviors used to maintain physical and emotional stability.



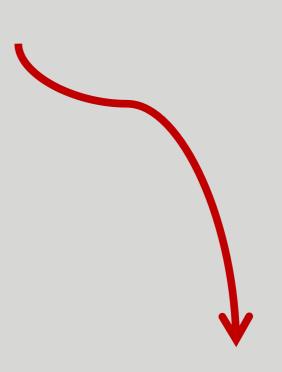
Self-care management



Self-care Monitoring



Because of the vast geographical distribution of patients and increasing numbers of referrals to PAH specialized centres, they cannot provide all of the support that each patient needs after diagnosis.



Therefore, developing self-care is important as many patients live a long distance from the nearest centre and are unable to attend for advice.



Some examples about patients' treatments

Prostanoids are administered either as intravenous or subcutaneous infusions or by using specialist nebulisers. Nurses could provide education and train patients to the correct use of medications

Central venous catheter patency and maintenance should be guarantee by expert nurses

Patients adherence to treatments is essential to improve outcomes.

Nurses could promote and monitor home treatment maintenance

Response to therapy needs to be assessed regularly, as dosages will often need to be adjusted or drugs will need to be used in combination to achieve the best effect.



Some examples about patients' maintenance of daily-life

Exercise training promotion is essential to maintain a good physical level. Nurse could promote physical activity, assess patients' endurance and support patients to continue exercising

Referral of female patients to associated staff offering gynaecology and contraception advice.

Be part of patients' advocacy by referring to social services and supporting the access to available financial benefits



Some examples about self-monitoring

All of the classes of PAH-specific drugs require patients to be monitored closely for adverse events, especially if the drug needs titration or is administered in combination regimens. Nurses could help patients to early recognise and manage such adverse events.

Tools such as patient-held records could help monitor the day-to-day management of PAH and report correctly symptoms to healthcare providers

Patients take responsibility for monitoring their own healthcare needs on a daily basis and seek appropriate help when necessary.



Expert PAH nurses could be the perfect link with clinical nurse specialists to continue providing a useful point of contact for local healthcare providers who have contact with patients, including community matrons, cardiac nurses, respiratory nurses and practice nurses.

Nursing home management is essential to provide continuity and consistency for patients. PAH centres have a crucial role to provide good communication between hospital and community settings.





Literature about home
management of PAH patients is
scarce and no evidence about
nursing interventions to improve
self-care in this population are
present

As PAH could be considered as a chronic illness, new approaches to deliver home care to PAH are crucial to fill the gap between hospital and community care

The self-care of chronic illness middle range theory could be applied to this patients to measure and improve their daily self-care behaviours



Future studies are necessary to evaluate the role of nurses in the home management of PAH patients. A multidisciplinary approach is essential to improve patients' outcomes



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