

# Providing and receiving nursing care during hemodialysis\*

Cuidar e o ser cuidado na hemodiálise

Atención y tener cuidado en tratamiento diálisis renal

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### **ABSTRACT**

**Objective:** To describe the representation of nursing care for nurses and for individuals undergoing hemodialysis. **Methods:** This qualitative study was conducted in the Minas Gerais Nephrology Center in Belo Horizonte with 6 associate degree nurses and 6 individuals undergoing hemodialysis. Data were collected through focused interviews and analyzed through content analysis of group discussions. **Results:** Nursing care among the nurses was the establishment of therapeutic relationships and trust, and technical professional care. For the individuals undergoing hemodialysis, receiving nursing care was the establishment of interpersonal relationships, adherence to hemodialysis treatments, and prolonging their life. **Conclusion:** The representation of nursing care goes beyond technical professional care to include therapeutic and interpersonal relationships.

Keywords: Nursing care; Renal insufficiency, chronic; Renal dialysis/nursing

### **RESUMO**

Objetivo: Identificar a representação do cuidar na hemodiálise para a equipe de enfermagem e para o cliente em tratamento dialítico. Métodos: Pesquisa qualitativa realizada no Centro Nefrológico de Minas Gerais, em Belo Horizonte, com seis técnicos de enfermagem e 12 clientes em tratamento hemodialítico. Os dados foram obtidos através de entrevista com questão norteadora e analisados sob o referencial metodológico do Discurso do Sujeito Coletivo. Resultados: Encontramos a idéia do cuidar para equipe de enfermagem como estabelecimento de relação terapêutica, de confiança e técnica. Para o cliente, ser cuidado significa estabelecer relacionamento interpessoal, aderir ao tratamento e ter sua vida prolongada. Conclusão: As representações encontradas para o cuidar e o cuidado revelaram conceitos da relação terapêutica/interpessoal que transcendem a dimensão técnica.

Descritores: Cuidados de enfermagem; Insuficiência renal crônica; Diálise renal/enfermagem

### **RESUMEN**

Objetivo: Identificar la representación del cuidar en la hemodiálisis para el equipo de enfermería y para el cliente en tratamiento de hemodiálisis. Métodos: Investigación cualitativa realizada en el Centro Nefrológico de Minas Gerais, en Belo Horizonte, con seis técnicos de enfermería y 12 clientes en tratamiento de hemodiálisis. Los datos fueron obtenidos a través de una entrevista con una pregunta norteadora y analizados bajo el referencial metodológico del Discurso del Sujeto Colectivo. Resultados: Encontramos que la idea del cuidar para el equipo de enfermería es el establecimiento de la relación terapéutica, de confianza y técnica. Para el cliente, ser cuidado significa establecer relación interpersonal, adherirse al tratamiento y tener una vida prolongada. Conclusión: Las representaciones encontradas para el cuidar y el cuidado revelaron conceptos de la relación terapéutica/interpersonal que trascienden la dimensión técnica.

Descriptores: Atención de enfermería; Insuficiencia renal crónica; Diálisis renal/enfermería

<sup>\*</sup> Study realized at Nephrological Center of Minas Gerais - CENEMGE - Belo Horizonte (MG), Brazil.

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# **INTRODUCTION**

The chronic renal failure, due to pathophysiological, psychological and socioeconomic, represents a public health problem<sup>(1)</sup>. It is characterized by the loss of renal function irreversible demanding substitute treatment as only condition of life maintenance<sup>(2)</sup>. Clients subject to renal dialysis, in general, develop depression, non-cooperative behave, sexual dysfunction, difficulties related to occupation and rehabilitation. By this way the disease interfere in life quality compromising physical and social well-being of this clients<sup>(3)</sup>.

The hemodialysis is the most used dialysis method to remove toxic nitrogen substances from the blood and water excess. It requires intensive care due to the possibility of clinic intercurrences<sup>(4)</sup>. By this way it is important to think about the nursing care with chronic patients, particularly as regards to the quality of the assistance, resolvability of the service/treatment and education in health<sup>(2)</sup>.

Taking care involves interactive actions that must be built on the ethical dimension between the caregiver and the client<sup>(5)</sup>. Particularly hemodialysis requires specialized nursing care, but it is not reduced to technical care. Therefore It is evident the need of nursing professionals to be capable and aware of its importance to the maintenance of life quality of the clients<sup>(2)</sup>. From this preamble this research had as objective to identify the representation of taking care in the hemodialysis for the nursing team and for the client in hemodialysis treatment.

## **METHODS**

We have done a qualitative research with professionals from the nursing team and clients of the nephrological center of Minas Gerais (CENEMGE), located in Belo Horizonte. CENENGE is specialized in substitutive kidney therapy treatment in the genre of hemodialysis and peritoneal dialysis. The sample was constituted by six nursing technicians who worked for more than two years and twelve clients who were in hemodialysis treatment for more the two years.

For the data collection it was used a semi-structure interview with a guiding question: "What is to take care?" for the professionals; and "What is to be cared?" for the clients. Respecting the Resolution n° 196/96 from the National Health Council, we had approved of the research project in the Research Ethics Committee of PUC Minas, the authorization of the director of CENEMGE and the consent of the interviewed signing the Consent Form. The data was analyzed by the methodological reference of the Collective Subject Speech that uses methodological pictures to arrange and chart the data<sup>(6)</sup>. The speech produced from the interview with the nursing technicians

and clients were identified with names of flowers and birds, respectively.

#### RESULTS

We found as to take care to the professionals from the nursing team representations of therapy relationship, trust relationship and technical relationship:

Taking care as therapy relationship: "Taking care is to respect the different type of the clients. Giving attention respect and tenderness. Being aware, sitting, saying a word, to the needs and the emotional health of the client".

Taking care as trust relationship: "Taking care is to be partner beyond anything, from the moment he trusts he knows somebody is taking care of him. The person at the hemodialysis always fears that something happens to the machine and doesn't sleep, but when they trust they calm down and sleep".

- Taking care as technical relationship: "Taking care is to do everything to be a quiet dialysis, like the medicines on time, to weight, to check the temperature, aseptic punction, to clean the material and test it".

We found interpersonal relationship, joining the treatment and extension of life as being cared to the clients.

- Being cared as interpersonal relationship: "Being cared related to health, social, feelings and well-being through the entire clinic: doctors, other patients (my partners), nurses, workers in general.
- Being cared as joining the treatment: "Being well cared is to recover better and pass well in the hemodialysis, it is having control with the eating, personal hygiene and from the arm and medication. It is eating properly according to the diet, taking medicines on time, follow the schedule and aware with the weight".
- Being cared as extension of life: "It is having my life extended, because making hemodialysis is living".

# **DISCUSSION**

The idea of taking care as therapy relationship means assist to the needs with sensitivity and promptness through actions that promote the well-being, this effect being cared relates physical and emotional integrity<sup>(7)</sup>. For this the nursing must develop observation skills and dialogues, order to situate the problems experienced by the client inside their cultural and social context<sup>(8)</sup>.

The concern about other's well being results in trustful feelings. Taking care implies in a trustful relationship because the client gives its self that is fragile, on the caregiver hands<sup>(9)</sup>. And the caregiver through an attentive presence enables to the client also to trust in the environment/treatment. In this study we found that taking care also refers to establish trust relationship. The care fitted to the client needs demand from the professional

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capability to understand the other's need. The recognition of the care needs, added to technical-scientific actions referred to physical, technical and emotional care constitute in requirements to the effectiveness of the process of taking care<sup>(9)</sup>.

In the exercise of nursing the technique content can be resized, because taking care can also allow the comfort of the client that is emotional fragile, softening the client anguish and fear, through the approach from the caregiver during the accomplishment of an technique<sup>(7)</sup>. For this, another meaning to the taking care found in nursing was the representation of technical relation.

We found the idea of being cared, for the patients in hemodialysis treatment, as to establish interpersonal relationship. Assuming that interpersonal relationship includes humanized care we understand the importance for the professionals to provide favorable conditions to the humanization of the care<sup>(9)</sup>.

The patient with chronic renal failure is submitted to changes in its daily activities, like diets, control of drinking liquids, medication use, threat to the self-image, that cause stress and conflict, stepping in the joining of the patient to the therapy. The client in hemodialysis treatment depends

on the technology and capable professionals, for this the machine represents the maintenance of the homeostasis physical<sup>(10)</sup>. Corroborating this ideas, we found the care as including to the treatment and extension of life.

#### CONCLUSION

We identified that taking care for professionals from the nursing team transcends the techniques content, traversing through the taking care as establish of therapy and trust relationship. For the clients in hemodialysis treatment, to be cared meant to establish an interpersonal relationship, joining the treatment and to have its life extended, being clear the importance of each function in the triad, client-professional-machine to the success of the treatment.

Even with the complexity and specificity that involves the process of hemodialysis and demand specify technical and scientific knowledge, permeated by constant technological influences, the nursing team showed assistance that goes beyond than making (execute procedures and techniques), operating in the perspective of humanized care, aware with the "being cared".

#### REFERENCES

- Rodrigues MCS. A atuação do enfermeiro no cuidado ao portador de insuficiência renal crônica no contexto biotecnológico da hemodiálise. Nursing (São Paulo). 2005;8(82):135-42.
- Wilhelm D, Caetano CD. O cotidiano do enfermeiro em nefrologia: aspectos relevantes para o cuidado [resumo]. In: 56° Congresso Brasileiro de Enfermagem; 2004 Out 24-29. Anais. Gramado: ABEn-Nacional; 2005 [citado 2008 Abr 25]. Disponível em: http://bstorm.com.br/enfermagem/ index-p2.php?cod=61644&popup=1
- Martins MRI, Cesarino CB. Qualidade de vida de pessoas com insuficiência renal crônica em tratamento hemodialítico. Rev Latinoam Enferm. 2005;13(5):670-6.
- Maseo IK, Silva OM, Mariga TI. Percepções do cliente insuficiente renal crônico em relação ao momento da hemodiálise. RECENF Rev Técno-Cient Enferm. 2003; 1(6):414-20.
- Waldow VR. Cuidado humano: o resgate necessário. 3a. ed.

- Porto Alegre: Editora Sagra Luzzatto; 2001. Lefèvre F, Lefèvre AMC, Teixeira JJV. O discurso do sujeito coletivo: uma nova abordagem metodológica em pesquisa qualitativa. Caxias do Sul: EDUCS; 2000.
- Baggio MA. O significado de cuidado para profissionais da equipe de enfermagem. Rev Eletrônica Enferm. 2006;8(1):9-16.
- Dyniewicz AM, Zanella E, Kobus LSG. Narrativa de uma cliente com insuficiência renal crônica: a história oral como estratégia de pesquisa. Rev Eletrônica Enferm. 2004;6(2):199-
- Collet N, Rozendo CA. Humanização e trabalho na enfermagem. Rev Bras Enferm. 2003;56(2):189-92.
- Campos CIG, Turato ER. O tratamento de hemodiálise sob a ótica do doente renal: vivências e significados. In: Anais do 56° Congresso Brasileiro de Enfermagem; 2004 Out 24-29; Gramado: ABEn-Nacional; 2005 [citado 2008 Abr 25]. Disponível em: http://bstorm.com.br/enfermagem