In Brazil, the prevalence of Heart failure (HF) of chagasic etiology is estimated at 4.2% in the population, with the number of people infected with T. cruzi ranging from 1.9 million to 4.6 million people and in many cases the only treatment is heart transplantation (HTx). In this context, it is essential that nurses are knowledgeable about these patients’ characteristics, regarding their needs, capabilities, limitations and difficulties, in order to propose a personalized health education plan. Orem’s Theory considers the importance of self-care in the therapeutic process. Patients’ knowledge of the disease is an important prerequisite for an individual to implement behavioral changes and perform effective self-care in controlling the disease during the HTx phases and post-HTx recovery.

To describe the nursing care to a patient undergoing HTx.

A case report described according to Care guidelines.

Cardiology hospital in São Paulo (SP), Brazil.

Planning of nursing care for a patient with Chagas' cardiomyopathy before and after heart transplantation: a case report

Larissa Moreira Monte, Ana Paula da Conceição, Sergio Henrique Simonetti Camila Takão Lopes

- Orem’s Self-Care Theory
- Assessment: physical examination and anamnesis:
  - cognitive functioning (Mini Mental State Examination)
  - depressive symptoms (Cardiac Depression Scale)
  - coping mode (Problem Coping Scale)
  - knowledge about HF (Disease Knowledge Questionnaire for Patients with Heart Failure)
  - self-care (Self Care of Heart Failure Index)
- Priority NANDA-I diagnosis, NOC outcomes and NIC interventions.

- Deficient knowledge
- Knowledge: Heart Failure Management
- Teaching: Disease Process
  - educational videos
  - game about medications
  - instructional folder

Results

<table>
<thead>
<tr>
<th>Assessment instrument</th>
<th>Pre-intervention outcome</th>
<th>Post-intervention outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiac Depression Scale</td>
<td>60 points (minimum degree of depression symptoms)</td>
<td>35 points (no symptoms of depression)</td>
</tr>
<tr>
<td>Problem Coping Scale</td>
<td>“problem-focused” (3 points)</td>
<td>“focused on religious practices” (1.3 points)</td>
</tr>
<tr>
<td>Disease Knowledge Questionnaire for Patients with Heart Failure</td>
<td>34 points (acceptable level of knowledge)</td>
<td>51 points (great level of knowledge)</td>
</tr>
<tr>
<td>Self Care of Heart Failure Index</td>
<td>27 points (inadequate self-care)</td>
<td>47 points (adequate self-care)</td>
</tr>
</tbody>
</table>

Conclusion

The nursing assessment allowed for the identification of the patients’ risks and vulnerabilities and the definition of the priority ND. A personalized care plan was implemented, respecting patient's autonomy and adequacy of self-care in the HTx process. The health interventions contributed to the reduction of the self-care deficit.

References

1. Annual Review of Pathology: Mechanisms of Disease 2019 14,1, 421-447