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SELF-CARE OF PATIENTS WITH VALVULAR HEART DISEASE AND OREM EDUCATION SUPPORT SYSTEM

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ABSTRACT

Objective: To present a reflection of Orem's self-care deficit theory, centered on the support-education system for valvopathic patients using oral anticoagulants. This is a reflexive study about Orem's self-care theory in its support-education system, applied to patients with valvulopathies, considering them to be self-care, through nurses' orientation, to develop maintenance skills health and wellness. Results: The applicability of this theoretical framework is based on the clinical practice of nursing to these patients, which should be directed to the individual's learning for self-care, with the purpose of promoting adherence to treatment, Health. Conclusion: It is believed that self-care will make these individuals active subjects and agents of their self-care, requiring educational support to take responsibility for their treatment, with a view to minimizing and reducing complications.

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INTRODUCTION

The theoretical framework of Nursing science is evidenced in a dynamic process that arises from clinical practice, and reproduces itself in research, especially through the analysis and development of concepts and theories (Bousoo et al., 2011). The theories underlying the clinical nursing care and give meaning to scientific knowledge of nursing, differentiating it from other professions, and (Schaurich, 2010) research demonstrates the need for its development as a science and profession. Thus, the theory is a means to interpret, criticize and unify established laws, with order adapt them to its formulation and to guide to discover generalizations (Wills, 2009a). Theories are as important for professional care as for technique, communication and interaction, since they serve as a guide to the professional

context of the nurse, and its usefulness is seen through nursing care, teaching and research (Leopardi, 2014). The use of theory in nurses' clinical practice is above all the way to systematize the care actions developed by nursing, with scientific support. The use of a theoretical framework directs scientific knowledge, and leads to professional autonomy in decision making to guide clinical practice. Theories have been described as a set of interpretative assumptions, principles or propositions that contribute to explain or guide an action.⁵ In this sense, the theories in nursing make up the foundation for planning a clinical care, which must be supported by methodological rigor, favoring reflection to clinical judgment and critical sense of the professional nurse, leading to behavioral changes in their care practice. Among the various nursing theories, Orem's theoretical model, with the theory of

the self-care deficit, was glimpsed in his support-education system, which brings in his mind an educational proposal. Thus, the focus of this study is valvopathic patients who need to develop self-care, through skills to promote their health, in order to be co-responsible for their care, learning to live with their illness, modifying and maintaining healthy habits, stimulating your self-confidence with a sense of belonging, before his illness (Queiroz, 2012). And Orem's theoretical model can direct the actions of nurses to self-care of valvopathic patients and responds to their needs for self-care deficiency in this type of illness, in which these patients need to develop self-care, and become co-responsible and active subject in Their self-care providing the rehabilitation of their health, through behavioral changes to improve their quality of life. Orem's theory has been widely used in guiding clinical practice, teaching and management. In clinical practice, Orem's theory is embedded in the development of educational processes in which nurses can use educational methods such as manuals, booklets, scales to provide the person with valve disease, self-confidence to perform self-care actions for their benefit.

The contribution of Orem's theory in nursing care to patients with heart problems, demonstrates the nursing promotion of self-care, self-knowledge and self-government, constituting an area capable of offering a differential in the adaptation to new living conditions of these patients as they are punctuated by some studies (Lima, 2012; Lopes et al., 2006; Custódio et al., 2012). Valvopathies for being part of the group of cardiopathies considered to be chronic diseases that present symptoms that accompany these individuals throughout their lives and require clinical and / or surgical treatment and when they need surgical treatment accompany the need for anticoagulation, which Requires specific care regarding the risks that this systemic coagulation can bring.

In this way, they will use a drug therapy with oral anticoagulants for a certain time, and those who perform surgery and implant metal prosthesis will do so indefinitely. In this sense, the theory of self-care deficit appears applicable to this type of cardiac disease, who need to adhere to the treatment to prevent complications and maintain their health and quality of life. This reflexive essay is based on Orem's self-care deficit theory, with a focus on the support-education system, represented by valvopathic patients, who have self-care needs and have the capacity to perform self-care actions for their well-being. Therefore, Orem's support-education system contributes to this reflection, as it demonstrates the need for self-care felt by valvopaths and recognizes that the nurse, when interacting with the patient, identifies their demands for self-care and plans educational activities based on the needs found, And collaborate so that these individuals obtain through these nursing orientations a better quality of life. In this sense, this study focusing on the theory of Orem's support-education nursing systems can be produced for people who constitute a care unit, and for groups whose members have demands for care (Orem, 1995). The use of this referent for the study population is justified, since valvopathic patients need attention with regard to drug treatment and prevention of complications. For the effectiveness of self-care, their actions will be related to their ability to engage in self-care. The objective of this study is to present a reflection of Orem's self-care deficit theory, centered on the support-education system for valvopathic patients.

The Self-Care Theory of Orem

The self-care theory proposed by Orem is one of the most cited in nursing journals, since it contains significant elements for nursing care (Orem, 1995). The first time Orem mentioned self-care was in 1958, when he reflected on the individual's need for nursing care, and how they could be helped (Orem, 1995). In the first edition of his book, the focus was on the individual. In the second, it was extended to multi-person units (family, groups and communities); Already in the third edition, presented the General Theory of Nursing, where it is constituted by three interconnected theories: Self-Care Theory, Theory of Self-Care Deficiencies and Theory of Nursing Systems. And the fourth edition, entitled *Nursing Concepts of Practice* brought an understanding of the characteristics of nursing practice with limitations (Orem, 1991). According to the author, two basic assumptions about self-care were cited in 1965: "Self-care is a behavior, an activity learned through interpersonal and communication relationships," and "the person has the right and the responsibility to take care of himself To maintain life and health (Orem, 1991)."

For the Theoretical, self-care is defined as the ability that the individual performs for his or her own benefit in order to maintain life, health, and well-being. Self-care education is a dynamic process that depends on the patient's will and his perception about his / her clinical condition. Without your commitment, taking responsibility for your care, self-care does not happen effectively (Orem, 1995). Self-care is part of the planning of nurses' actions, but some factors influence this educational process, which are perceived by patients as beliefs, habits, sociocultural values and the environment that in a positive or negative way affect the development of self-care.¹² According to the theory, Orem recommends six central concepts and one peripheral. The centers are self-care action, competence for self-care, therapeutic demand for self-care, self-care deficit and the nursing system.

The peripheral concept is demonstrated by means of basic conditioning factors, such as age, sex, socio-cultural orientation, health and developmental state, and health system factors. The initial four refer to the person and nurse with their Self-care actions (Orem, 1991). In this way, the action of self-care portrays the individual's capacity to engage in self-care. And the therapeutic demand for self-care are the self-care actions to be performed by individuals. Thus, self-care actions have certain purposes to be achieved, termed universal self-care requirements common to all human beings. The one of development, that occurs when there is need of adaptation to the changes in the life of the person. And the health diversion, which happens when the individual, in a situation of illness needs to adapt to the health situation (Custódio, 2012). Orem suggests self-care requirements such as maintenance and sufficient air intake; Water and food; The provision of care with elimination and excretion; Maintaining balance between activity and rest; Between solitude and social interaction; Prevention of risks to life; Functioning and human well-being; The promotion of human functioning and development, in social groups, according to human potential, known human limitations and the desire to be normal (Orem, 1995). In general terms, nursing systems theory encompasses the deficit of self-care and this, in turn, contains the theory of self-care. Based on the theory of the self-care deficit, the patient is self-care deficient and can not develop self-care requiring the support of the nurse.

In this case, the nurse offers subsidies through educational actions to satisfy the deficits of self-care. The theory of self-care deficit can be understood as a valid example of nursing description as a science, aimed at the clinical practice of nurses and favorable to the application in patients with chronic diseases. This theory is the essence of Orem's General Theory, because in it the need for nursing care is felt (Vitor et al., 2010). In the context of valvopathies, the nurse identifies the demands of self-care deficits of these individuals and proposes educational actions to make them an agent of their self-care. These use the methods of help described by Orem by acting or doing for the other; Guide the other; Support the other (physically or psychologically); Provide an environment that promotes their development, and teach the other (Orem, 1995). The autonomy of patients to develop self-care is effectively demonstrated through nursing systems theory. These are grouped in a totally compensatory system, where the individual is incapable to take care of itself, and the nurse watches; The partially compensatory system, when the nurse and the individual participate mutually in the therapeutic actions of self-care; And the support-education system, when assistance is given in the form of guidance and teaching.

It is perceived, self-care as a fundamental attribute of nursing, but to exercise it, there is a need for a holistic view, with the purpose of identifying the deficit of self-care and, drawing nursing actions that can meet the needs and People's limitations. The main self-care actions to be applied by nursing in the support-education system are mainly focused on educational actions. Nursing through the teaching of self-care has the possibility of providing healthier conditions and greater autonomy to the individual (Vitor et al., 2010). The nurse as educator empowers the individual's capacity for self-care, building an interpersonal relationship, in which one learns with the other and the benefit becomes mutual. In this sense, the autonomy of the subject inserted in his / her care process is promoted, under the nurse's eye.

The support-education system and the self-care of patients with valvopathies

In valvular disease, self-care deficits are identified by the nurse, and through educational actions through guidelines, the limitations of valve patients are compensated for by engaging in self-care. Thus, once the person is under the guidance of the nurse, he is able to learn and perform the actions of therapeutic self-care (Orem, 1995). The contribution of Orem's self-care deficit theory to patients with heart valve problems occurs when these patients become able to manage their self-care, assuming a positive self-care posture, reducing or minimizing the problems arising from complications Valve disease.

However, valvopathic patients need nurses to carry out educational strategies that meet their real needs, effectively and promote self-care practices in the care of their health. On the other hand, for self-care guidelines proposed in Orem's theory, it is necessary that valvopas patients participate in their care process, practicing self-care to prevent complications and promote health (Menezes et al., 2015). Self-care in these patients with heart valve disease is aimed at adherence to diet, oral anticoagulant drug therapy, antibiotic therapy prevention in dental treatments and attention to conditioning factors, such as age, sex, schooling, socioeconomic factors that interfere directly Achieve these goals.

In this aspect, factors related to the therapeutic demand such as the daily use of medications in the case of valvopathies, oral anticoagulants (ACO), adverse effects of ACO through drug interactions and the periodic conduction of blood tests may lead to treatment withdrawal. Thus, the nurse acting as an educator in this type of cardiac disease, directs the adherence to therapeutics that affects directly or indirectly the quality of life of valvopaths, when the therapeutic index of blood coagulation is outside the acceptable therapeutic range. The age, schooling, confidence in the nurse practitioner's guidelines, the acceptance of valvular disease, the quantity of medications or measures to be taken in response to the complications resulting from the disease, the side effects of oral anticoagulants, the difficulties of access to Health services, economic factors, social, beyond the level of knowledge and the ability to understand about their disease and treatment, as aggravating factors to prevent adherence to treatment.

Thus, based on self-care through a clinical nursing care, and guided by the support-education system, it gives subsidies that guide the nursing professional in the provision of nursing care aiming at improving the quality of care (Orem, 1995). In this sense, the support-education system allows valvopaths to be agents capable of promoting their self-care, being necessary that the nurse teach and supervise the development of the learning, as well as their abilities for behavioral changes, through adherence to treatment for improvement Of your health. Therefore, nursing care in Orem's vision, focused on the support-education system, evidenced by the guidelines received, results in the decision-making capacity for self-care. Thus, the capacity for judgment of self-care actions is dependent on the learning that is passed on by the nurse, to these valvopathic patients, and that will influence the change of lifestyle, facilitating adherence to their treatment.

FINAL CONSIDERATIONS

Orem's Self-Care Deficit theory in its supportive-education nursing system has applicability in heart valve diseases, because it is known that valvopaths have the potential to develop their self-care, and it is necessary to motivate and educate them to Engage in your treatment. The relationship of responsibility and interdependence that these patients valvopatas develop through support, guidance provided by the nurse, allied to a favorable environment, facilitates the development of self-care. In this perspective, the self-care actions developed by these valvopathic patients, respond to their demands for self-care, and promote self-knowledge, self-control and participation in their care. Thus, the support-education system is relevant and can be applied to this type of heart valve disease that requires educational actions and other situations of illness, where the demands of self-care are deficient or absent and , Therefore, require nursing care.

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