540

Cipriano M A¹, Cardoso M V¹, Regatas ; R P R¹, Santos T¹, Silva L F¹, Oliveira R R¹

1. Universidade Federal do Ceará

CLEAN INTERMITTENT CATHETERIZATION IN CHILDREN WITH NEUROGENIC LOWER URINARY TRACT DYSFUNCTION: A HUMANISTIC VISION

Hypothesis / aims of study

Clean Intermittent Catheterization (CIC) is an effective and safe technique in treatment and prevention of urinary morbidity in children with neurogenic lower urinary tract dysfunction [1].

The aim of this study was to understand the experience of caregiver / parent before performing (CIC) in children with neurogenic bladder dysfunction based on a humanistic view.

Study design, materials and methods

A descriptive and qualitative study was conducted at the outpatient clinic of a tertiary children's public hospital in Brazil . A total of 15 caregivers of children with lower urinary tract dysfunction, selected by intentional non-probabilistic sample by data saturation in July 2013, were recruited. It was used the Humanistic Nursing Theory as a methodological support, following the phases of phenomenological nursing [2]: preparation for the coming-to-know; nurse intuitively knows the other; nurse knows scientifically another; synthesizes nurse so complement the known realities and internal succession nurse from many for a single paradoxical. To collect data on previously prepared by reading about self - knowledge, insight, making the location of the family study and interaction with caregivers. Used as instrument for data collection through participant observation and semi-structured interview recorded in recorder. This study was approved by the Ethics Committee

Results

The age of caregivers ranged from 18 to 43 years old, literate, and low household income. It was observed that subjects had silenced embargoed speeches expressing emotions. 1: To analyze extensive reading, analytical followed for the synthesis and comparison of known realities of which the following issues emerged reading were performed. Reactions of caregivers of children with lower urinary tract dysfunction to start CIC: the call for help. 2: the uniqueness of the nurse dialogue with the caregiver and child in CIC 3: Reactions of caregivers and children to perform CIC in child after instruction based on humanistic theory.

Interpretation of results

They seized the experiences reported by caregivers of children with neurogenic bladder dysfunction lower urinary tract dysfunction. This favored the understanding of situations related to the implementation and adherence to catheterization Main reactions evidenced by reports of caregivers were anxiety, fear of traumatizing, ignorance, guilt, worry, and shame the child to perform the procedure. It was also noted that the nonverbal communication of caregiver and child were expressed by crying. Upon completion of CIC verbal manifestations were propagated in the statements. Most caregivers expressed that they feel like crying, worried, sad, anguished, desperate, nervous, and generally describe the moment when your child is performing CIC as one of the worst situations experienced in care. Another complains related by caregivers were difficult to the acquisition of equipment necessary to perform CIC. Based on the assumptions of the humanistic theory it was observed reports of caregivers having better acceptance and adaptation over time with CIC. Hope and Faith also contributed to happen resilience.

Concluding message

When the host and support the meeting occurs relationship is established and the procedure takes place in a humane way with better acceptance of the procedure. However, the nurse being present and answering demand with care could be a valuable action. A team of health professionals should provide space for communication, empathy and respect for the family, otherwise, impactful way compromises the care process.

References

- 1. CHASE J, et al. The management of dysfunctional voiding in children: a report from the Standardisation Committee of the International Children's Continence Society. J Urol 2010;183(4):1296-302.
- 2. 2. PATERSON, J. E.; ZDERAD, L Humanistic nursing. 2nd ed. New York: National League for Nursing; 1988.

Disclosures

Funding: No funding Clinical Trial: No Subjects: HUMAN Ethics Committee: Ethics Committee of the local institution. Helsinki: Yes Informed Consent: Yes