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Nursing actions in the care of patients with wounds in primary health care

ABSTRACT | Objective: To describe the actions of nurses in the care of patients with wounds in primary health care. Method: Integrative review structured in six stages based on the search for freely accessible articles in the databases published over a 10-year period (2009-2019), based on established eligibility criteria and the level of evidence of the publications. Results: The studies included for analysis point out the role of nurses focused on guaranteeing physical space in accordance with health standards, in health education as an action to promote autonomy and self-care and in observing the social and cultural aspects of the user in the context of improvement of wound healing. Conclusions: It is understood as necessary to insert this professional as an active participant in the assistance for the development of supported actions and in the possibility of reducing the user's treatment time and the costs of assistance with the health system.

Keywords: Wounds and injuries; Primary health care; Nursing care; Nursing.

RESUMEN | Objetivo: Describir las acciones del enfermero en la atención de pacientes con heridas en la atención primaria de salud. Método: Revisión integradora estructurada en seis etapas a partir de la búsqueda de artículos de libre acceso en las bases de datos publicadas durante un período de 10 años (2009-2019), en base a los criterios de elegibilidad establecidos y al nivel de evidencia de las publicaciones. Resultados: Los estudios incluidos para análisis señalan el rol del enfermero enfocado en garantizar el espacio físico de acuerdo con los estándares de salud, en la educación para la salud como una acción para promover la autonomía y el autocuidado y en la observación de los aspectos sociales y culturales del usuario en el contexto de mejora de la cicatrización de heridas. Conclusiones: Se entiende necesario insertar a este profesional como participante activo en la asistencia para el desarrollo de acciones apoyadas y en la posibilidad de reducir el tiempo de tratamiento del usuario y los costos de asistencia con el sistema de salud.

Palabras claves: Heridas y lesiones; Primeros auxilios; Cuidado de enfermera; Enfermería.

RESUMO | Objetivo: Descrever as ações do enfermeiro no atendimento ao portador de feridas na atenção básica em saúde. Método: Revisão integrativa estruturada em seis etapas a partir da busca de artigos de livre acesso nas bases de dados publicados no intervalo de 10 anos (2009-2019), baseado em critérios de elegibilidade estabelecidos e no nível de evidência das publicações. Resultados: Os estudos incluídos para análise apontam a atuação do enfermeiro centrada na garantia de espaço físico em conformidade com as normas sanitárias, na educação em saúde como ação de promoção da autonomia e autocuidado e na observação dos aspectos sociais e culturais do usuário no contexto da melhoria da cicatrização das lesões. Conclusões: Entende-se como necessária a inserção deste profissional enquanto participante ativo da assistência para desenvolvimento de ações respaldadas e na possibilidade da redução do tempo de tratamento do usuário e dos custos da assistência junto ao sistema de saúde.

Palavras-chaves: Ferimentos e lesões; Atenção primária à saúde; Cuidados de enfermagem; Enfermagem.

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INTRODUCTION

In the field of public health, assistance to people with injuries is a frequent problem. Despite the growing demand in most health services in the country, records regarding the care of this clientele are scarce, as well as studies on the impact reproduced by these injuries. The service to clients with injuries requires special attention by health professionals, especially nurses, due to their technical skills for carrying out injury assessment and implementing treatment using the ideal dressing.⁽¹⁾

The management of the dressing room and the use of inputs in the treatment is another very important task

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that requires scientific knowledge for its practice. It is also worth mentioning the implementation of actions related to the promotion and education of health in the community, involving accessible technologies and resources that enable the screening, identification and early intervention with respect to skin lesions, defined through professional regulations associated with legal practice of nursing.⁽²⁾ These activities should aim at strengthening the relationship with the basic health unit team, knowledge for autonomy and promotion of self-care, as well as demystifying the cultural and social relationships that interfere in the context of wound care.⁽¹⁾

Studies and research on this theme that address the issue of wound care, mostly, reveal a concern with objectivity, adopting a curative perspective whose focus is the treatment of the wound with little emphasis on the educational issue aimed at the person with wounds and for their knowledge and experience in their treatment and prevention.⁽³⁾

The actions developed by nurses at this level of care must address the user in an integral and individualized way, being able to make possible, in addition to healing the injury, the clinical and social improvement of the same, through efficient procedures and optimization of care, ensuring the right of users to quality and equitable assistance. In the management and/or execution of care, educational and preventive practices, at the level of primary care, the nurse's work is strategic and indispensable, ensuring their insertion in teams and territories through the programmatic and legal frameworks of the Unified Health System. Health (SUS).⁽⁴⁾

It is understood that the scenario of primary health care has high relevance in the care provided by the nursing team to patients with injuries, since it is configured as the main gateway for



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the community to the assistance levels provided under the SUS. The fragility of specific public policies for patients with injuries that guide the practice of nursing professionals and the lack of studies that highlight this theme are placed as the background of the problematic plot of this study.⁽⁴⁾ This article aims to elucidate the actions of nurses in assisting the bearer of wounds in primary health care.

METHOD

This is an integrative literature review study that is characterized by incorporating information and ideas that enable the strengthening of evidence-based practice (EBP).⁽⁵⁾ For the development of the study, it was listed as a guiding question: "What are the actions developed by nurses in caring for people with wounds in primary health care?". From this, the steps related to the selection of materials were triggered, which made it possible to argue about this theme based on the protocol for building PRISMA review studies (Preferred Reporting items for Systematics Reviews and Meta-analyzes).

In this sense, the LILACS, MEDLINE and BDEF databases were identified as sites for searching through the use of the descriptors (DECS-BIREME): ferimentos e lesões/wounds and injuries/ Heridas y traumatismos; cuidados de enfermagem/Nursing care/Atención de enfermería; Atenção primária à saúde/ Primary health care/Atención primaria de Salud, linked from the Boolean AND connection.

Free access studies, published over a 10-year period (2009-2019), with full text and in Portuguese, English and Spanish, were considered as search criteria. Studies from specialization work, dissertations and theses were eliminated; information about specific health programs in the area or related to the theme. Studies that are not related to the theme of wound care in pri-

primary health care and studies of integrative literature review. The search of the databases took place in the months of January and February 2020.

After selecting the articles in the databases, a data analysis process was established, considering peer review through systematic reading of the title, abstract and full text, and those that did not show consistency with the guiding question and research objective, were eliminated from the analysis sample of this review. (4) Another aspect elucidated in the data analysis process, in line with the EBP, is the establishment of the classification of the analyzed publications based on the level of evidence. The classification of evidence from studies considered the evidence hierarchy for intervention studies, being:

Level I - systematic review or meta-analysis; Level II - controlled and randomized studies; Level III - controlled studies without randomization; Level IV - case-control or cohort studies; Level V - systematic review of qualitative or descriptive studies; Level VI - qualitative or descriptive studies and Level VII - opinions or consensus. (6)

RESULTS

Through the application of the criteria established for searching the databases, 79 studies were obtained (MEDLINE (61); LILACS (9); BDNF (9)) under which the identification stage was developed, which started

the process of analysis of the data in the established steps, as explained in figure 1:

In the selection stage, the eligibility criteria established in the research were applied, through which 73 studies were eliminated: (02) - study language: Swedish and German; (51) - Year of publication different from the established interval; (05) - Restricted / paid access; (04) - Unrelated to the theme; (02) - Information material; (01) - Thesis; (08) - Duplicates in the databases. In this sense, 06 studies remained for critical reading and data analysis. In the analysis stage, the material was read (title, abstract and full text) allowing the elimination of 03 studies (02 in the reading of the title and 01 in the reading of the summary), leaving 03 studies included for the analysis of the full text. The studies included in this stage are identified in table 1:

Through the detailed review of the studies included for the final stage of analysis, the points of greatest relevance in production and their alignment with regard to the guiding question of this study were highlighted and a table was created with the details of these productions.

DISCUSSION

Assistance to patients with wounds is a dynamic and individualized process and the competence demonstrated by nurses through their skills is essential to guarantee and maintain quality throughout the course of care. Such perspective is demonstrated from

Figure 1 - Flowchart representative of the search for articles. Caruaru - PE, Brazil, 2020.

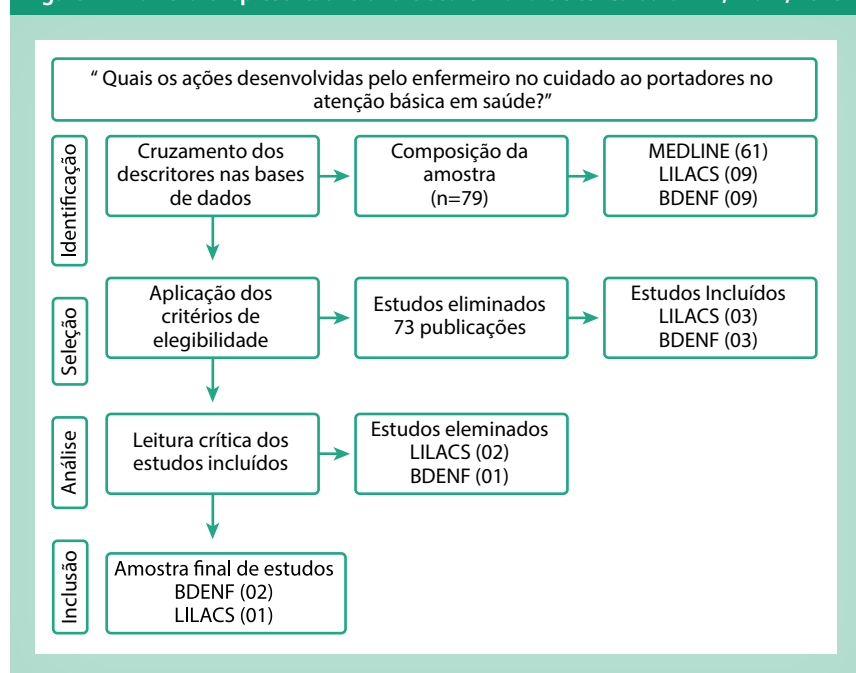


Chart 1 - List of articles included according to the study variables. Caruaru - PE, Brazil, 2020.

ID	AUTORES	TÍTULO DA PUBLICAÇÃO	ANO	PERIÓDICO
01	Aguiar, JS et. al. ⁽⁷⁾	Estrutura física e recursos materiais das salas de curativos das policlínicas regionais.	2019	Reuol UFPE
02	Santos, MKS et. al. ⁽⁸⁾	Orientações do enfermeiro aos idosos com diabetes mellitus: prevenindo lesões.	2019	Reuol UFPE
03	Chibante, CLP et. al. ⁽⁹⁾	Saberes e práticas no cuidado centrado na pessoa com feridas	2017	Esc. Anna Nery

Source: Authors, 2019.

Chart 2 - Details of the articles included for full text analysis. Caruaru - PE, Brazil, 2020.

ID	OBJETIVO	MÉTODO	RESULTADOS	CONCLUSÕES	NÍVEL DE EVIDÊNCIA
01	Identificar a estrutura física e materiais das salas de curativos de policlínicas regionais para atendimento ao cliente com feridas.	Estudo qualitativo, observacional e transversal.	Foram identificadas as lacunas relacionadas à estrutura física e recursos materiais através da aplicação de dois checklists, esses permitiram visualizar a adequação das salas de curativo, disponibilidade de insumos e as implicações que estas traziam na manutenção do cuidado ao portador de feridas. A atuação do Enfermeiro é necessária pela condição de liderança e de conhecimento acerca dos dispositivos legais, normas sanitárias e materiais necessários para manutenção e perfeito funcionamento da sala de curativos.	O estudo destaca a inexistência de uma unidade ideal para o atendimento ao portador de feridas, enfatizando a ausência de estrutura física e materiais adequados diante da necessidade apresentada pela população e os eventuais riscos que estas lacunas provocam aos usuários e profissionais.	VI
02	Analisar as orientações dos enfermeiros da Unidade de Saúde da Família aos idosos com Diabetes Mellitus na prevenção de lesões de pele.	Estudo qualitativo, descritivo e exploratório. Para análise dos dados utilizou-se técnica de análise conteúdo na modalidade de análise categorial.	As categorias de análise dos dados, elencadas no estudo, estabelecem o cuidado do enfermeiro pautado nos seguintes aspectos: (1) No tocante às orientações realizadas durante a consulta de enfermagem; (2) na realização da avaliação física, com ênfase na aplicação do exame físico da pele do Diabético; (3) No estabelecimento de intervenções de cuidado na manutenção da autonomia para o autocuidado e (4) na inserção da família como rede de apoio na prevenção dos fatores de risco para lesões de pele.	Os enfermeiros das Unidades de Saúde da família desempenham um papel de suma importância na educação em saúde dos idosos com Diabetes Mellitus, porém ainda existe um déficit relacionado às orientações sobre os cuidados com a pele. É essencial que estes profissionais tenham maior conhecimento teórico-prático acerca da temática.	VI
03	Descrever os saberes e práticas de clientes no cuidado com feridas.	Estudo qualitativo, descritivo, do tipo etnográfico realizado em um ambulatório de curativos de uma unidade básica de saúde.	As condições do itinerário popular, os mitos reforçados na cultura, o desconhecimento sobre as terapêuticas utilizadas no tratamento de feridas e a pouca disponibilidade do profissional em estabelecer ações de educação em saúde e vínculo impedem o acesso precoce do usuário a atenção ofertada pela Unidade de Saúde da Família. Partindo deste pressuposto é abordada a importância da cultura e da realidade apresentada para o indivíduo sobre suas percepções e atitudes no cuidado com lesões.	Os profissionais devem desenvolver uma relação de interação e aprendizado mútuo onde as necessidades e questionamentos sejam compartilhados proporcionando o fortalecimento afetivo e de confiança, possibilitando maior adesão a terapêutica adotada em conjunto. Da mesma forma os profissionais, através da educação em saúde devem instruir e incentivar o exercício da autonomia no cuidado aos clientes portadores de lesão os tornando protagonistas desse cuidado.	VI

Source: Authors, 2019.

the application of the knowledge of semiology and semiotechnics that allow a comprehensive evaluation and the indication of the appropriate treatments to the user's needs. ⁽¹⁰⁻¹¹⁾

For this assistance to be effective,

the Ministry of Health (MH) recommends that the services offer specific space with appropriate physical structure, products and materials that meet the biopsychosocial needs of users. The service must be performed in an envi-

ronment with adequate dimensions, availability of products and specific coverings for each type of wound and that considers the individuality of each patient. Studies emphasize the unavailability of adequate environments to

care for patients with wounds, which is caused by problems related to the maintenance of the physical structure and the lack of inputs (special materials and coverings) that compromise the continuity of treatment and expose the population to possible risks caused by these gaps. In this panorama, the need for the nurse's intervention emerges, as he/she dominates the knowledge about the specific sanitary norms for the care of the wounded patient and knows the necessary inputs for the provision of care in the face of the most prevalent cases of care. ^(12-13,14)

The care model developed by the Nurse requires that knowledge be shared through strategies that include the family, helping to fully understand the individual and aiming to promote measures of well-being and quality of life. The Nursing Consultation promotes an environment for sharing knowledge (scientific and popular), causing changes in behavior through the insertion of health practices accepted by the user and that promote an impact on the healing process. This strategy makes it

possible to break the biological-visible model and respects the biopsychosocial, spiritual and cultural context of the individual, family and community, inserting them as protagonists in the care process. ^(15-16, 17)

The absence of nurses' interventions, the non insertion of the patient as the protagonist of the care process and the non-consideration of their cultural variables, are factors that lead to the user's distance from the basic health unit, non-adherence and/or abandonment of the proposed treatment. The lack of a dialogue about the absence on the procedure days, understanding the reasons and looking for solutions together are initiatives expected from a nursing professional committed to health.

The wounded theme refers to several public health problems in Brazil, especially due to the complications and high cost involved in its management and treatment. Studies show that people with wounds can develop some type of physical or emotional complication throughout their lives and that health education promoted

by nurses is essential, as dialogue and interaction are the main ways of building knowledge and empowerment of users and family members for the development of autonomy in care and health promotion. ⁽¹⁸⁻¹⁹⁾

However, it is extremely important that the patient is the protagonist in this care, having his autonomy preserved and encouraged, contributing to the process of wound recovery and healing. The nurse must support autonomy and exercise the role of monitoring and guiding the practices developed by the user and family through the use of appropriate health education technology for the development of the user's autonomy in a continuous and flexible way, thus having the opportunity to evolve in offering quality service to the user. ⁽²⁰⁾

It is understood, by means of the established theoretical survey, the need to list the relevant aspects and impact on the actions of the professional nurse in the care of patients with injuries in the scenario of primary health care, which are described in Table 3:

Chart 3 - Main actions of nurses in assisting patients with injuries in primary health care. Caruaru - PE, Brazil, 2020.
Acolher o usuário considerando seu histórico de saúde pregresso, cultura, raça, sexo, determinantes sociais e contexto familiar.
Garantir ambiente (sala de curativos) adequado às normas sanitárias para acomodação do usuário e realização do procedimento livre de riscos e danos a sua saúde.
Realizar consulta de enfermagem e executar exame físico completo e específico (área da lesão) como meio de estabelecer avaliação completa do usuário.
Indicar tratamento adequado às características físicas gerais do usuário e específicas da lesão.
Prover insumos para realização dos procedimentos garantindo sua utilização dentro das necessidades do usuário e que não aumente os custos de forma a gerar ônus aos serviços de saúde.
Oportunizar atividades de educação em saúde para promoção das mudanças de hábitos e consequente adesão a um estilo de vida que possibilite aumento no panorama de cicatrização da lesão.
Realizar visita domiciliar como meio de oportunizar educação em saúde ao usuário e família para reflexão quanto aos hábitos de vida e desmistificar os dogmas culturais envolvidos no processo de cuidar
Manter registro das intervenções de enfermagem (escrito e fotográfico) para avaliação do resultado das ações sistematizadas do cuidado implementadas.
Oportunizar momentos de discussão dos casos acompanhados na comunidade entre os profissionais de saúde componentes da equipe de saúde da família (Médico, Agentes comunitários de Saúde e Técnicos de Enfermagem) para fortalecimento das ações de cuidado ao portador de lesões.
Desenvolver protocolos de cuidado aos portadores de lesão na comunidade de forma a estabelecer linha de cuidado específica e que privilegie o usuário dentro de suas especificidades em saúde.
Source: Authors, 2019.

It was observed as a limitation in the production of this study the low availability of updated sources that deal with the theme in this modality of care. In contrast, the study contributes to encouraging readers, institutions and health professionals about the need to develop actions aimed at training nursing teams to intervene with users in order to increase scientific evidence in care, as well as in the use of inputs and coverage adequately and without generating additional costs to the health system.

CONCLUSION

By observing the analyzed aspects, it is understood that the nursing actions directed to the bearer of injuries in the setting of primary health care are

related to the maintenance of an ideal environment for the implementation of specific care to the injury, in the in-



...as well as in the use of inputs and coverage adequately and without generating additional costs to the health system.



tervention based on health education actions in the context of the user's specific need, especially with chronic diseases, and in the development of care based on the system of welcoming and understanding the dogmas that negatively interfere in the healing process.

It is understood that there is a need for further discussion and scientific advances in the context of inserting the nurse as an active participant in the care process for patients with injuries, since this professional has the necessary attributes for the development of actions to strengthen autonomy and self-care ensuring real changes in the prevention and management of skin lesions. It also emerges the importance of evaluation studies regarding the nursing care offered to this population in Primary Health Care. 🌱

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