

Nursing performance in patient care in palliative care: an integrative review

RESUMO | Objetivo: Analisar as evidências científicas disponíveis na literatura sobre a atuação da enfermagem na assistência ao paciente em cuidados paliativos. Método: Trata-se de uma revisão integrativa. Realizou-se a busca por artigos com delimitação nos últimos 5 anos; nos idiomas português, inglês e espanhol; disponíveis na íntegra. Nas plataformas de dados: BDEF, DOAJ, LILACS, PMC, SCOPUS e Web of Science. Resultados: Os dados foram organizados e apresentados em figuras e tabelas. Dos 125 estudos encontrados, 25 estava disponível na BDEF, 46 na DOAJ, 24 na LILACS, 26 na PMC, 0 na SCOPUS, e 4 na Web of Science; contudo, após a leitura permaneceram apenas os que atendiam aos critérios para inclusão e exclusão descritos na metodologia, 6 estudos. Conclusão: Este estudo proporcionou a identificação de algumas dificuldades e das características associadas a atuação da enfermagem na assistência ao paciente em cuidados paliativos; vinculado ao déficit de conhecimento e falta de incentivo.

Descritores: Enfermagem; Cuidados Paliativos; Humanização da Assistência

ABSTRACT | Objective: To analyze the scientific evidence available in the literature on the role of nursing in patient care in palliative care. Method: This is an integrative review. The search for articles was carried out; with delimitation in the last 5 years; in Portuguese, English and Spanish; available in full. On data platforms: BDEF, DOAJ, LILACS, PMC, SCOPUS and Web of Science. Results: Data were organized and presented in figures and tables. Of the 125 studies found, 25 were available from BDEF, 46 from DOAJ, 24 from LILACS, 26 from PMC, 0 from SCOPUS, and 4 from Web of Science; however, after reading, only those who met the criteria for inclusion and exclusion described in the methodology remained, 6 studies. Conclusion: This study provided the identification of some difficulties and characteristics associated with the role of nursing in patient care in palliative care; linked to the lack of knowledge and lack of incentive.

Keywords: Nursing; Palliative Care; Humanization of Assistance

RESUMEN | Objetivo: Analizar la evidencia científica disponible en la literatura sobre el papel de la enfermería en el cuidado del paciente en cuidados paliativos. Método: Esta es una revisión integradora. Se realizó la búsqueda de artículos; con delimitación en los últimos 5 años; en portugués, inglés y español; disponible en su totalidad. En plataformas de datos: BDEF, DOAJ, LILACS, PMC, SCOPUS y Web of Science. Resultados: Los datos se organizaron y presentaron en figuras y tablas. De los 125 estudios encontrados, 25 estaban disponibles en BDEF, 46 en DOAJ, 24 en LILACS, 26 en PMC, 0 en SCOPUS y 4 en Web of Science; sin embargo, después de la lectura, solo quedaron aquellos que cumplieron con los criterios de inclusión y exclusión descritos en la metodología, 6 estudios. Conclusión: Este estudio permitió identificar algunas dificultades y características asociadas al papel de la enfermería en el cuidado del paciente en cuidados paliativos; vinculado a la falta de conocimiento y falta de incentivos.

Palabras claves: Enfermería; Cuidados Paliativos; Humanización de la Atención

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INTRODUCTION

Even before the World Health Organization (WHO) defined palliative care as an area of care where the quality of life of a patient with a diagnosed disease was prioritized beyond the possibility of treatment, regardless of the time the patient had to diagnose the disease. Committed to taking care of patients, Florence realizes that it is more than just taking medication. ⁽¹⁾

Palliative care is based on the following principle: reaffirming the meaning of life, but also remembering that death is a completely natural process that defines the life cycle of care and is not intended to accelerate or disproportionately prolong the time of death. Action (persistence of treatment); alleviating pain and other symptoms, increasing psychological and spiritual aspects, understanding their importance in nursing strategies, and not forgetting the importance of supporting family members so that they can face this moment and prepare them for the sad moment. ^(2,3)

They are indicated for patients of all ages, whether adults or children, who suffer from any type of disease, but have not yet achieved a treatment that leads to the chronicity of this pathology. The pain and suffering of these patients are accompanied by psychological, social and spiritual symptoms. Extensive family support. ^(4,5)

Diagnosing illnesses that affect health and the continuity of life raises several questions about the best care. Palliative care is seen as a line of care whose main objective is to maintain quality of life and provide comfort as the disease progresses. This type of care requires a trained team that can take into account all dimensions of the patient. ⁽⁵⁾

Although palliative care has progressed, it must be emphasized that patients are not able to care for these patients, and feelings of depression,

powerlessness and ignorance continue to hamper the progress of care. If the professionals responsible for these patients undergo lifelong learning and training, accumulate theoretical knowledge and practical experience, and thus make a significant contribution to improving the patients' living conditions in this process, it will be different.

For this reason, this study aims to analyze the scientific evidence available in the literature on the role of nursing in patient care in palliative care.

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METHOD

This is a bibliographic descriptive study of the integrative review type, with a qualitative approach that offers opportunities to analyze the scientific literature and broadly understand the research topics, thus contributing to patient care practices based on scientific knowledge. ⁽⁶⁾

The fulfillment of the following steps was determined: (1) elaboration of the guiding question and objective of the study; (2) definition of inclusion

and exclusion criteria for scientific productions; (3) search for scientific studies in databases and virtual libraries; (4) analysis and categorization of the productions found; (5) results and discussion of findings. ⁽⁷⁾

To raise the guiding question, the PICO strategy was used, a methodology that helps in the construction of a research question and search for evidence for a non-clinical research, where P = Population/Patient; I = Interest; and Co = Context (P: Patient in Palliative Care; I: Nursing Care; Co: Quality Care). Thus, the following guiding question of the research was defined: "How does nursing work in patient care in palliative care?".

For selection of articles, the following inclusion criteria were used: original article, available in full, published in the last 5 years (2015-2020) in Portuguese, English or Spanish, that met the objective of the study. Gray literature, as well as repeated publications of studies in more than one database, and articles that did not answer the study's guiding question and that allowed access through the Virtual Private Network (VPN) of the University of Pernambuco (UPE) were excluded. The temporal delimitation in the last 5 years is justified, aiming at the survey of recent articles.

Data collection took place during the month of May and June 2021 in the following databases: Nursing Database (BDNF); Directory of Open Access Journals (DOAJ); Latin American and Caribbean Literature on Health Sciences (LILACS); PubMed Central (PMC), SCOPUS, and on the Web of Science.

The articles indexed from the Health Sciences Descriptors (DeCS) were searched: "Enfermagem", "Cuidados Paliativos", "Humanização da Assistência". The respective terms from the Medical Subject Headings (MeSH) were used: "Nursing", "Palliative Care", "Humanization of Assistance". The operationalization and the search stra-

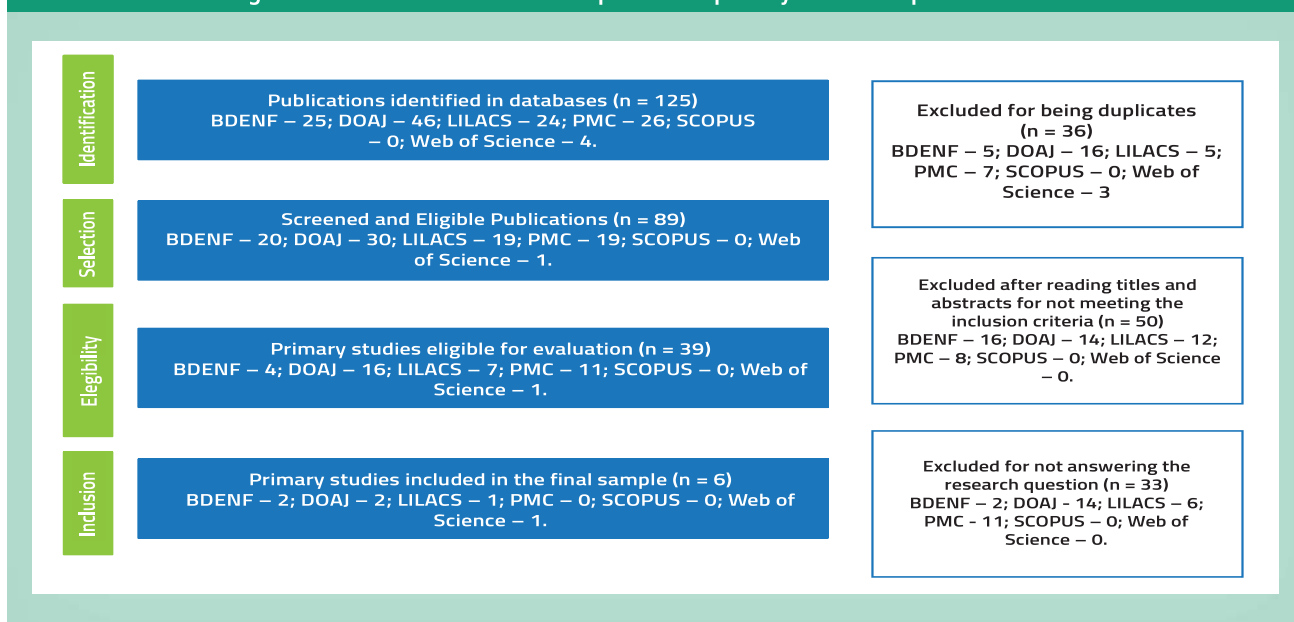
Table 1 - Database search strategy. Recife, Pernambuco (PE), Brazil, 2021.

Databases	Search Terms	Results	Selected
BDEFN	Nursing AND Palliative Care AND Humanization of Assistance	25	2
DOAJ	Nursing AND Palliative Care OR Humanization of Assistance	46	2
LILACS	Nursing AND Palliative Care AND Humanization of Assistance	24	1
PMC	Nursing AND Palliative Care AND Humanization of Assistance	26	0
SCOPUS	Nursing AND Palliative Care AND Humanization of Assistance	0	0
Web of Science	Nursing AND Palliative Care AND Humanization of Assistance	4	1
Total		125	6

Source: Research data, 2021.

fyng the knowledge produced in levels of evidence according to Melnyk e Fineout-Overholt⁽⁹⁾: level I, evidence is related to systematic review or meta-analysis of randomized controlled clinical trials or from clinical guidelines based on systematic reviews of randomized controlled clinical trials; at level II, evidence derived from at least one well-designed randomized controlled clinical trial; at level III, evidence from well-designed clinical trials without randomization; at level IV, evidence from well-designed cohort and case-control studies; at level V, evidence from a systematic review of descriptive and qualitative studies; at level VI, evidence derived from a single descriptive

Figure 1 - Flowchart of the selection process for primary studies adapted from PRISMA.



Fonte: Recife, Pernambuco (PE), Brazil, 2021.

tegy were based on the combination with the Boolean operator AND and OR, carrying out the search jointly and individually so that possible differences could be corrected (Chart 1).

The selection of studies was based on Preferred Reporting Items for Systematic Review and Meta-Analysis (PRISMA)⁽⁸⁾ in order to assist in the development of articles. At first, duplicated

studies were eliminated by reading titles and abstracts. Of these pre-selected ones, a full reading was carried out, in order to verify which ones meet the guiding question and the inclusion/exclusion criteria. The final sample was then constructed with studies relevant to the pre-established criteria (Figure 1).

After reading the selected articles, the studies were categorized, classi-

or qualitative study; and at level VII, evidence derived from the opinion of authorities and/or report from expert committees.

The summary of information in the corpus was obtained through an instrument: identification of the original article; article authorship; year of publication; parents; methodological characteristics of the study; and study

sample. An analytical reading of the studies was carried out, identifying the key points for the hierarchy and synthesis of ideas.

Aiming at a better understanding and visualization of the main findings, the data were organized presenting them in figures and tables, exposed in a descriptive way.

RESULTS

The studies surveyed are arranged

showing their titles, authors, years of publication, levels of evidence, objectives and results. After reading the selected articles, the studies were categorized, classifying the knowledge produced on the subject, into levels of evidence, mostly level VI - evidence derived from a single descriptive or qualitative study. The main findings arranged in the objectives and conclusions are directly associated with the role of nursing in patient care in palliative care (Table 1).

DISCUSSION

It was possible to observe some difficulties associated with the role of nursing in patient care in palliative care, for example, some professionals cannot understand the philosophy of such care; which is often related to the deficit in technical-scientific training still in graduation. Still, it is seen that there is a barrier with regard to encouraging the implementation of palliative care in

Table 1 - Synthesis of the main findings of the role of nursing in patient care in palliative care. Recife, Pernambuco (PE), 2021.

N	Title/Database	Authors (Year)	Country	Level of Evidence	Objective	Results
1	Nursing professionals: understanding pediatric palliative care/ BDEF	Verri, Edna Regina et al. (2019) (10)	Brazil	VI	To investigate the understanding and practice of nursing professionals about pediatric palliative care.	The professionals presented difficulties related to understanding the philosophy and goals of palliative care and difficulty in working with pediatric patients who are under this care highlighting the feelings of failure and sadness when dealing with the situation.
2	Intervention in palliative care: nurses' knowledge and perception./ BDEF	Silva, Hashilley Alberto da et al. (2018) (11)	Brazil	VI	Assess nurses' perception of palliative care before and after an intervention.	The nurses' perception about palliative care was deficient. This fact was associated with a deficiency in technical-scientific training while still in graduation.
3	Delirium onset within a palliative care programme: nursing care for the patient and family. / DOAJ	Caleffi, Dália et al. (2018) (12)	Italy	VI	Prevent the incidence of delirium by identifying people at risk.	To offer a personalized treatment that offers support, relief and hope, considering the person as a whole within the family environment, nurses can use the Nanda taxonomy of the international classification of nursing diagnoses (Nanda-I), Nursing Outcomes Classification (NOC) and Nursing Interventions Classification (NIC).
4	Cancer patient's perception of the practice of nursing care. / DOAJ	Ascari, Rosana Amora; Didoné, Poliana Henkes; Aumondi, Camila. (2018) (13)	Spain	VI	Knowing the perception of cancer patients about the practice of nursing care, especially palliative care performed in a surgical clinic in a public hospital in western Santa Catarina, southern Brazil.	A ênfase dos cuidados de enfermagem envolveu aspectos procedimentais, tais como, auxílio na higiene, troca de curativos, infusões venosas e verificação dos sinais vitais, desacompanhados de orientações sobre procedimentos e cuidados de enfermagem.
5	Experience of nurses about palliative care. / LILACS	Santos, Andrea Moreira dos et al. (2020) (14)	Brazil	VI	Analyze the perception of nurses about their experience in palliative care..	The emphasis of nursing care involved procedural aspects, such as helping with hygiene, changing dressings, intravenous infusions and checking vital signs, without guidance on nursing procedures and care.

6	The Experiences of Family Caregivers at the End of Life: Suffering, Compassion Satisfaction and Support of Health Care Professionals Experiences of Caregivers at the End of Life. / Web Of Science	Ortega-Galan, AM et al. (2019) (15)	Spain	VI	Identify, through the experiences and perceptions of family caregivers, the key elements related to the care provided to the patient in the terminal phase of life.	The results indicate the existence of 3 dimensions: the caregiver's suffering, compassion, satisfaction with the care provided and the support of health professionals, especially nurses.
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Source: Research data, 2021.

the hospital environment.

Verri et al.,⁽¹⁰⁾ and Santos et al.,⁽¹⁴⁾ observed in their studies that most nursing professionals have difficulties associated with understanding the philosophy and principles of palliative care, and even more so if provided to pediatric patients, causing feelings of failure and sadness.

Corroborating, a study by Arrieira et al.,⁽¹⁶⁾ found that the professional, unable to face their own death problems, has more difficulty in facing the death of the other and tries to somehow distance it from themselves, which is manifested in the fragmentation in the patient's organs or through their disease or its physical symptoms.

Silva et al.,⁽¹¹⁾ observed in their study the presence of a deficit regarding the nurses' perception of palliative care, which is associated with a failure in technical-scientific training throughout graduation. Corroborating, Rain-Sierra, Martínez-Sabater and Lapeña-Moñux⁽¹⁷⁾ identified mistakes and training deficits in the context of palliative care among the nursing staff. The knowledge that would be improved through the development of educational activities that specifically focus on identified misunderstandings would allow professionals to provide higher quality palliative care to their patients based on existing scientific evidence.

A study by Caleffi et al.,⁽¹²⁾ indicate that in order to offer a personalized

treatment to the patient, the professional can make use of the taxonomy of Nanda International Classification of Nursing Diagnoses (NANDA-I), Nursing Outcomes Classification (NOC) and Nursing Interventions Classification (NIC).

Corroborating, Carvalho et al.,⁽¹⁸⁾ raises that to strengthen health practices through the work of professionals and stakeholders, it is recommended to develop accountability plans for broader primary health care and the realization of the right to health. Palliative care, multidisciplinary teamwork and integrated into the health network.

A study by Ascari, Didoné and Aumondi⁽¹³⁾ raised data about the perception of the patient who received palliative care assistance provided by the nursing professional, and these emphasized help with hygiene, changing dressings, checking vital signs, intravenous infusions, and lack of guidance on such procedures and nursing care. Corroborating a study by Ortega-Galan et al.,⁽¹⁵⁾ affirms the existence of 3 dimensions: the caregiver's suffering, compassion, satisfaction with the care provided and the support of health professionals, especially nurses.

Through the search strategies used, a small sample was found and there was little availability of scientific articles to compare the results. Although many articles appeared as a result of the descriptors, few met the objective

of the study. In addition, the included studies have limitations such as: single centers, different comparison systems, small sample size and lack of randomization.

Thus, it was not possible to verify that there is scientific evidence regarding the role of nursing in patient care in palliative care. It is necessary to carry out more studies containing a larger sample and enabling discussion about the role of nursing in patient care in palliative care.

This research can help to disseminate the concept and types of palliative care provided by the multidisciplinary team, especially nursing. Increasing professional awareness and broadening the vision of patient care. Also, in the context of university management, teaching can create and disseminate knowledge even in graduation, which can reflect in many aspects of professional nursing practice.

CONCLUSION

This study provided the identification of some difficulties and characteristics associated with the role of nursing in patient care in palliative care; and often linked to knowledge deficit and lack of incentive. However, there is a scarcity of studies that give the real importance to this theme, essential in training, profession, and continuing education, even though this number

has gradually increased in recent years. Therefore, this study provided the perception that, although shy, there is a growth in the number of studies that identify the benefits of nurses' performance in terms of palliative care. 🍃

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