

Priprema sestara za vodeću ulogu u kardiovaskularnoj prevenciji i rehabilitaciji

Preparing nurses for a leading role in cardiovascular prevention and rehabilitation

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Kardiovaskularne bolesti i dalje su vodeći uzrok smrti i invaliditeta u većini zemalja Europske unije. Sekundarna prevencija postala je temelj liječenja, ali većina bolesnika ne postiže standarde smjernica što ih predisponira za progresiju bolesti, ponavljajuće događaje i opetovane hospitalizacije. Naše društvo brzo se mijenja, dolaze novi trendovi, pojavljuje se digitalizacija koja ulazi u sve aspekte našeg života. Sve složenije i zahtjevnije potrebe bolesnika dovode do promjena radi kojih medicinske sestre moraju steći višu razinu znanja, vještina i kompetencija.

Edukacija kardioloških medicinskih sestara u razvijenim zemljama pratila je trendove razvoja moderne kardiološke prakse. U suradnji zdravstvenog sustava i stručnih društava, a sukladno zahtjevima kliničke prakse nastaju programi i načini provedbe specijalističkih programa za edukaciju i certifikaciju. Na takav način medicinske sestre uz spoj vještina, znanja i stavova koje su stekle svojom dosadašnjom izobrazbom dobivaju i razvijaju i dodatne kliničke kompetencije.

Implementacijom specijalističkih programa u obrazovni sustav medicinskih sestara sukladno stečenim kompetencijama, a u prilog tome govore primjeri kardiološke sestrinske prakse u razvijenim zemljama svijeta. Medicinske sestre kao najbrojniji zdravstveni profesionalci moraju dobiti vodeću ulogu u programima moderne preventivne kardiologije i rehabilitacije jer mogu dati veliki obol u smanjenju tereta kardiovaskularnih bolesti.¹⁻⁵

Cardiovascular diseases continue to be the leading cause of death and disability in most European Union countries. Secondary prevention has become the foundation of treatment, but most patients do not meet the standards of guidelines that predispose them to disease progression, recurrent events, and repeated hospitalizations. Our society is changing rapidly, new trends are coming, and digitalization is emerging that enters all aspects of our lives. The increasingly complex and demanding needs of patients are leading to changes that require nurses to acquire a higher level of knowledge, skills and competencies.

The education of cardiac nurses in developed countries has followed the development trends of modern cardiac practice. In cooperation with the health care system and professional societies, and in accordance with the requirements of clinical practice, programs and methods of implementing specialist programs for education and certification are created. In this way, nurses, in addition to the combination of skills, knowledge and attitudes they have acquired through their previous training, acquire and develop additional clinical competencies.

By implementing specialist programs in the educational system of nurses in accordance with the acquired competencies, and examples of cardiac nursing practice in developed countries speak in favor of this. Nurses, as the most numerous health professionals, must get a leading role in modern preventive cardiology and rehabilitation programs because they can give a great deal in reducing the burden of cardiovascular diseases.¹⁻⁵

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LITERATURE

1. World Health Organization. Cardiovascular diseases (CVD). Available at: <https://www.who.int/health-topics/cardiovascular-diseases#tab=tab-1> (September 1, 2021).
2. Haskell WL, Alderman EL, Fair JM, Maron DJ, Mackey SF, Superko HR, Williams PT, Johnstone IM, Champagne MA, Krauss RM, et al. Effects of intensive multiple risk factor reduction on coronary atherosclerosis and clinical cardiac events in men and women with coronary artery disease. The Stanford Coronary Risk Intervention Project (SCRIP). *Circulation.* 1994 Mar;89(3):975-90. <https://doi.org/10.1161/01.CIR.89.3.975>
3. International Council of Nurses. Available at: <http://www.icn.ch>. (September 1, 2021).
4. Smith SC Jr, Collins A, Ferrari R, Holmes DR Jr, Logstrup S, McGhie DV, et al; World Heart Federation; American Heart Association; American College of Cardiology Foundation; European Heart Network; European Society of Cardiology. Our time: a call to save preventable death from cardiovascular disease (heart disease and stroke). *J Am Coll Cardiol.* 2012 Dec 4;60(22):2343-8. <https://doi.org/10.1016/j.jacc.2012.08.962>
5. Yusuf S, Wood D, Ralston J, Reddy KS. The World Heart Federation's vision for worldwide cardiovascular disease prevention. *Lancet.* 2015 Jul 25;386(9991):399-402. [https://doi.org/10.1016/S0140-6736\(15\)60265-3](https://doi.org/10.1016/S0140-6736(15)60265-3)