

Sestrinska skrb bolesnika s privremenom intrakardijalnom potporom lijeve klijetke

Nursing care for patients with a temporary intracardiac pump for the left ventricle

 Alen Baćar*,

 Jelena Petrović

Klinički bolnički centar
Zagreb, Zagreb, Hrvatska
University Hospital Centre
Zagreb, Zagreb, Croatia

KLJUČNE RIJEČI: zatajivanje srca, sestrinska skrb, intrakardijalna pumpa.

KEYWORDS: heart failure, nursing care, intracardiac pump.

CITATION: *Cardiol Croat.* 2021;16(11-12):339. | <https://doi.org/10.15836/ccar2021.339>

***ADDRESS FOR CORRESPONDENCE:** Alen Baćar, Klinički bolnički centar Zagreb, Kišpatićeva 12, HR-10000 Zagreb, Croatia. / Phone: + 385-98-180-5001 / E-mail: alenbacar07@gmail.com

ORCID: Alen Baćar, <https://orcid.org/0000-0003-1981-762x> • Jelena Petrović, <https://orcid.org/0000-0002-6354-1539>

Zatajivanje srca (ZS) je klinički sindrom koji nastaje kao posljedica poremećaja funkcije srca i strukture uslijed čega dolazi do nedovoljne opskrbe tkiva kisikom i nezadovoljavanja metaboličkih potreba organizma. Jedan je od vodećih javnozdravstvenih problema te dovodi do sve veće prevalencije u populaciji.¹ Modeli liječenja ZS-a su konzervativno liječenje, transplantacija srca i mehanička cirkulacijska potpora. Jedna od tih mehaničkih cirkulacijskih potpora je intrakardijalna pumpa za potporu lijeve klijetke – *Impella*. Intrakardijalna pumpa je mikroaksijalna kirurški implantirana najmanja srčana pumpa koja izvlači krv iz lijeve klijetke i šalje je u aortu te isporučuje krv bogatu kisikom do ostatka tijela. Najčešće indikacije za postavljanje intrakardijalne pumpe su akutni infarkt miokarda praćen kardiogenim šokom te kod postavljanja koronarne angioplastike visokog rizika. Sestrinska skrb bolesnika s intrakardijalnom pumpom vrlo je zahtjevno područje u sestinstvu koje zahtjeva kontinuiranu edukaciju, praćenje najnovijih podataka, holistički pristup te profesionalnu suradnju s članovima tima. Redovita procjena, nadzor, praćenje i bilježenje vrijednosti vitalnih znakova, prepoznavanje ranih komplikacija te aseptičan rad glavni su zadaci medicinske sestre kod bolesnika koji imaju ugrađenu intrakardijalnu pumpu. Edukacija zdravstvenog osoblja, timski rad svih zdravstvenih djelatnika usmjerena je na prepoznavanje problematike, način liječenja bolesnika i edukacija bolesnika i obitelji. Uloga medicinske sestre je da svojom skrbi pruža podršku, prepoznavanje i reagira na problematiku, te podučava bolesnika svim vještinama i da se prilagodi novonastaloj situaciji.

Heart failure (HF) is a clinical syndrome resulting from functional and structural abnormality of the heart which disrupts filling its tissue with blood and fails to meet the organism's metabolic needs. It is one of the main issues in public health and leads to an increasing prevalence in the population.¹ Management of the HF includes conservative treatment, heart transplantation and mechanical circulatory support. One of such mechanical circulatory supports is the intracardiac left ventricular assist pump - *Impella*. Intracardiac pump is a surgically implanted miniaturized axial pump that extracts blood from the left ventricle and sends it to the aorta delivering oxygen filled blood to the rest of the body. Common indications for implanting an intracardiac pump are acute myocardial infarction with cardiogenic shock and in implanting a high risk coronary angioplasty. Nursing a patient with an intracardiac pump is a complicated area in nursing that demands continuous education, recent data monitoring, a more holistic approach and professional cooperation with other members of the team. Main tasks for a nurse taking care of a patient with an implanted intracardiac pump are regular assessments, supervising, monitoring and recording vital signs, recognizing early signs of complications and working using the aseptic technique. Education and teamwork of all health personnel are directed towards recognizing the problem, methods of treating the patient and educating their families. The role of the nurse is to offer support, recognize and react to a problem, teach the patient all the skills and to adapt to a new situation.

RECEIVED:
September 7, 2021

ACCEPTED:
September 14, 2021



LITERATURE

1. Brahmabhatt DH, Cowie MR. Heart failure: classification and pathophysiology. *Medicine (Baltimore)*. 2018;46(10):587-593. <https://doi.org/10.1016/j.mpmed.2018.07.004>