




The role of nursing care in recognizing and alleviating anxiety in a patient with post-infarction ventricular septal defect: a case report

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Introduction: Ventricular septal defect (VSD) is the most common congenital heart defect but may also occur as a life-threatening complication of acute myocardial infarction¹. Large defects can lead to pulmonary hypertension, biventricular failure, and significant valvular regurgitation. Alongside somatic manifestations, patients frequently experience heightened anxiety that negatively impacts recovery. Nursing staff play a key role in early detection and alleviation of anxiety, contributing to improved patient outcomes.

Case report: 60-year-old male was transferred to the Acute Heart Failure Intensive Care Unit with a diagnosis of post-infarction VSD verified by echocardiography (17-25 mm defect, left-to-right shunt Qp/Qs 3.7). The patient reported fear of hospitalization, uncertainty about treatment, irritability, crying episodes, tension, and insomnia. Nursing interventions focused on continuous emotional support, patient education regarding diagnostic and therapeutic procedures, and active encouragement to verbalize symptoms of anxiety. The nursing team collaborated closely with physicians and involved family members to reduce patient distress. The patient was subsequently referred to cardiac surgery where surgical patch repair of the VSD was successfully performed. At the time of transfer, the patient demonstrated improved coping, self-recognition, and verbalization of anxiety symptoms, with decreased frequency of episodes.

Conclusion: Mental health is an essential component of holistic cardiac care. Nurses are in a unique position to identify anxiety early, provide targeted interventions, and coordinate multidisciplinary support. Their role is crucial in empowering patients with complex cardiac conditions such as post-infarction VSD to achieve better psychological adjustment and quality of life.

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LITERATURE

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