

MATRIX

ADVOCare NETWORK

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Issues

Information and ideas for those
serving seniors.

on Aging

Heart Disease Causes 38% of Senior Deaths

Heart disease is the number one cause of death for Americans 65 years and older, resulting in over half million deaths annually. Much heart disease in the elderly is the result of dietary and lifestyle habits, diabetes, and lack of exercise. There are other reasons, however, why older adults experience unnecessary and preventable disability and death from heart disease and heart attacks.

Many of these reasons are related to the negative stereotypes Americans, including health care providers, hold about old age, and include:

- Medical and societal acceptance of the inevitability of heart disease in the elderly
- Medical reluctance to treat high blood pressure and heart attacks aggressively in older adults for fear they can not tolerate aggressive treatment
- Multiple medications used to treat a number of health problems often cause drug interactions and adverse effects
- Inadequate education of older adults regarding lifestyle issues including diet, medications and exercise

Numerous studies have shown that aggressive preventive and interventional care can reduce the incidence and severity of heart disease and death in seniors. For example, researchers at the Minneapolis Heart Institute have found that by providing congestive heart failure patients monthly follow-up care with medication adjustment, they have cut the death rate in half and cut costs by 20%. Dr. Jay Cohn, chief of cardiovascular disease at the University of Minnesota, believes that nurses can be trained to do frequent follow-up with patients. They can watch for signs of impending problems and adjust medications accordingly in conjunction with a physician, he explains.

Care management services, such as those provided by Matrix, are useful in reducing the complications and disability from heart disease, leading to a higher quality of life. These interventions can even postpone cardiac death for some clients. Matrix care management interventions which are made before heart disease is present include:

- Providing diet counseling regarding heart-healthy diet and proper weight management to minimize risk of heart disease
- Assisting with choosing and implementing an appropriate exercise plan to maintain cardiovascular health
- Monitoring blood pressure and ensuring adequate treatment of elevated blood pressure
- Evaluating of risk factors for heart disease in conjunction with physician
- Ensuring that advance medic al directives are written and shared with the physician. The advance directive may indicate a client's wish for limited or aggressive medical care.

When a client has a diagnosis of heart disease, Matrix implements the above interventions, plus:

- Reviewing heart medications with physician and pharmacist to ensure correct dosage and avoid adverse drug interactions
- Referring client to cardiologist for evaluation and management of heart conditions when indicated
- Providing information regarding use of prescribed heart medications, especially Nitroglycerine
- Arranging for a medication administration system to ensure correct administration of medications
- Arranging for an emergency call system when indicated

Q & A

Q. How do nurses determine the care each client needs?

A. Nursing care is developed through the Nursing Process, an efficient method of organizing thought processes for clinical decision making and problem solving. Introduced in the 1950s, the Nursing Process is accepted in the legal definition of nursing in many state nurse practice acts and is the theoretical framework of most nursing curricula.

The Nursing Process is adapted from the scientific approach to problem solving and involves these steps:

- Assessment — the systematic collection of data related to patients and their problems
- Problem identification — interpretation of data resulting in Nursing Diagnosis
- Planning — choosing the options for care
- Implementation — putting the plan into action
- Evaluation — determining the effectiveness of the plan and adjusting the plan as patient needs change

Nursing diagnoses have been developed to ensure commonality of communication as well as continuity of care. For example, a nurse working with a client with Alzheimer's Disease and his family may formulate the nursing diagnosis "Self-care deficit" for the client and "Knowledge deficit related to Alzheimer's Disease" for the family.