

VISOKA ZDRAVSTVENA ŠOLA V CELJU

DIPLOMSKA NALOGA

**VPLIV ULTRAZVOČNO VODENE BLOKADE NA KAKOVOST
ŽIVLJENJA PACIENTOV S KRONIČNO BOLEČINO ZARADI
KOLENSKEGA OSTEOARTRITISA**

**INFLUENCE OF THE ULTRASOUND-GUIDED BLOCKADE ON THE
QUALITY OF LIFE OF THE PATIENTS WITH CHRONIC KNEE
OSTEOARTHRITIS PAIN**

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POVZETEK

Uvod: Osteoartritis je najpogostejša oblika artritisa in vodilni vzrok invalidnosti starejših odraslih po vsem svetu, predvsem zaradi bolečine, ki je primarni simptom te bolezni. Bolečine pri osteoartritisu kolena so še posebej prepoznavne, običajno kot prehod iz občasne bolečine, ki nosi težo, do bolj obstojne, kronične bolečine, ta pa pomembno vpliva na splošno kakovost življenja pacientov. Namen raziskave je ugotoviti vpliv ultrazvočno vodene blokade na kakovost življenja pacientov s kronično bolečino zaradi kolenskega osteoartritisa.

Metoda: Raziskava je temeljila na kvantitativnem raziskovalnem pristopu, uporabljena je bila metoda deskripcije, kompilacije in sinteze. Za merilni instrument smo uporabili anketni vprašalnik. Za prvi del statistične analize podatkov smo uporabili podatke, pridobljene v okviru klinične študije z naslovom: Učinek ultrazvočno nadzorovane blokade safenega živca v adduktornem kanalu z lokalnim anestetikom levobupivakainom in s klonidinom na kronično bolečino v kolenu (GENUS), pri kateri smo uporabili standardiziran anketni vprašalnik o težavah v kolenskem sklepu (KOOS). Drugi sklop anketnega vprašalnika se je nanašal na demografske podatke (spol, starost, telesna teža, telesna višina in indeks telesne mase - BMI) in smo ga oblikovali sami. Uporabili smo neslučajnostni priložnostni vzorec, v katerem je sodelovalo 77 pacientov, ki so izpolnjevali vključitvena merila za sodelovanje v študiji. Povprečna starost pacientov je bila 66,36 let. Podatki so bili analizirani v statističnem programu SPSS 22.0.

Rezultati: Maksimalna bolečina, ki je bila prisotna pri pacientih z osteoartritisom kolena pred izvedeno blokado adduktornega kanala in 1 mesec po njej, se je zmanjšala (PV = 8,12 pred blokado in PV = 4,19 po blokadi). Prav tako se je zmanjšala minimalna bolečina, ki so jo opisovali pacienti (PV = 3,30 pred blokado in PV = 1,37 po blokadi). Kakovost spanja pacientov, ki so trpeli za kronično bolečino, se je po izvedeni blokadi pri 56 (76,71 %) pacientih izboljšala, medtem ko je bilo spanje še vedno slabo pri 17 (23,28 %) pacientih. Izkazalo se je, da so pri njih bile prisotne še druge zdravstvene težave. Po izvedeni ultrazvočno vodeni blokadi adduktornega kanala, smo dobili rezultate (vprašalnik KOOS), ki so pokazali, da sta se v povprečju znižala bolečina in izraženost simptomov, izboljšale so se vsakodnevne dejavnosti pacientov in njihova kakovost življenja.

Razprava in sklep: Z raziskavo smo ugotovili, da je ultrazvočno vodena blokada adduktornega kanala učinkovita metoda za dvig kakovosti življenja pacientov z osteoartritisom kolena ob zmanjšanju bolečine in dvigu kakovosti spanja. Dokazali smo, da je opazovanje pacienta, jemanje in beleženje anamneze, ciljno spraševanje, svetovanje in zdravstvena vzgoja ter dokumentiranje zelo pomemben del celostne obravnave pacienta v Ambulanti za zdravljenje bolečine ter, da imajo zato medicinske sestre zelo velik doprinos k pravilni izbiri zdravljenja pacientov, ki trpijo za kronično bolečino.

Ključne besede: kakovost življenja, kolenski sklep, osteoartritis, kronična bolečina, zdravstvena nega.

SUMMARY

Introduction: Osteoarthritis is the most common form of arthritis and the leading cause of disability in older adults worldwide mostly because of the pain which is the primary symptom of the disease. Pains in knee osteoarthritis are in particular recognizable as a transition from intermittent weight-bearing pain to a more persistent chronic pain. The latter influences the general quality of life of the patients. The purpose of the research is to ascertain the influence of the ultrasound-guided blockade on the quality of life of patients with the knee osteoarthritis chronic pain.

Methods: The research was based on the quantitative research approach. The methods of description, compilation, and synthesis were used. We used a survey questionnaire as a measuring instrument. For the first part of the statistical analysis, we used data acquired within the framework of the clinical study titled: The effect of ultrasound-controlled blockade of the saphenous nerve in the adductor channel with local anesthetics levobupivacaine and clonidine on knee chronic pain (GENUS), where we used a standardized survey questionnaire on problems in knee joint (KOOS). The second complex of the survey questionnaire referred to the demographic data (gender, age, body weight, body height, and body mass index – BMI). We produced it by ourselves. We used a non-random ad hoc sample, in which 77 patients participated, who met the inclusion criteria in order to participate in the study. The average age of the patients was 66,36 years. The data were analyzed in the statistical program SPSS 22.0.

Results: The maximum pain present in patients with knee osteoarthritis before the performed blockade of the adductor channel and one month after it was reduced (PV = 8,12 before the blockade and PV = 4,19 after the blockade). The minimal pain reported by the patients was also reduced (PV = 3,30 before the blockade and PV = 1,37 after the blockade). The quality of sleep of the patients who suffered from the chronic pain improved in 56 patients (76,71 %) after the blockade. Meanwhile, the sleep of 17 patients (23,28 %) was still bad. It turned out that there were other medical problems present in them. After the performed ultrasound-guided blockade of the adductor channel, we got the results (the questionnaire KOOS) which proved that pain and severity of the symptoms were reduced on the average. The daily routine of the patients and their quality of life improved.

Discussion and conclusion: By research, we discovered that ultrasound-guided blockade of the adductor channel is an efficient method for raising the quality of life of patients with knee osteoarthritis in the sense of reducing the pain and raising the quality of sleep. We proved that monitoring the patient, taking and recording history, targeted questioning, guidance, and health education, and documenting is a very important part of the integrated treatment of the patient at the Clinic for the treatment of pain. Therefore, nurses contribute substantially to the appropriate choice of treating patients suffering from chronic pain.

Keywords: quality of life, knee osteoarthritis chronic pain management, pain research, nursing care.