

VISOKA ZDRAVSTVENA ŠOLA V CELJU

DIPLOMSKO DELO

**OZAVEŠČENOST IN ŽIVLJENJSKI SLOG PACIENTOV S
HIPERTENZIJO**

**IMPORTANCE OF HEALTH EDUCATION FOR PATIENTS WITH
HYPERTENSION**

Študentka: TAMARA PETROVIĆ

Mentorica: pred. IVANKA LIMONŠEK, dipl. m. s., univ. dipl. org.

**Somentorica: pred. mag. ANDREJA HROVAT BUKOVŠEK, dipl. m.
s., univ. dipl. org.**

**Študijski program: VISOKOŠOLSKI STROKOVNI ŠTUDIJSKI
PROGRAM ZDRAVSTVENA NEGA**

CELJE, 2017

POVZETEK

Uvod: Vrednosti krvnega tlaka so zelo natančen napovednik pričakovane življenjske dobe. Višji ko je krvni tlak, tem večje je tveganje za srčne bolezni. Da preprečimo nastanek arterijske hipertenzije ter z njo povezane srčno-žilne bolezni je treba spremeniti nekatere življenjske navade se pravi, je treba spremeniti življenjski slog. Pri tem je treba glede hipertenzije in dejavnikov tveganja posameznike dobro ozaveščati ter jih motivirati, da se sploh odločijo za spremembo v svojem življenju, ki bi pripomogla preprečiti resnejša stanja. Z raziskavo smo želeli ugotoviti, koliko so pacienti ozaveščeni glede povišanega krvnega tlaka ter kakšen je njihov življenjski slog.

Metoda: V raziskovanju smo uporabili kvantitativno metodo, tehniko anketiranja in metodo deskripcije. V vzorec smo vključili 40 predstavnikov, ki so zboleli za arterijsko hipertenzijo, vzorec je proporcionalno stratificiran. Za zbiranje podatkov smo kot instrument uporabili strukturiran anketni vprašalnik. Izpoljenih je bilo vseh 40 vprašalnikov, ki smo jih razdelili, kar predstavlja 100-odstotno realizacijo vzorca. Vse zbrane podatke smo analizirali v programu SPSS 22.0.

Rezultati: Vrednosti arterijske hipertenzije pozna 25 (62,5 %) pacientov. Največ informacij anketiranci pridobijo ustno, kar 38 (95 %). 33 (82,5 %) anketirancem so te informacije, ki jih pridobijo, zadostne. Odkar so posamezniki zboleli za arterijsko hipertenzijo, jih je 27 (67,5 %) spremenilo življenjski slog. 13 (32,5 %) anketirancev se za spremembo življenjskega sloga ni odločilo. Od posameznikov, ki so se odločili spremeniti življenjski slog, je 15 (37,5 %) anketirancev, ki so se tako odločili sami, 5 (12,5 %) se jih je odločilo na podlagi svetovanja zdravnika, 4 (10,0 %), ker so jim tako svetovali sorodniki, trije (7,5 %) pa so se tako odločili po posvetu z medicinsko sestro. Program CINDI se kaže v 100-odstotni prepoznavnosti, saj so bile ankete razdeljene v zdravstveno vzgojnem centru po delavnicah. S programom CINDI je bilo zadovoljnih 31 (77,5 %) anketirancev, 9 (22,5 %) pa jih s programom ni bilo zadovoljnih.

Razprava in sklep: ugotavljamo, da hipertenzijo resneje jemlje starejša populacija. Pri kontroli krvnega pritiska se pojavlja velika razlika glede na starost pacientov, saj mlajša populacija ne nadzira svojega krvnega tlaka kljub temu, da je diagnoza že postavljena. Glede na ugotovitve lahko trdimo, da so anketiranci iz Zdravstveno vzgojnega centra Šentjur dovolj ozaveščeni glede arterijske hipertenzije ter zdravega življenjskega sloga. Prav tako lahko potrdimo, da anketiranci gledajo na medicinsko sestro kot na osebo, ki je pomembna pri izvajanju zdravstveno vzgojnega dela ter pripomore k ozaveščanju o zdravem načinu življenja, vendar pa nima velikega vpliva pri spremembi življenjskega sloga.

Ključne besede: krvni tlak, življenjski slog, ozaveščenost, zdravstvena vzgoja, CINDI

SUMMARY

Introduction: Blood pressure values are a very accurate predictor of life expectancy. The higher the blood pressure the higher the risk of heart disease is as well. To prevent the occurrence of elevated blood pressure, or to successfully treat elevated blood pressure and its related cardiovascular diseases, it is necessary to change some aspects of living, i.e. of lifestyle. Individuals need to be aware of hypertension and its risk factors, and they need to be motivated to indeed decide to make a change in their lives which would prevent more serious conditions. With our research, we wanted to establish how aware patients were of elevated blood pressure as well as what their lifestyle was.

The Method: We used the quantitative research method, the description method, and the interviewing technique. We used a proportional stratified sample which included 40 representatives who suffer from arterial hypertension. To collect data, we used a structured survey questionnaire. All 40 distributed questionnaires were filled out, which represents a 100% realisation. All the data collected were analysed using the SPSS 22.0 programme.

The Results: 25 patients (62.5%) were familiar with elevated blood pressure values. As many as 38 interviewees (95%) had acquired most information verbally. 33 interviewees (82.5%) felt the information acquired was sufficient. Since suffering from arterial hypertension, 27 individuals (67.5%) had changed their lifestyle. 13 interviewees (32.5%) had not decided to change their lifestyle. Of those who had changed their lifestyle, 15 interviewees (37.5%) decided to do so themselves; 5 (12.5%) decided to do so after consulting with their doctor; 4 (10.0%) decided to do so because of their relatives, and 3 (7.5%) made this decision after consulting a nurse. The recognisability of the CINDI programme was 100%; the reason being the fact that the questionnaire was distributed after workshops at a centre for health education. 31 interviewees (77.5%) were satisfied with the CINDI programme, whereas 9 individuals (22.5%) were not satisfied with it.

The Discussion and the Conclusion: We established that hypertension is taken more seriously by the older population. There is a major difference in relation to the patients' age when checking blood pressure, which means the younger population does not check their blood pressure despite their established diagnosis. According to the findings, we can claim that the interviewees from the Šentjur Centre for Health Education are sufficiently aware of arterial hypertension and their lifestyle. We can also confirm that the interviewees see nurses as important figures for carrying out health education as well as for raising awareness of a healthy lifestyle. They do not, however, have a greater impact on the changing of an individual's lifestyle.

Keywords: blood pressure, lifestyle, awareness, health education, CINDI