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RESEARCH ARTICLE

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PLAN FOR THERAPEUTIC TRATAMENTO OF ADDICTIONS

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ABSTRACT

This study aimed to report the experience of nursing students in implementing a treatment plan to a patient by one host for treatment of chemical dependency. This was a descriptive study, the type experience report, held in one host unit for treatment of chemical dependency in Fortaleza-Ceara in the months of August to October 2018. The subject was one hospitalized patient in the unit, 34 years, crack user for about six years, and carries the Acquired Immune Deficiency Syndrome. Among their diagnoses patient presents: impaired memory related to neurological disorders, characterized by inability to recall events and interventions drawn: the use of recreational activities such as memory game and crossword puzzles. The nurse and the mental health team have fundamental role in assisting the patient hospitalized for treatment of chemical dependency, because the patient needs specific care and necessary for their rehabilitation. It is believed that the treatment plan conducted by academic can help the patient in the recovery of the social bond and its individuality, understand that the human being must be seen in its entirety, thus making the health care more humanized.

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INTRODUCTION

In Brazil, until recently, the use and abuse constituted a problem apart from health services and therefore the scope of specialized services. The big problem is that most Brazilian states do not have referral centers for attention to drug users (Ministry of Justice and Citizenship, 2014). The use of drugs has increased significantly among young people, the crack is one of the drugs that lead to total dependence, because it presents polydrug use, in which he makes use of marijuana and cocaine associated with crack, allowing the harshest and most consequential psychosocial problems. The crack consumption in the Brazilian scene in the late 80's, reached a rapid expansion, thus becoming a public health problem. Countries such as Canada, USA, Mexico, Australia and Brazil, are facing public health problems with crack use (Chaves *et al.*, 2011). The use of crack, alcohol and other drugs affect everyone, whether family members, educators, community leaders,

professionals and citizens. According to the National Policy on Drugs and Crack program, you can win and contribute to the strengthening of a network of attention to matters relating to the use of psychoactive substances in an inclusive perspective, respecting differences and accepting users and their families (Ministry of Justice and Citizenship, 2014b). Regarding harm reduction, abstinence should not be the only objective to be achieved, but take care of the peculiarities of the different aspects. We must, however, accept without judgment, encouraging their participation and engagement in the treatment process. We can also find in our culture people who make the use of drugs in the form of self-medication. It is quite common that the use of drugs, whether legal or illegal, would constitute a form of self-medication or informal prescription. Many health conditions, among them the addiction of alcohol and other substances, are stigmatized by the population, including by health professionals. The host unit was established by the Ordinance GM / MS n. 121 of January 25,

2012, provides continuous health care, operating twenty-four hours in residential and objective environment to volunteer host and ongoing care for people with needs arising from use of crack, alcohol and other drugs, both sexes, accompanied the Center for Psychosocial Care (CAPS), in a situation of social vulnerability and / or family and that require therapeutic and protective monitoring of temporary nature. The period of stay can be up to six months, according to the individual therapeutic project which is being developed and discussed with reference CAPS (Ministry of Health, 2013). The nursing care is, first of all, to meet a person, often perceived only as a patient with a particular diagnosis, is to realize the other desires, beliefs and unbelief, values, knowledge and want to exercise their profession in care drug user. Have non-judgmental attitude, seeking to identify their own beliefs, values and prejudices in relation to drug use and users, going unnoticed for the nurse, but that manifest themselves through inappropriate approaches at the time of care. Therefore, to provide assistance to drug users, not just the knowledge of the various theories is also necessary to know. Therefore, it is essential to adopt a working method capable of directing and organizing the nursing activities according to the needs of the patient. It is known that the nurse plays a key role in patient care. The patient nursing care in treatment for drug addiction is of utmost importance. In the practice of nursing is necessary to articulate the knowing and doing through scientific instruments of knowledge and observation of patient needs. By educating health in a systematic and contextualized way, the nurse contributes to the formation of citizens capable of acting in favor of improving personal health and collective levels; however it is a challenge to ensure effective learning and transforming attitudes and habits (Fink *et al.*, 2012). Responsibility of the multidisciplinary team responsible for the patient intensify, expand and diversify the following actions for the prevention, health promotion, treatment and reduction of risks and harms associated with substance use, or take care of holistically patient practicing the promotion of health of these patients. Thus, this study was aimed to report the experience in implementing a treatment plan the patient admitted to a drive host for treatment of chemical dependency.

MATERIALS AND METHODS

This was a descriptive study that aims to describe the characteristics of a population, a phenomenon or an experience. This type of research establishes relationship between variables in the analyzed object of study, the type experience report (Oliveira, 2011). Held in one host unit (chemical dependency treatment center), in Fortaleza-Ceara. Established by the Ordinance GM / MS n. 121 of 25 January 2012. Developed in August and September 2015. The subject of study was a patient admitted in the unit for treatment of chemical dependency by use of chemicals such as alcohol, crack and marijuana. Data collection was carried out through interviews, identification tool fill, assessment of mental health status and consultation in the medical record. The mental status examination was carried out carefully seeking to identify related factors and defining characteristics for the development of nursing diagnoses based on the NANDA (Noeth American Diagnosis Association). Data were grounded described in accordance with literature and research based on the theme (NANDA, 2015). The study has followed the principles considering that all progress and their progress should always respect the dignity, freedom and the autonomy of the human being, with the bioethics references to autonomy, non-

maleficence, beneficence, justice and equity, among others in order to ensure the rights and duties with respect to research participants, the scientific community and the rule contained in Resolution 510/16 of the National Health Council (CNS) in all its aspects.

RESULTS

The PRT, 34, female, brunette color, separate, lives in self-brick house with the elderly mother of 72 year old mother of three children aged 9th, 6th, 4th. Born in São Paulo, residing in Fortaleza. Was admitted this host unit on 24/03/15 coming from his residence brought by the father and sister for therapeutic treatment of dependence on psychoactive substance such as alcohol, crack and marijuana, reporting be user for 11 years and had HIV and tuberculosis, having already started treatment earlier and having subsequently abandoned. With a history of previous admissions to psychiatric hospitals. Established therapeutic communication type trust, mutual respect, listen reflectively and clarification. The patient reports that her mother has health problems is poor and is being cared for and welcomed by a neighbor. The father never lived with them in the same house, most always sought to maintain ties with the child, as well as providing financially, even with another family. The same reports also have their eating habits preserved performing six meals a day, preserved sleep.

The mental state examination: adequate overall appearance, sanitized, accept oral diet offered, ambulating, stare at the examiner, dressed properly, appropriate behavior for the situation, conscious, collaborative, active, appropriate affection to the situation, preserved will, thoughts and ideas organized, recent impaired memory, with good ability to understand, oriented. The same reports also have their eating habits preserved performing six meals a day, preserved sleep. The mental state examination: adequate overall appearance, sanitized, accept oral diet offered, ambulating, stare at the examiner, dressed properly, appropriate behavior for the situation, conscious, collaborative, active, appropriate affection to the situation, preserved will, thoughts and ideas organized, recent impaired memory, with good ability to understand, oriented. The same reports also have their eating habits preserved performing six meals a day, preserved sleep. The mental state examination: adequate overall appearance, sanitized, accept oral diet offered, ambulating, stare at the examiner, dressed properly, appropriate behavior for the situation, conscious, collaborative, active, appropriate affection to the situation, preserved will, thoughts and ideas organized, recent impaired memory, with good ability to understand, oriented. Before the interview and behavioral monitoring of the patient, can be analyzed with the information already obtained and map out a treatment plan in nursing, described in Tables 1 and 2.

DISCUSSION

The patient presented some specific diagnoses, demonstrating the need for an individualized care plan to be held a broad and holistic approach. Nursing use resources that can improve the care provided to this patient. Implementation of diagnosis and nursing intervention is an alternative to be used, making it possible to improve the quality of the expected results. Therefore, the planning of actions and the performance of the team in an interdisciplinary way in the management of chemical dependent enables a better understanding, as well as

Table 1. Diagnosis, interventions and expected results

Nursing Diagnoses	Nursing Interventions	Expected outcome
- Acute confusion risk related to substance abuse and psychoactive drugs.	- Promote communication that contributed to the integrity of the person of sense; - Provide education for family close people and people who provide assistance regarding the situation and coping methods; - Examine attitudes about confusion	- Active participation in the therapeutic meetings.
- Memory impaired related to neurological disorders, characterized by inability to recall events.	- To stimulate the memory by repeating the last thought she expressed; - To form words, simple orientation; - Encourage use of games to stimulate memory.	- Recover memory through activities proposed in order to perform.
- Anxiety related to substance use characterized by worry and nervousness	- Investigate anxiety level: mild, moderate, severe, panic; - To provide peace and comfort, staying with the patient whenever possible; - Teaching ways to control anxiety for use when stressful situations can not be avoided; - Carry out activities that reduce anxiety.	- Increase in psychological comfort.
- interrupted family processes related to situational crises characterized by changes in participation in decision-making	- Family therapy counseling; - Increase the family support system; - Enhancing the role of caregiver,	- Recovery of family values.
- dysfunctional family process related to substance abuse, characterized by frustration, dissatisfaction, fear, loss, hurt feelings, shame, anxiety, guilt, disrupted family roles, drug abuse, agitation and guilt.	- Prevent the use of drugs; - Continuing to treatment; - Working mutual goals.	- Changes in health status and social function due to substance dependence.
- paternity or maternity impaired related to drug abuse history, parental separation, characterized by unconscious control of behavior.	- To promote family integrity; - Maintenance of the family process; - To promote family-support bond; - Improve family to support coping.	- Implementation of actions to control stressors. - Best family bonding.

Source: Researcher, CE Fortaleza, 2015.

treatment plan	
Risk of acute confusion: It was working the operative group of good cohabitation with colleagues and professionals in order to work the importance of coexistence tolerance and respect. For working memory was used an interactive game of the same figures which the patient would have to find the matching pairs.	dysfunctional family process: For the work of the goals was advised that it would make a daily report its goals for the future, she plans to do to stay clean and recover the confidence of the family.
impaired memory: Through fun activities, such as memory game and crossword puzzles.	Parenthood: a diary was performed where the patient reported their anxieties with regard to the family and worked as it will do to get their children back.
Anxiety: Working ways to control anxiety as: download the shoulder, look up, control breathing, music, relaxation exercise and visualize images or situations that bring you pleasure.	Memory game: The game consisted of photography and animal figures. Initially reported not, but in the end the result was quite satisfactory. On the same day she even played at night with other colleagues, reporting to like a lot.
family processes: worked within the operative groups the importance of family, her role in the treatment and the importance of rescuing values.	Hunting words: For her to work your memory, concentration, attention, among other points assessed. She also joined very well the suggestion saying only that caused him headaches. However the next day the same showed that he had done enough showing interest in what was proposed. Daily: also it was given a diary for her to write all that has been done in the day, their anguish, fear, happiness and goals. Also what she wants to remember since it reported not remember very well of recent things. However the day before the daily had not been completed, and the same is reported to have forgotten.

a quality nursing care and humane. During hospitalization, the patient undergoes physical and psychological changes, and nursing plays an important role in health promotion, playing a holistic care. The relationship between nursing and patient describes about the key role played by the team during this recovery process of the same.

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Conclusion

The nurse plays a fundamental role in assisting the patient hospitalized for treatment of chemical dependency, for this individual requires individualized care, which make them dependent on nursing care. Nursing care should be planned efficiently. It is believed that the realization of systematization of nursing care by academic can help patients in the rescue of

the social bond and its individuality, since arouse feelings of contentment and joy that have been deleted, forgotten or ignored during hospitalization. Thus, the perception of direct contact with the patient was very important in the teaching - learning process, while the development of the proposed activities for the patient was instrumental in the evolution of his treatment, having a satisfactory outcome regarding the acceptance and development activities.

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