

NURSING DIAGNOSIS OF FATIGUE IN PEOPLE WITH VENOUS ULCER: cross-sectional study.

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Introduction: The concept of quality of life runs through many nuances, ranging from social to environmental, psychological, cultural and spiritual factors. However, this quality can be uninterruptedly affected if the individual has a chronic disease, such as venous ulcers (UV). This pathology affects specific age groups and socioeconomic levels, and, if associated with other chronic diseases, the treatment becomes even more complex. As well as the risk of falls, chronic sadness and risk of situational low self-esteem, fatigue is a condition and nursing diagnosis often found in people affected by venous problems. This involvement mainly reflects in the abandonment of daily activities, work and early retirement. Thus, the definition of therapeutic strategies appropriate to the social context of each individual is necessary to provide an improvement in the quality of life and, consequently, in financial resources, as well as in reducing the chances of these patients' retirement due to disability.

Results:Of the 54 respondents, more than half (57.4%) had a diagnosis of fatigue. Within this percentage of people with venous ulcers diagnosed with fatigue, the factors related to this diagnosis listed were: 57.4% had one or more physiological conditions that aggravated the venous ulcer, 46.3% experienced stressful events, 48, 1% suffered from anxiety and 50% had low fitness. The defining characteristics of this diagnosis identified among those surveyed were: increase in physical symptoms (50% of cases), tiredness (46.3%), impaired ability to perform routines (55.6%) and insufficient energy (29.6%).

Objective: To identify the related factors and defining characteristics of the nursing diagnosis of fatigue in people with venous ulcers.

Nursing Diagnosis	Related factors	Percentage
Fatigue	Lack of fitness	50%
	Anxiety	48,1%
	Stressors	46,3%

Methods: This research was part of a larger project to identify nursing diagnoses in people with venous ulcers. This is a crosssectional study with a quantitative data approach. It was carried out in the family health strategy of Parnamirim/Rio Grande do Norte, Brazil, from August to October 2017. Visits were made with nurses and health agents to identify the number of people with active venous ulcers in the population assigned to units. A population of 62 people was identified and after performing the sample calculation, the number ended up in 54. It were used for data collection: sociodemographic and health characterization form, short form 36, Charing Cross Venous Ulcer Questionnaire and instrument with the standardized American languages of nursing diagnoses (NANDAI). Based on the responses of the variables of the instruments applied and the clinical reasoning performed by the researchers, nursing diagnoses were established. The project was approved by the ethics committee (CAAE nº 65941417.8.0000.5537).

Conclusion: It was identified as factors related to the diagnosis of fatigue in people with VU as the individual's own physiological conditions, stressful events, anxiety and low physical conditioning. Linked to this, the increase in physical symptoms, tiredness, impaired ability to perform routines and insufficient energy were aspects that enabled the diagnosis of fatigue to be established. Therefore, there is a need for nurses to act with autonomy through systematic strategies and interventions that help people with venous ulcers to live healthier, keeping them more active, so that the actions do not aim only at absence and/or control injury, but above all encompass physical, mental and social well-being.