Review of Contemporary Philosophy
ISSN: 1841-5261, e-ISSN: 2471-089X
Vol 22 (1), 2023
Pp 2546 - 2560

Heart Failure and Coronary Herat Diseases: Nursing Interventions and Care Plans-An Updated Review

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Abstract:

Background: Coronary heart disease (CHD) remains a leading cause of morbidity and mortality worldwide, requiring comprehensive care and nursing interventions to manage its complexities. Nurses play a pivotal role in the early identification, prevention, and management of CHD through various strategies, including health promotion, patient education, and individualized care plans.

Aim: This review aims to examine the role of nursing interventions in the management of CHD, highlighting current best practices, emerging trends, and the critical nursing contributions to improving patient outcomes, particularly through early detection, medication management, and psychosocial support.

Methods: This review synthesizes current literature on nursing care for CHD patients, with a focus on nursing assessments, pharmacological management, cardiac rehabilitation, and lifestyle modifications. A comprehensive evaluation of risk assessment tools, patient education strategies, and psychosocial support mechanisms is also included.

Conclusion: Effective nursing interventions are essential in managing CHD by addressing both the physiological and psychological aspects of the disease. Nurses contribute significantly to early detection through thorough assessments, medication administration, and education on lifestyle modifications. Furthermore, nurses' involvement in cardiac rehabilitation programs, providing emotional and psychological support, and promoting adherence to treatment regimens are crucial for improving the quality of life and reducing the incidence of adverse cardiac events. Holistic care, which includes continuous

monitoring and personalized interventions, remains key to improving patient outcomes in CHD management.

Key Words: Coronary heart disease, nursing interventions, patient education, cardiac rehabilitation, medication management, psychosocial support, lifestyle modifications, nursing care plans.

Received: 13 october 2023 **Revised:** 27 November 2023 **Accepted:** 11 December 2023

Introduction:

Coronary heart disease (CHD) is a prevalent and life-threatening condition that demands meticulous nursing care [1][2]. Nurses play a pivotal role in the early identification and prevention of CHD. Their responsibilities encompass conducting comprehensive assessments, monitoring vital signs, and evaluating risk factors to identify individuals at heightened risk for the disease [3]. Through health promotion and education, nurses empower patients by imparting knowledge regarding lifestyle changes, such as adopting a heart-healthy diet, engaging in regular physical activity, and managing stress. By implementing these preventive measures, nurses contribute significantly to reducing the incidence of CHD and its related complications [3][4][5]. Moreover, nurses collaborate with healthcare teams to develop individualized care plans, including medication management, cardiac rehabilitation (CR), and scheduling regular follow-up appointments [6][7][8][9]. Additionally, they monitor patient symptoms, administer prescribed medications, and educate patients on the purpose, dosage, and potential side effects of their medications [6]. Nurses offer continuous support and counseling, addressing patient concerns, promoting adherence to treatment plans, and encouraging healthy lifestyle choices. They vigilantly track patient progress, enabling the early identification of changes or complications, thus facilitating timely interventions to prevent further deterioration [10][11][12][13][14]. Furthermore, nursing care is essential in providing emotional and psychological support to patients. The diagnosis of CHD often evokes feelings of fear, anxiety, and stress, adversely affecting patients' mental health [15][16]. Nurses provide compassionate and empathetic care, actively listening to patients' concerns and addressing their emotional needs. They also offer guidance on coping strategies, fostering resilience and a positive outlook [4]. Additionally, nurses facilitate support groups or refer patients to appropriate resources, thereby promoting a sense of community and aiding patients in navigating the emotional challenges associated with the disease [7]. Through holistic care, nurses contribute substantially to enhancing patients' overall well-being and improving their quality of life (QoL) despite the challenges posed by the disease [17][18]. In light of the significant impact of nursing care on CHD patients, we reviewed current literature on the role of nurses in managing CHD and the emerging trends in nursing interventions.

Pathophysiology and Clinical Presentation of CHD

The pathogenesis of CHD is primarily linked to atherosclerosis, inflammation, and oxidative stress [19]. Atherosclerosis, a chronic inflammatory condition associated with lipid metabolism, leads to plaque formation in the coronary arteries, which obstructs blood flow and precipitates the onset of CHD. The oxidation of low-density lipoprotein (LDL) cholesterol plays a central role in the initiation and progression of atherosclerosis [19][20][21]. Dietary factors such as high intake of saturated fats, trans fats, and cholesterol contribute to the development of atherosclerosis [22][23]. Furthermore, psychiatric conditions, including depression, anxiety, and stress, are significant risk factors for CHD. A range of other risk factors, including poor diet, physical inactivity, smoking, stress, and genetic predisposition, are also implicated in the development of CHD [22][23]. The clinical presentation of CHD can vary, with common symptoms including chest pain, shortness of breath, and fatigue [19]. However, CHD may also present asymptomatically, a condition known as silent ischemia, which may lead to more severe cardiovascular events [24]. Consequently, early detection and management of risk factors are critical for preventing the onset and progression of CHD [25].

Risk Assessment and Patient Education

Comprehensive risk assessment tools are crucial for identifying patients at risk for CHD and formulating appropriate treatment strategies [26]. These tools also empower patients by providing them with a clear understanding of their risk factors, motivating them to make positive lifestyle changes and adhere to prescribed treatment regimens [26][27]. Effective patient education involves multiple strategies, such as promoting resourcefulness, providing patient-centered education, utilizing digital health tools, offering genetic counseling, and maintaining regular communication and support [4][5]. Teaching resourcefulness is particularly effective in managing mental health issues such as depression and stress, which are common among CHD patients [12][15][28]. Patient-centered education, which is grounded in evidence and customized to meet the individual needs and preferences of patients, is essential for improving patient outcomes [29][30]. Digital health technologies, including text messaging services, mobile applications, and wearable devices, have proven effective in supporting patient education for individuals with cardiovascular diseases (CVDs) [14][31][32][33]. Additionally, genetic counselors play a crucial role in the care of patients with CHD, offering insights into genetic risk factors and providing tailored education [34]. Ongoing communication and support are vital for ensuring that patients fully comprehend their condition, adopt necessary lifestyle changes, and ultimately improve their quality of life [7][25].

Nursing Assessment and Diagnosis

Effective nursing assessment and diagnosis are pivotal in delivering optimal care for individuals diagnosed with coronary heart disease (CHD). A comprehensive nursing assessment involves a meticulous review of the patient's medical history, a thorough physical examination, evaluation of mental health status, laboratory results, and an analysis of lifestyle and dietary habits [8][35][36]. Such assessments enable nurses to identify potential health risks or existing conditions, forming the foundation for a personalized nursing care plan that addresses the unique needs of each patient. This individualized approach ensures that interventions are specifically tailored to meet the distinct requirements of the patient [8].For example, research demonstrates that a personalized educational plan focused on health promotion can significantly improve the quality of life (QoL) for patients with CHD [37]. This educational approach is designed to enhance or modify lifestyle behaviors conducive to cardiac health while promoting patient empowerment [37][38]. Nurses may also utilize tools such as food frequency questionnaires to assess dietary habits and identify areas where dietary modifications are needed [37]. Furthermore, mindfulness-based interventions have proven effective in alleviating symptoms of depression and stress in patients [37].

Identifying and classifying nursing diagnoses pertinent to CHD are fundamental for delivering effective and targeted patient care [36][39]. A key nursing diagnosis associated with CHD is *decreased cardiac output* [8][23], which is indicative of a compromised heart function leading to insufficient blood circulation [35]. Nursing interventions for this diagnosis include the administration of medications that enhance heart function, the promotion of physical activity within safe limits, and patient education focused on lifestyle modifications aimed at reducing cardiac workload [41]. Another crucial nursing diagnosis is *risk for impaired tissue perfusion*, which pertains to patients at risk of insufficient blood flow to specific tissues due to narrowing or obstruction of blood vessels [39]. Nurses assess this condition by evaluating peripheral pulses, skin color, temperature, and capillary refill time to determine the status of tissue perfusion [8][36]. Preventive strategies for this diagnosis include the management of blood pressure and cholesterol levels, promoting smoking cessation, educating patients on a cardiac-healthy diet, and ensuring adherence to prescribed medications, all of which contribute to reducing the risk of further tissue damage and improving overall tissue perfusion in patients with CHD [35].

Pharmacological Management and Nursing Implications

The management of CHD necessitates a comprehensive, multifaceted treatment strategy, with pharmacological interventions playing a critical role in alleviating symptoms, preventing complications, and enhancing overall cardiac health [43][44][45]. The choice of medications prescribed for CHD is contingent upon individual patient characteristics, including symptoms, risk factors, and the presence of

other cardiac conditions [45]. Medications are tailored to each patient's specific needs, with regular monitoring and follow-up care being essential for ensuring the effectiveness of treatment and optimizing outcomes for patients with CHD [8][45].

Commonly prescribed medications for CHD include beta-blockers, which reduce the heart's workload by lowering heart rate and blood pressure, thus decreasing the risk of heart attack and complications; ACE inhibitors and angiotensin II receptor blockers (ARBs), which lower blood pressure and are typically recommended for patients with hypertension or heart failure; antiplatelet drugs, which prevent blood clot formation, thereby reducing the risk of heart attack and stroke; and statins, which lower serum cholesterol levels and mitigate the risk of cardiovascular events [43][45]. Anticoagulants are prescribed to prevent blood clots in patients at high risk, while nitroglycerin is utilized to relieve chest pain by enhancing blood flow to the heart. Calcium channel blockers promote vasodilation and are particularly useful for managing hypertension or angina [43][45]. Nurses are integral to the safe administration and monitoring of medications prescribed for CHD. They must consider various critical aspects, such as assessing for potential side effects, monitoring the therapeutic efficacy of treatments, and ensuring patient compliance with prescribed regimens. Regular evaluation and adjustment of treatment plans are necessary to address the dynamic needs of patients and optimize their cardiac health outcomes.

Patient Education

Nurses are entrusted with the responsibility of educating patients about the significance of adhering to prescribed medication regimens, which includes instructions on correct dosage, frequency, and timing [4]. Furthermore, it is imperative that patients are informed about potential side effects and adverse reactions associated with their medications. This educational process should be delivered in a manner that is clear, concise, and tailored to the patient's level of comprehension [46].

Medication Reconciliation: Nurses play a crucial role in ensuring that patients' medication lists are accurate and current, encompassing prescribed medications, over-the-counter drugs, and herbal supplements [45]. This process involves obtaining a comprehensive medication history and addressing any discrepancies through a thorough reconciliation procedure [45].

Medication Administration: In accordance with the "six rights" of medication administration—right patient, right medication, right dose, right route, right time, and right documentation—nurses are responsible for the safe administration of medications as prescribed. This task requires meticulous attention to detail and strict adherence to established protocols [47].

Monitoring Adverse Effects: Nurses are responsible for vigilantly monitoring patients for any potential side effects or adverse reactions to medications. This includes observing changes in vital signs, laboratory values, and physical symptoms such as dizziness, nausea, or rashes [8]. Prompt reporting of any adverse reactions to the healthcare team is essential to ensure timely intervention [40].

Compliance Monitoring: Another key responsibility of nurses is to assess patient adherence to prescribed medication regimens. This includes identifying any barriers to compliance and providing the necessary support and education to improve medication adherence [46]. This process should be carried out in close collaboration with the patient and the broader healthcare team [48].

Collaboration with the Healthcare Team: Nurses collaborate closely with a multidisciplinary team of healthcare professionals, including physicians, pharmacists, and other specialists [9]. Such collaboration is vital to ensure that patients receive effective and appropriate medication management [49].

Extended Nursing Interventions: Extended nursing interventions, which involve continuous and comprehensive care, have been demonstrated to enhance medication adherence and promote patient recovery through the reinforcement of appropriate behaviors [39][46]. These interventions are characterized by ongoing support and education, as well as sustained collaboration with the healthcare team [48].

Cardiac Rehabilitation (CR) and Lifestyle Modifications

Cardiac rehabilitation (CR) and lifestyle modifications are fundamental in enhancing cardiovascular fitness, mitigating risk factors, improving psychological well-being, and promoting long-term health in patients with coronary heart disease (CHD) [32][50]. Phase I of CR, which focuses on education, counseling, physical exercise, breathing exercises, chest physiotherapy, stretching exercises for respiratory muscles, and gradual mobilization, is an essential component of CHD management [51][52]. Nurses are involved in a variety of CR aspects, including patient assessment, education, and psychosocial support. They are also responsible for ensuring continuity of care across different healthcare settings and providing both informational and relational continuity to ensure that patients receive coherent, logical, and timely care [53][54][55]. Nurses play a pivotal role in patient education by helping patients comprehend their condition, treatment options, and the lifestyle changes necessary for optimal recovery [3][53]. They also monitor and assess patients' progress throughout the CR program, which includes tracking attendance, evaluating self-efficacy in health-related behaviors, and identifying barriers to adherence [7][53]. Additionally, nurses collaborate with other healthcare professionals to develop individualized CR plans for each patient [48]. They can also enhance CR program enrollment and adherence by implementing evidence-based strategies at the institutional level, facilitating patient referrals to CR programs, offering ongoing support, and addressing any barriers to participation [53]. Furthermore, nurses can contribute to the design and implementation of hybrid CR programs, which combine facility-based rehabilitation with virtual and/or remote sessions, thus increasing patient accessibility and convenience [56].

Psychosocial Support and Patient Counseling

Patients with coronary heart disease (CHD) must prioritize their mental health, as it has a direct impact on the progression of their condition and overall quality of life (QoL) [15]. Research has consistently shown that psychological interventions, such as patient education, positive psychology-based approaches, and cognitive-behavioral therapy (CBT), can enhance mental health and well-being in individuals with CHD [27][46][57][58][59][60]. Additionally, family support plays a pivotal role in facilitating psychological adjustment and improving the QoL of CHD patients [10][15]. Psychological interventions, including counseling (e.g., spiritual and genetic counseling), can also help patients adopt health-promoting behaviors and improve self-regulation [7]. While some studies suggest that religious, spiritual, and existential well-being may not be directly related to CHD progression [61], other research indicates that self-control is a significant factor in promoting health behaviors. Li et al. [62] found that self-control indirectly and positively influenced health-promoting behaviors in CHD patients, suggesting that interventions aimed at enhancing self-regulation could be beneficial for this population.

Nursing Care During Acute Coronary Syndrome (ACS)

Nursing interventions and management strategies are essential to patient care and recovery during acute coronary events, particularly in conditions such as ST-segment elevation myocardial infarction (STEMI) and non-ST-segment elevation acute coronary syndrome (NSTE-ACS) [63][64]. The initial assessment and continuous monitoring of patients are critical to identify risk factors, assess chest pain, and interpret electrocardiogram findings [65]. Ongoing monitoring of vital signs, including blood pressure, heart rate, and oxygen saturation, is vital for patient management. Additionally, the timely administration of appropriate medications is a key intervention in the management of acute coronary events [8][66]. For patients with STEMI, rapid reperfusion therapy is necessary to limit myocardial damage and improve clinical outcomes. Various coronary revascularization strategies can be employed, depending on the patient's condition and hospital protocols, including early and/or delayed invasive or conservative approaches [45]. Nursing interventions for STEMI and NSTE-ACS include initial assessment, continuous monitoring, medication administration, reperfusion therapy, education and counseling, management of complications, and coordination of care. These actions are fundamental in ensuring optimal patient care and improving clinical outcomes [8][66]. Furthermore, emergency response protocols and immediate care considerations are crucial for managing patients with CHD, as they help reduce complications and enhance recovery [67]. Nurses should be able to recognize the typical symptoms of CHD and promptly respond to any sudden changes in a patient's condition. This involves activating the emergency response team,

initiating basic life support, administering emergency medications, and providing continuous monitoring and evaluation. Emotional support should also be provided, and collaboration with the healthcare team is essential for ensuring comprehensive care and successful outcomes [39][47][67].

Advances in Nursing Technology and Digital Health

Emerging technologies have the potential to profoundly influence nursing care for patients with coronary heart disease (CHD), resulting in improved patient outcomes, enhanced self-management, and more efficient communication between patients and healthcare providers [31][33][35][55][68].

Electronic Health Records (EHRs)

EHRs provide nurses with the ability to access and document patient information electronically, facilitating seamless communication and continuity of care. These systems enable nurses to efficiently retrieve and update patient data, while also collaborating with other healthcare professionals, ensuring a comprehensive and coordinated care approach for CHD patients [31].

Mobile Health (mHealth) Applications

Mobile health applications tailored to CHD management empower nurses to deliver personalized care and support remotely. These applications offer patients educational resources on medication adherence, lifestyle changes, and symptom management [69]. Additionally, nurses can use mHealth applications to remotely monitor patients' vital signs, track medication compliance, and provide timely feedback and interventions. As a result, these applications not only promote patient engagement and self-management but also contribute to improved health outcomes [70][71].

Remote Patient Monitoring

Through the integration of remote monitoring technologies, such as wearable devices and sensors, nurses can continuously track patients' vital signs, activity levels, and symptoms from a distance. The real-time transmission of data allows nurses to detect early signs of cardiac events, such as fluctuations in heart rate and blood pressure [12]. With this capability, nurses can intervene proactively, provide guidance, and escalate care as needed, thereby preventing complications and reducing the likelihood of hospital readmissions [9][12][14].

Telehealth and Virtual Visits

Telehealth platforms enable nurses to conduct virtual consultations, thereby improving access to care and eliminating travel barriers for patients. These platforms allow nurses to assess symptoms, conduct medication reviews, and provide guidance on lifestyle modifications [9][12]. Furthermore, telehealth supports regular follow-ups, strengthens communication between patients and healthcare providers, and ensures continuity of care, ultimately enhancing patient satisfaction [9][12][14].

Clinical Decision Support Systems (CDSSs)

Clinical Decision Support Systems (CDSSs) are software tools designed to offer evidence-based recommendations and alerts that guide nurses in making informed clinical decisions. In the context of CHD care, CDSSs assist with medication dosing, help identify potential drug interactions, and provide treatment protocols based on individual patient factors [72][73]. These systems are instrumental in promoting standardized, safe, and efficient nursing practices, which reduce the risk of errors and improve patient outcomes [72][73].

Health Education, Augmented Reality (AR), and Virtual Reality (VR)

Nurses can leverage VR to create immersive and interactive educational experiences for CHD patients. Augmented Reality (AR) and VR simulations can demonstrate the effects of lifestyle choices, teach medication administration techniques, and encourage adherence to treatment plans. By utilizing VR, nurses can significantly enhance health education and empower patients to take an active role in their self-care [74][75][76][77].

Artificial Intelligence (AI)

Artificial intelligence (AI) encompasses various methodologies that enable computers to mimic human cognitive abilities, such as reasoning, communication, learning, and decision-making [78][79]. AI subfields, including robotics, machine learning, deep learning, and natural language processing, have shown considerable promise in improving CHD management. Integration of AI into nursing care has led to advancements in decision-making, patient monitoring, and diagnostic capabilities [79]. Deep learning techniques, in particular, have been used to predict potential complications and enhance the quality of nursing care for CHD patients [81].

Interdisciplinary Collaboration and Care Coordination

A growing body of research highlights the significant benefits of interdisciplinary collaboration on patient outcomes and the overall quality of care for individuals with CHD [49][82]. Effective teamwork among healthcare professionals fosters better adherence to treatment protocols, improves medication management, and enhances patient education [83]. Williams et al. [49] demonstrated that interdisciplinary collaboration in CHD care reduces hospital readmissions, improves patient satisfaction, and enhances patient empowerment. These findings underscore the critical role of collaborative teamwork in delivering comprehensive, patient-centered care. As such, fostering interdisciplinary relationships is crucial for optimizing CHD management and improving patient outcomes [49]. Effective communication and collaboration between healthcare professionals require strategic approaches to ensure the highest possible patient outcomes. One such strategy involves utilizing EHRs, which provide a centralized platform for healthcare professionals to access patient data, thus facilitating communication and reducing errors, ultimately improving patient care [84]. Another strategy is the establishment of regular team meetings, where healthcare professionals can discuss patient care, share insights, and coordinate their efforts. These meetings also provide an opportunity to identify potential challenges and address them proactively [85][86].

Ethical Considerations in CHD Nursing Care

Healthcare professionals involved in CHD care often face ethical dilemmas that require thoughtful consideration. One of the most significant ethical challenges is obtaining informed consent, particularly for invasive procedures such as angioplasty, which carry inherent risks. It is essential that patients fully understand the risks and benefits of these procedures before providing consent [87][88]. Cultural and religious beliefs may also influence patients' decision-making processes. Healthcare providers must offer culturally sensitive care that respects these beliefs, ensuring that the patient's autonomy is maintained while providing appropriate treatment [65][89]. Another ethical issue in CHD care is resource allocation. As CHD is a chronic condition requiring long-term management, healthcare resources are often stretched, necessitating difficult decisions about the allocation of treatments and interventions. Healthcare professionals must balance individual patient needs with broader system-level considerations to ensure fair and equitable distribution of resources [90][91]. In light of these challenges, healthcare professionals must be well-versed in ethical principles and values. Ongoing education and training are crucial to help them navigate emerging ethical issues in CHD care [92]. Furthermore, healthcare organizations can establish policies and procedures to guide ethical decision-making in clinical settings [88][92]. Studies have shown that many individuals with CHD possess a limited understanding of their condition and available treatment options, often due to factors such as low health literacy, limited access to healthcare, and communication barriers [87][88]. To respect patients' autonomy and ensure that their preferences are honored, healthcare professionals must adopt a patient-centered approach, which includes providing comprehensive information about the patient's condition, discussing treatment risks and benefits, and facilitating conversations about end-of-life care and advance care planning. This approach should also consider cultural, religious, and social factors that may influence patient decisions [93][94][95].

Conclusion:

Coronary heart disease (CHD) is a chronic and life-threatening condition that requires meticulous care from healthcare providers, particularly nurses, who are integral to the management and prevention of this disease. Nurses are often the first line of defense in detecting early signs of CHD and assessing risk factors through comprehensive evaluations. Their expertise in conducting thorough assessments, monitoring vital signs, and evaluating lifestyle factors helps identify individuals at risk, enabling early intervention to prevent the onset or progression of the disease. Nursing interventions in CHD care extend beyond physical monitoring to include health promotion activities, education, and emotional support. By educating patients on lifestyle changes—such as adopting a heart-healthy diet, increasing physical activity, and reducing stress—nurses empower patients to take an active role in their health. Additionally, patient-centered education, particularly through the use of digital health tools, has proven effective in improving patient engagement and adherence to treatment regimens. Nurses also play a critical role in medication management, ensuring that patients understand the purpose and potential side effects of prescribed medications, thereby improving treatment adherence. A vital aspect of CHD care is cardiac rehabilitation (CR), which focuses on enhancing cardiovascular fitness and managing risk factors. Nurses are pivotal in supporting patients throughout the CR process, offering counseling, monitoring progress, and addressing barriers to adherence. Furthermore, the inclusion of psychosocial interventions is crucial, as patients with CHD often experience anxiety and depression, which can negatively impact their physical health. Psychological support, through interventions such as cognitive-behavioral therapy and counseling, has been shown to improve patients' mental well-being, thus contributing to better overall outcomes. In conclusion, nurses play a multifaceted role in managing CHD by addressing the physical, emotional, and psychological needs of patients. Their involvement in early detection, education, rehabilitation, and psychosocial support is essential for improving patients' quality of life, promoting recovery, and reducing the risk of further complications. The integration of these nursing interventions into CHD care plans contributes to enhanced patient outcomes and better management of this pervasive disease.

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شل القلب وأمراض الشرايين التاجية: التدخلات التمريضية وخطط الرعاية - مراجعة محدثة

الملخص:

الخلفية :تعد أمراض الشرايين التاجية (CHD) من الأسباب الرئيسية للمراضة والوفيات على مستوى العالم، مما يتطلب رعاية شاملة وتدخلات تمريضية لإدارة تعقيداتها. يلعب الممرضون دورًا حيويًا في التعرف المبكر، الوقاية، وإدارة أمراض الشرايين التاجية من خلال استراتيجيات متنوعة تشمل تعزيز الصحة، التثقيف الصحي للمرضى، وخطط رعاية فردية .

الهدف :تهدف هذه المراجعة إلى استعراض دور التدخلات التمريضية في إدارة أمراض الشرايين التاجية، مع التركيز على أفضل الممارسات الحالية، الاتجاهات الناشئة، والمساهمات الأساسية للممرضين في تحسين نتائج المرضى، خاصة من خلال الكشف المبكر، إدارة الأدوية، والدعم النفسي والاجتماعي.

الطرق :تلخص هذه المراجعة الأدبيات الحالية حول الرعاية التمريضية لمرضى الشرايين التاجية، مع التركيز على التقييمات التمريضية، إدارة الأدوية، التأهيل القلبي، وتعديلات نمط الحياة. كما تتضمن تقييمًا شاملاً لأدوات تقييم المخاطر، استراتيجيات التعليم الصحي للمرضى، وآليات الدعم النفسي والاجتماعي.

الخاتمة :تعد التدخلات التمريضية الفعالة أساسية في إدارة أمراض الشرايين التاجية من خلال معالجة الجوانب الفسيولوجية والنفسية للمرض. يساهم الممرضون بشكل كبير في الكشف المبكر من خلال التقييمات الدقيقة، إدارة الأدوية، والتعليم حول تعديلات نمط الحياة. علاوة على ذلك، يعد انخراط الممرضين في برامج التأهيل القلبي، وتقديم الدعم العاطفي والنفسي، وتعزيز الالتزام بأنظمة العلاج أمرًا بالغ الأهمية لتحسين نوعية الحياة وتقليل حدوث الأحداث القلبية السلبية. تظل الرعاية الشمولية، التي تشمل المراقبة المستمرة والتدخلات المخصصة، أساسية لتحسين نتائج المرضى في إدارة أمراض الشرايين التاجية.

الكلمات المفتاحية :أمراض الشرايين التاجية، التدخلات التمريضية، التعليم الصحي للمرضى، التأهيل القلبي، إدارة الأدوية، الدعم النفسي والاجتماعي، تعديلات نمط الحياة، خطط الرعاية التمريضية.