

NURSES DIARY



DIL Walk
from our heart to yours

The two main challenges I have encountered as a Heart failure Nurse is Language barrier which may lead to miscommunication and compromise the patient-nurse relationship and non-adherence with medication which breaks the continuity of care and increases the risk for hospitalization.

LANGUAGE BARRIER.

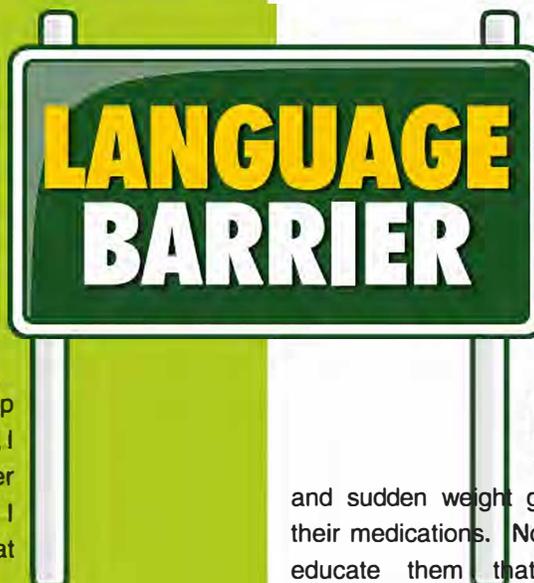
Most of the patients I see here in our CHARM clinic belongs to the South Asian population. Prior to seeing me for new consults, non-English speaking patients are advised to bring a family member who can translate, but despite of these instructions, some of them still don't bring someone with them, and it makes it hard for me to assess and educate them. There are times when, I have called my co-worker to help translate, and when the patient got home, I received a call from a family member asking me details about the visit, which I think is time-consuming as I have to repeat everything to them again.

I think, family members should be educated on how serious Heart Failure is, if not managed properly. So when I talk to family members over the phone or at the clinic, I always tell them to be with the patient during clinic visits, so that they can be educated as well on how to prevent having heart problems- (limiting salt and oil usage, healthy food choices, exercise etc.) and also to help assist their loved ones who is suffering from heart failure.

NON-ADHERANCE WITH MEDICATION.

Nonadherence with medication regimens may result in increased use of medical resources, such as physician visits, laboratory tests, unnecessary additional treatments, emergency department visits, and hospital or nursing home admissions. Nonadherence may also result in treatment failure.

Most of the patients think that if they are asymptomatic, meaning not having any symptoms of heart failure such as shortness of breath, swelling in feet and legs, lack of energy, difficulty lying flat



and sudden weight gain means that they can stop taking their medications. No matter how repetitive I am, I always educate them that these cardiac medications are prescribed not only when they are having symptoms, but it also prevents them from having worse symptoms which may lead to hospitalization.

Hospitalization can be prevented only if Heart Failure is being managed properly and that includes calling our clinic once they get early symptoms and not to wait for it to get worse, coming to scheduled appointments with me every 2 months, follow-up with Cardiologist in 3-6 months and follow our healthcare team's recommendations.

Hundreds of thousands of Canadians are living with heart failure. It's a complicated, fatal and misunderstood condition. Almost everyone with heart disease will eventually experience heart failure. It leaves patients and their families exhausted and overwhelmed, and puts serious strain on our healthcare system. As for my opinion, being a nurse working in a community Heart Function Clinic which is run on a charitable basis, the government can play a big part in helping us promote awareness on heart disease through funding- we can arrange seminars, exercises, consultations, etc.