

CHEERWAY CARE, INC.

IN-SERVICE on Chronic Diseases & Care for the Dying (February 27, 2009 7pm-9pm: Potomac Valley Nursing Center)

CHRONIC DISEASES

Definition: Chronic diseases are diseases that are long-lasting or recurrent. The term 'chronic' describes the course of the disease or its rate of onset and development. A chronic course is distinguished from a recurrent course, recurrent diseases relapse repeatedly with periods of remission in between. As an adjective, 'chronic' can refer to a persistent and lasting medical condition.

Many chronic diseases require chronic care management for effective long-term treatment.

Prevalence: Nearly one in two Americans (approx. 133 million) has a chronic medical condition of one kind or another. However, most of these people are not actually disabled, as their medical conditions do not impair normal activities.

FOUR THINGS YOU NEED TO KNOW ABOUT CHRONIC DISEASES:

1. While some chronic diseases such as diabetes and arthritis have been known for centuries, infectious diseases dominated the health scene until the 19th century.
2. Chronic diseases have a prolonged course of illness. Most chronic diseases do not resolve spontaneously and are not cured completely. Some can be immediately life-threatening such as heart attack and stroke others are often serious, including various cancers, depression and diabetes.
3. Chronic diseases contribute much to illness, disability and mortality.
4. Chronic diseases are largely preventable.
 - Adopting healthy behaviors such as controlling body weight, eating nutritious foods, avoiding tobacco use, controlling alcohol consumption and increasing physical activity can prevent or delay the development of many chronic diseases.

MOST COMMON CHRONIC DISEASES:

1. **CORONARY HEART DISEASE (CHD):** also known as 'ischemic heart disease'
 - refers to problems associated with a reduced supply of blood to the heart muscle
 - caused by atherosclerosis (thickening of the inner wall of the arteries)
 - 2 Major Forms:
 - a. Acute myocardial infarction (heart attack)
 - when a plaque in a coronary artery ruptures leading to a blood clot that blocks blood flow to the heart
 - life threatening
 - b. Angina (temporary chest pain) – a severely narrowed coronary artery cannot meet a temporary demand to increase blood flow to the heart
 - may be caused by physical activity or strong emotion
- **MODIFIABLE RISK FACTORS:**
 - a. Tobacco smoking
 - b. Physical activity

- c. Alcohol misuse
- d. Poor nutrition
- e. High blood pressure
- f. Excessive body weight
- g. Diabetes

2. STROKE: also known as cerebrovascular disease

- recurs when an artery supplying blood to the brain suddenly becomes blocked or bleeds.
- Types:
 - a. Ischemic – an artery supplying blood to a part of the brain suddenly becomes blocked
 - b. Hemorrhagic – artery supplying blood to a part of the brain bleeds
 - c. Transient Ischemic Attack (TIA) – a “mini stroke” resulting from a temporary reduction of blood supply to a part of the brain
- RISK FACTORS:
 - a. High blood pressure (HBP)
 - b. High blood cholesterol
 - c. Tobacco smoking
 - d. Alcohol misuse
 - e. Excessive body weight
 - f. Physical activity
 - g. Poor diet and nutrition
 - h. Diabetes

3. LUNG CANCER: malignant tumor of the lungs

- Begins in cells that line the airways and often invade adjacent tissues or spreads elsewhere in the body before symptoms are noticed.
- RISK FACTORS:
 - a. Tobacco smoking
 - b. Environmental tobacco smoke
 - c. Exposure to environmental agents such as asbestos and radon

4. COLORECTAL CANCER (CRC): malignant tumors of the colon and rectum

- Develops from abnormal growths known as ‘polyps’ on the internal lining of the colon and rectum
- Symptoms include:
 - a. Blood in feces
 - b. Anemia
 - c. Stomach discomfort
 - d. Change in bowel habits
 - e. Unaccountable weight loss
- RISK FACTORS:
 - a. Poor nutrition
 - b. Physical activity
 - c. Excess weight
 - d. Family history
- A healthy diet, high in fiber and low in fat is highly recommended to prevent CRC.

5. **Depression:** An affective (mood) disorder characterized by feelings of sadness, loss of interest or pleasure in nearly all activities, feelings of hopelessness, suicidal thoughts or self-blame.

- RISK FACTORS:
 - a. Family history
 - b. Being an adolescent or adult female
 - c. Pre-existing anxiety disorder
 - d. Negative thought patterns
 - e. Avoidant coping style
 - f. Poverty or unemployment
 - g. Conflict and poor parenting practices
 - h. Child abuse

6. **DIABETES:** increased blood sugar level

- 3 Types:
 - a. Type 1 – marked by a total lack of insulin
 - b. Type 2 – marked by reduced levels of insulin
 - c. Gestational – occurs during pregnancy, disappears after delivery

7. **ASTHMA:** marked by episodes of wheezing, chest tightness and shortness of breath associated with widespread narrowing of the airways within the lungs and obstruction of airflow

- The underlying pattern is chronic inflammation of the air passages triggered by the following:
 - a. Exercise
 - b. Viral infections
 - c. Allergies
 - d. Environmental irritants
 - e. Food chemicals
- Symptoms are usually reversible, either spontaneously or with treatment

8. **CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD):** long-term lung disease marked by shortness of breath that initially occurs with exertion and becomes progressively worse over time

- Most commonly arises from the gradual destruction of lung tissue due to the unopposed action of enzymes stimulated by inhaled irritants. This destruction of lung tissues known as emphysema makes the lungs floppy and less able to move air in and out, thereby limiting the ability of the lungs to exchange oxygen and carbon monoxide.
- RISK FACTOR: Smoking

9. **CHRONIC KIDNEY DISEASE:** debilitating disorder in which kidney functions become progressively worse.

- Loss of kidney function follows a path from kidney insufficiency to kidney failure and progress eventually to end-stage kidney disease (ESKD). ESKD is irreversible and incurable.
- FACTORS CONTRIBUTING TO CHRONIC KIDNEY DISEASE:
 - a. Glomerulonephritis – inflammation and gradual destruction of the internal kidney structures

- b. Diabetes
- c. HBP
- d. Infections

- RISK FACTORS:
 - a. Excess weight
 - b. Tobacco smoking
 - c. Long term use of analgesic compounds and related agents

10. **ORAL DISEASES:** most costly yet preventable health problems, resulting in high direct and indirect costs to individuals and governments

- Commonly cause pain, discomfort and problems with eating, speech and communication
- 2 Main Forms:
 - a. Dental Caries (tooth decay): caused by acid producing bacteria in the mouth
 - b. Periodontal Diseases: group of inflammatory diseases that affect the gums, deeper connective tissues and the jaw bone
- MODIFIABLE RISK FACTORS:
 - a. Lack of water fluoridation
 - b. Infrequent dental visits
 - c. Excess of sweet or sticky foods
 - d. Medication that alter saliva flow
 - e. Tobacco smoking
 - f. Inadequate tooth-brushing or flossing

CARE FOR THE DYING:

CLINICAL SIGNS OF IMMINENT DEATH:

The following signs usually indicate that death can be expected within 48 hours.

1. Twitching of the arms or legs.
2. Aimless, and often unconscious, picking at the bed linens.
3. General restlessness.
4. Cold skin.
5. Mottling (blotching) or cyanosis (blue or blue-gray discoloration) of the feet, hands, lips, arms and legs.
6. Blurred vision
7. Hallucinations (particularly of a religious nature or of significant persons who are dead).
8. Difficulty speaking.
9. Relaxation of facial muscles.
10. Cheyne-Stokes respirations (a cycle of breathing in which respirations become faster and deeper and are followed by a slower rate and periods of no breathing that may last up to 60 seconds).
11. Death rattle (breathing that is noisy, bubbling or gurgling).
12. Statements by the patient such as “I know, I am going to die soon.”
13. Fever.

14. Little or no urinary output.

WHAT TO DO:

- Inform proper persons in charge of patient.
- The patient may or may not lose consciousness. In either case, you can help your loved one through the process of dying and the actual moments of death by:
 - a. Touching
 - b. Stroking
 - c. Hand-holding
 - d. Expressing your feelings of love
 - e. Speaking of shared memories
 - f. Praying
 - g. Saying good-bye
- It may be difficult, but it is often reassuring to your loved one to hear that it is okay to let go or take leave of this life.
- Schedule a shift of persons special to the patient so that the patient has a constant companion during this time. With this approach, no one becomes overwhelmed and the patient does not feel abandoned.