

**Quality of Life among Elderly Clients with
Heart Diseases at Geriatric Homes
in Cairo Governorate**

Thesis

Submitted for Partial Fulfillment of the Requirement for the
Master Degree in Nursing Science.
(Community health Nursing)

By

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(B.Sc. Nursing)

*Faculty of Nursing
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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

قَالُوا سُبْحَانَكَ لَا عِلْمَ لَنَا إِلَّا مَا
عَلَّمْتَنَا إِنَّكَ أَنْتَ الْعَلِيمُ الْحَكِيمُ

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List of Contents

<i>Subject</i>	<i>Page No.</i>
List of Abbreviations.....	i
List of Tables.....	ii
List of Figures	v
Abstract	vi
Introduction and Aim of the Study.....	1
Review of Literature	
I-Older Adults.....	5
Characteristics of Aging	7
Commonly Held Myth about the Elderly	8
Demographics of aging.....	9
Physical Health Problems in Older Population	10
Impact of Age – Related Changes On The individual	13
II-Heart Diseases	19
Anatomy and Physiology of The heart	19
Aging Changes Related to Cardiovascular System	29
Types of Cardiac Diseases and their causes, symptoms and treatment	32
Risk Factors	50
Complications	52
Life style , home remedies, Alternative medicine, coping and support and prevention.....	55

List of Contents (Cont...)

<i>Subject</i>	<i>Page No.</i>
III-Quality of Life	58
Intervention For Improving Quality of Life	58
Activities of Daily Living	62
Basic ADLs	63
Instrumental ADLs	63
Self Care and Activities of daily living	63
Comprehensive Geriatric Assessment	64
IV-Role of Community Health Nurse.....	78
Nursing Management of Elderly Clients with Cardiac Diseases	78
Subjects and Methods	89
Results.....	101
Discussion	125
Conclusion.....	139
Recommendations	140
Summary	141
References	151
Appendices	I
Protocol.....	—
Arabic Summary	—

List of Abbreviations

ADLs	: Activities of Daily Living
A V	:Atrioventricular Valves
BADLs	: Basic Activities Of Daily Living
BID	: Barthel Index Degree
CHN	: Community Health Nurse
CAD	: Coronary Artery Disease
CVD	: Cardiovascular disease
IADLs	: Instrumental Activities of Daily Living
MI	: Myocardial Infraction
MMES	: Mini-Mental State Examination
NTG	: Nitroglycerin
SA	: sinoatrial node

List of Tables

<i>Table No.</i>	<i>Title</i>	<i>Page No.</i>
------------------	--------------	-----------------

Tables of Review

Table (1):	Commonly held myth about older adults.....	8
Table (2):	Client teaching guide about decreasing modifiable risk factors for heart diseases.....	83

Tables of Results:

Table (1):	Distribution of cardiac disease of elderly clients regarding to socio demographic characteristics.....	112
Table (2):	Distribution of elderly clients with cardiac disease regarding to their medical history	115
Table (3):	Distribution of elderly clients with cardiac diseases regarding to their pain.....	117
Table (4):	Distribution of elderly clients with cardiac diseases according to their total heart condition.....	118
Table (5):	Distribution of elderly clients with cardiac diseases according to their knowledge about heart diseases.....	119
Table (6):	Distribution of elderly clients with cardiac diseases regarding to their methods of prevention of risks to avoid complication.....	121
Table (7):	Distribution of elderly client with cardiac diseases regarding to their total knowledge ..	122

List of Tables *(Cont....)*

<i>Table No.</i>	<i>Title</i>	<i>Page No.</i>
Table (8):	Distribution of Elderly client with cardiac diseases according to their physical status of quality of life.....	123
Table (9):	Distribution of the elderly client with cardiac disease according to their social status of their quality of life	124
Table (10):	Distribution of elderly clients with cardiac diseases regarding to their psychological status.....	125
Table (11):	Distribution of elderly clients with cardiac diseases regarding to their spiritual status	126
Table (12):	Distribution of elderly clients with cardiac disease regarding to their total quality of life.....	127
Table (13):	Distribution of elderly client with cardiac disease according to their home environment.....	128
Table (14):	Distribution of elderly clients with cardiac disease regarding to their safely home environment scale.....	129
Table (15):	Relation between socio-demographic characteristics of elderly client and heart diseases.....	130
Table (16):	The effect of heart diseases on physical status.....	132

List of Tables *(Cont....)*

<i>Table No.</i>	<i>Title</i>	<i>Page No.</i>
Table (17):	Relation between safety environment and quality of life	133
Table (18):	Relation between total quality of life and home environment scale.....	134
Table (19):	Relation between total quality of life and heart diseases condition	134

List of Figures

<i>Figure No.</i>	<i>Title</i>	<i>Page No.</i>
-------------------	--------------	-----------------

Figures of Review

Fig. (1): Anatomy and physiology of the heart 20

Fig. (2): Quality of Life a systems Model 61

Figures of Results

Fig. (1): Distribution of the studied sample according
to their gender 103

Fig. (2): Distribution of the studied sample according
to their age 103

Fig. (3): Distribution of the studied sample according
to their total heart condition 108

Fig. (4): Distribution of the studied sample according
to their total knowledge..... 112

Fig. (5): Distribution of the studied sample according
to their home environment 119

ABSTRACT

By Ola Hussein Abo Elmaaty

Quality Of Life is important consideration in medical care, quality of life refers to the patient's ability to enjoy normal life activities. Some medical treatments can seriously impair quality of life without providing appreciable benefit, while others greatly enhance quality of life. Heart disease is abroad term used to describe a range of diseases that affect the heart. the various diseases that falls under the umbrella of heart disease include diseases of blood vessels, such as coronary artery disease; heart rhythm problems (arrhythmia); heart infections; and heart defects that person born with (congenital heart defects). **The aim** of the study was to assess the quality of life among elderly clients with heart diseases at geriatric homes in Cairo governorate. **Design;** this study was a descriptive research design. **Setting;** the study was conducted at geriatric homes of the elderly in Cairo Governorate (4 governmental homes). they were followed for ten months. **Sample;** the study involved all elderly clients with cardiac diseases (n = 120), the sample were taken randomly. **Tools;** three tools were designed to collect data to assess the quality of life among elderly clients with cardiac diseases. First tool :An interviewing questionnaire was used to assess socio demographic. Second tool :An observation checklist was prepared to assess home environment of elderly clients. Third tool: Medical record was used to collect data about the client diagnosis. **Results;** the mean age of elderly was 71-+ 8.60. Elderly heart condition statistically significant differences were observed between total quality of life of the elderly. and moderate environment as well, while no statistically significant difference was detected between elderly heart condition and their gender, living place, level of education, job, income and smoking. **Recommendation;** The study suggested that health educational programs according to health status of the elderly should be designed and implemented by nurses, according to physician order and adequate hygiene adopting a national comprehensive programs for prevention of cardiac diseases.

Master thesis ; faculty of nursing , Ain shams university

Introduction

The concept of quality of life has regarded as the outcome of advantages and disadvantages experience cover the course of life, which in turn are shaped by the larger social, cultural, legal, economic, and historical context. Given the complexity of the concept and the existence of different disciplinary perspectives, it should not come as a surprise that there is little consensus about how to conceptualize and measure quality of life, and there is no comprehensive theoretical model. Measures have typically included a series of life domains: physical, emotional, social, environmental, and material (Skevington et al., 2009).

Older adults as a diverse group of individuals with various socio cultural backgrounds are more heterogeneous than homogenous. The later years of life will come to be more widely regarded as years of opportunity for older people and for society, in addition to prevention, care and various health related activities direct attention is devoted to the promotion of high – level wellness. this will require a major reorientation (Miller, 2009).

Most older people will eventually need more care than they did earlier in their lives. The ways in which societies manage or fail to provide this care can have major implications for older people's quality of life. Analyzing the

differential needs of male and female elderly populations will improve the positive quality of their life outcomes (**Yount and Agree, 2009**).

According to **Tanner (2008); and Yooh and Horne (2009)**, 84% of people over 65 years of age have at least one chronic disease, 62% have two or more chronic conditions. In age 80 years, three fourths of women have two or more chronic condition, functional impairments and disability (the ability to perform activity of daily living).

The term "Heart Disease "is often used interchangeably with "Cardiovascular disease." Cardiovascular disease generally refers to conditions that involve narrowed or blocked blood vessels that can lead to a heart attack, chest pain (angina) or stroke. Other heart conditions, such as infections and conditions that affect the heart's muscles, valves or beating rhythm, also are considered forms of heart disease (**Mayo Clinic Staff, 2014**).

As mentioned by **Smeltz (2009); and Braunwald et al (2006)**, that the nurse is a vital member of the comprehensive cardiac disease care program and educates the elderly clients and their care givers about a number of issues important for optimal activity and how to manage daily living, both functionally and psychosocially. As well the most effective treatments empower the elderly clients to be effective self-manager. To effectively manage daily living for cardiac patient, the elderly needs knowledge, resources and psychosocial coping skills and risk factor – modifying activities.

Significance of the study

Community – dwelling older people at risk for losing independence, establishing guidelines and identifying interventions to alter the risk or to provide public health services to manage increasing dependence. It also, focuses on physical function related to the ability to perform activities of daily living and instrumental activities of daily living (**Mckenzie et al., 2006**).

In Egypt, the percentage of elder people in 1996 was around 6% and in 2006 was 7.2%, while the expected percentage will be 8.9% and 10.9% in, 2016 and 2026 respectively. Consequently number of geriatric homes increased to reach 135 geriatric homes in 2011 in Egypt, 38 of them in Cairo ([www.un.org/esa/socdev/ageing/documents/workshops/vienna / egypt](http://www.un.org/esa/socdev/ageing/documents/workshops/vienna/egypt) .2013).

Obtaining a careful evaluation and developing a plan for care with care provider is key for improving the quality of life requires some or significant assistance with activities of daily living to improve their quality of life (**Vickers et al., 2010**).