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**ANALYSIS AND INVESTIGATION THE OPINION OF NURSES AND  
PHYSIOTHERAPISTS ON THEIR QUALITY OF WORK WITH CHRONIC  
VASCULAR DISEASE'S PATIENTS**

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**Abstract:** Chronic vascular diseases are long-term diseases that develop slowly over time, often progressing in severity, and can often be controlled, but rarely cured. The atherosclerosis, diabetes and some autoimmune vascular diseases are the main reason for Chronic Arterial Occlusive Disease. The most common cause of chronic venous disease is directly correlated with hereditary factors and lifestyle. The secondary varicose is caused by malformations, traumatism and deep vein thrombosis.

The principal way of resolving these problems is surgical intervention. As is the case for any surgical intervention, the right mode of rehabilitation is of a great importance.

The present report examines the nurses and physiotherapists opinion on their quality of work with chronic vascular disease's patients. This report also explores different physiotherapist treatments, such as elastic compression, lower extremity exercises, mobilization and position treatment. The algorithm in examination of chronic venous and arterial disease patients and the different pathways in their treatment were categorized as: conservative, endovascular, vascular reconstruction and rehabilitation.

The differences of chronic vascular disease treatment compared with the treatment of acute vascular diseases is that the former requires permanent healthcare and rehabilitation in order to maintain good health and achieve a comfort of life, which will avoid complications.

The management of healthcare includes different medical specialists participating in this process. Good communication and coordination between them will improve the patient's access to these specialists and reduce the cost of healthcare. The specialists who participate in multidisciplinary tasks such as team-doctors, nurses and physiotherapists have a role as a direct deliverer of healthcare. They also have a role in helping the patients in the process of self-management support, were the patient also participates.

The nurses and physiotherapists need to upgrade their skills to educate the patients and their families according to specificity of the respective disease. This study covers a huge group of nurses and physiotherapists. The nurses and physiotherapists need to upgrade their skills to educate the patients and their families according to specificity of the respective disease. 64,76% of them think they are in need of additional education, 16,19% think education is necessary for specific group of nurses and physiotherapists and 4,50% have an opinion they don't need additional education.

**Keywords:** Physiotherapy, chronic diseases, venous disease, atherosclerosis, diabetes rehabilitation.

## **INTRODUCTION**

Chronic vascular diseases are long-term diseases that develop slowly over time, often progressing in severity, and can often be controlled, but rarely cured. The atherosclerosis, diabetes and some autoimmune vascular diseases are the main reason for Chronic Arterial Occlusive Disease. The most common cause of chronic venous disease is directly correlated with hereditary factors and lifestyle. The secondary varicose is caused by malformations, traumatism and deep vein thrombosis.

In now days, the chronic vascular diseases are a threat for the population healthcare. Their influence over the healthcare system is significant and increase the searching of health services and their costs.

This means that the process of creating of quality healthcare system is a very complex process, based on traditional humane principles: fairness, medical ethics, rights and awareness of the patient, accessibility and healthy life-style. The good management of chronic vascular disease's patient's health care, improves the access and quality of health care services, the satisfaction of the patients and reduces the costs.

Unfortunately into the current Bulgarian model of healthcare, the medical specialist's intervention has a place after the patient begins to look for it. It happens usually when the chronic disease has a transformation from chronic to acute phase.

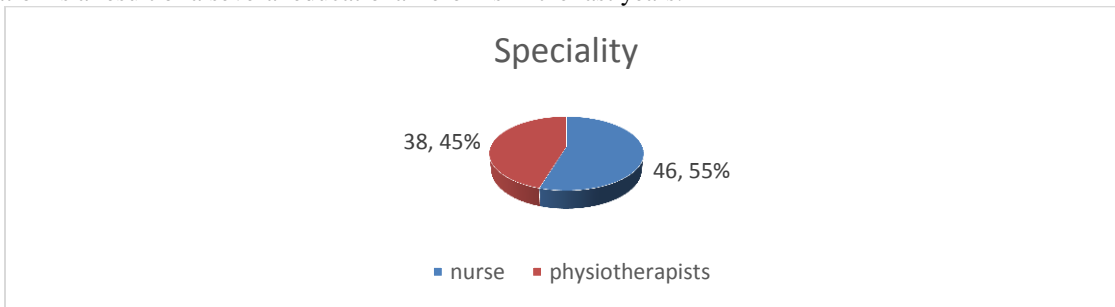
Care coordination involves deliberately organizing patient-care activities and sharing information among all of the participants concerned with a patient's care to achieve safer and more effective care. This means that the patient's needs and preferences are known ahead of time and communicated at the right time to the right people, and that this information is used to provide safe, appropriate, and effective care to the patient. According to these criteria the nurses and physiotherapists need to upgrade their skills to educate the patients and their families according to specificity of the respective disease. The specialists who participate in multidisciplinary tasks such as team-doctors, nurses and physiotherapists have a role as a direct deliverer of healthcare. They also have a role in helping the patients in the process of self-management support, were the patient also participates.

Self-management support is an important part of patient-centered care and care coordination in primary care settings. Prevention and care program of the chronic diseases has developed a variety of resources to help primary clinicians and teams learn about and implement self-management support.

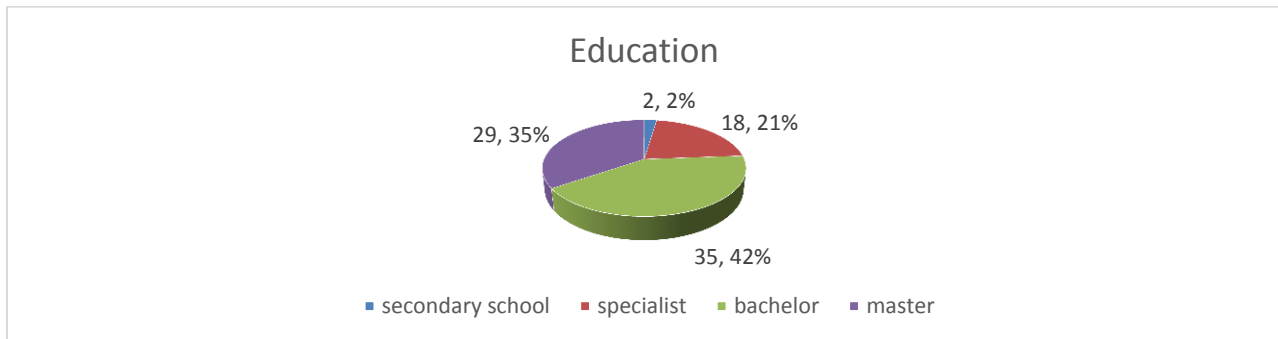
**MATERIALS AND METHODS**

This study covers a group of 63 nurses and physiotherapists. The management of healthcare includes different medical specialists participating in this process. Good communication and coordination between them will improve the patient's access to these specialists and reduce the cost of healthcare. The nurses and the physiotherapists have to collaborate not only with doctors, but with another kind of specialists. The number of the nurses ( 46.55%), is higher than the number of physiotherapists (38.45%).- (Fig. 1) The basic activities nurses can do without or with doctor's prescription are collecting and delivering the health information, prevention and prophylaxis, providing of medical and health care services, emergency and daily manipulations and investigation and education of health care. The physiotherapist's function is to prepare the rehabilitation agenda. His task is to prepare a plan for rehabilitation and to manage this process.

The collected data for healthcare specialist's education, show that the great number of them have an educational grade "Bachelor"-41,70% and "Master"- 34.50%. The number of those with lower educational grade is smaller-"Specialist"-21.40% and with the secondary school-2.40%. (Fig. 2). This variety of medical specialist's education is a result of a several educational reforms in the last years.

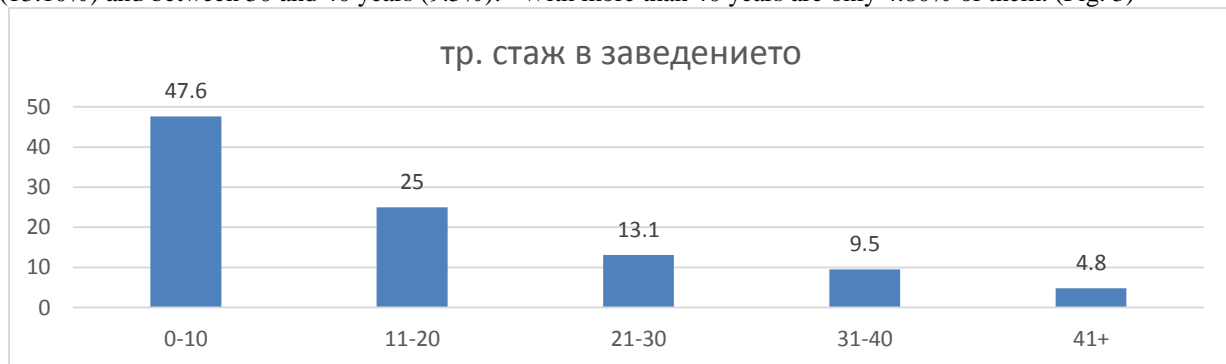


*Fig. 1 Distribution of nurses and physiotherapists conform their speciality.*



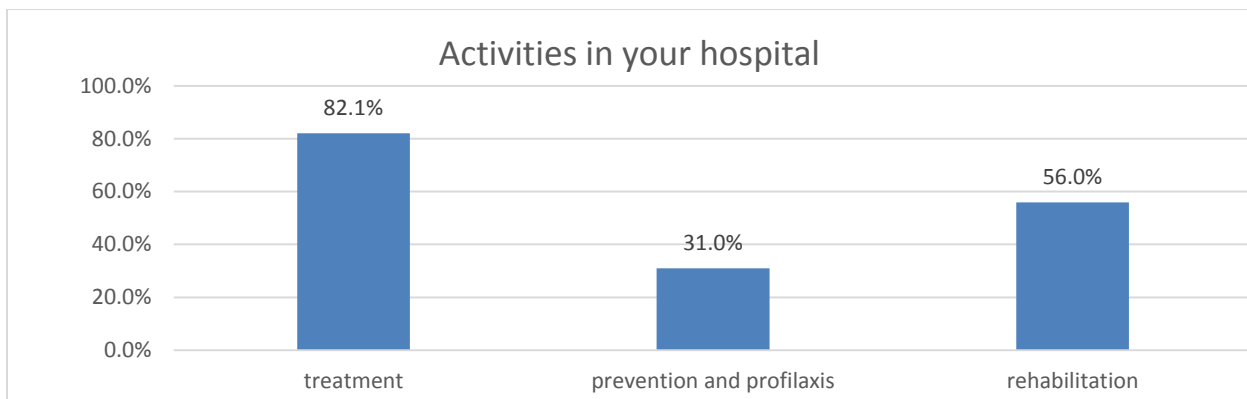
*Fig. 2 Distribution of nurses and physiotherapists conform their education.*

The nurses and physiotherapists with a professional experience between 0 and 10 years (47.60%) and between 11 and 20 years (25%) prevails. The nurses and physiotherapists with a professional experience between 20 and 30 years are (13.10%) and between 30 and 40 years (9.5%) and between 30 and 40 years (9.5%). –With more than 40 years are only 4.80% of them. (Fig. 3)



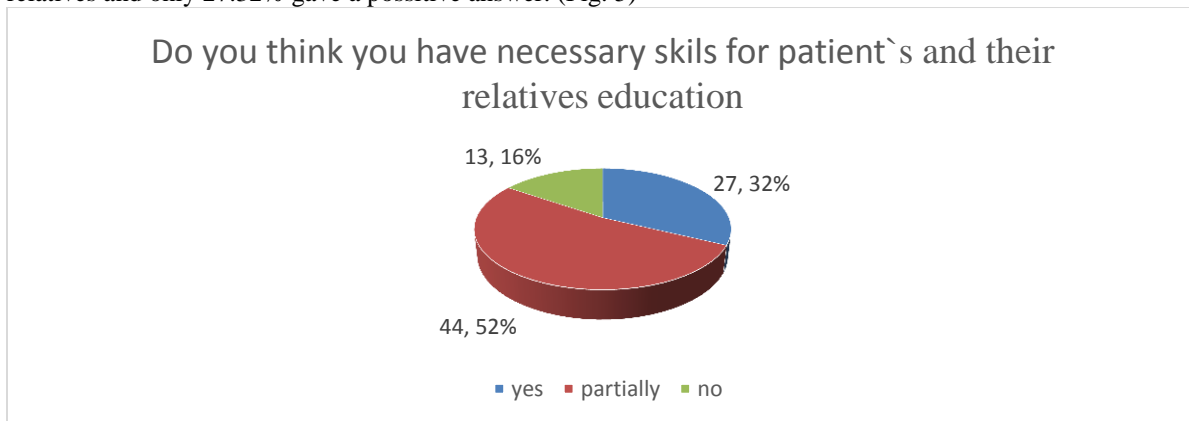
**Fig. 3 Professional experience.**

Due to the biggest part of the participants in this study execute their activities in hospitals, on the question what kind of activities you execute in your hospital, 83.10% of answers were treatment, 55.40% rehabilitation and only 33.70% of the answers were prevention and profilaxis. (Fig. 4)



**Fig. 4 Activities in your hospital.**

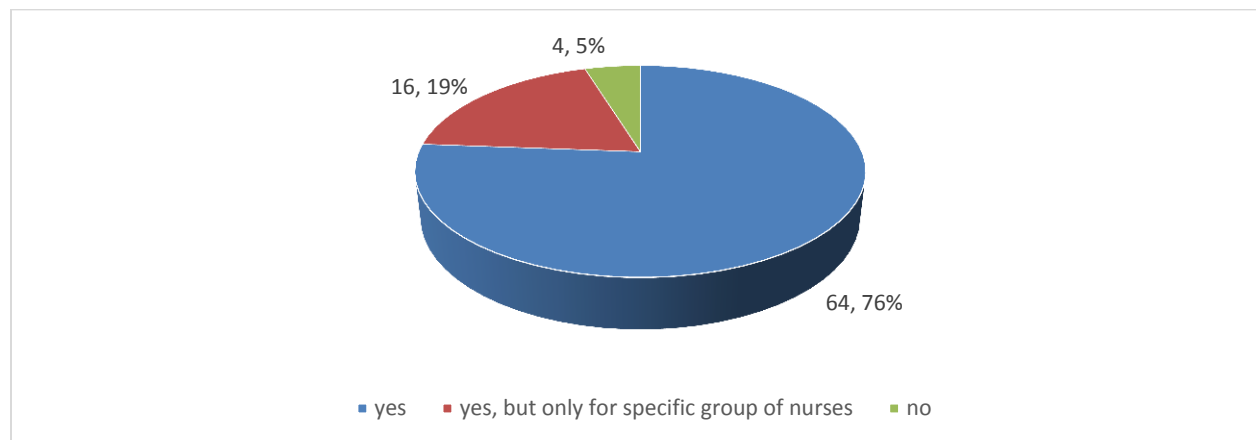
The nurses and physiotherapists need of specific education and skills for the process of patients and their relatives education. It is seen from their answers however, the most of them (44,52%) have a partly idea and skills to perform this function. 13.16% from the nurses and physiotherapists are not ready to educate the patients and their relatives and only 27.32% gave a positive answer. (Fig. 5)



**Fig. 5 Nurse`s and physiotherapist`s skills for patient`s and their relatives education.**

The nurses and physiotherapists need to upgrade their skills to educate the patients and their families according to specificity of the respective disease. 64,76% of them think they are in need of additional education,

16,19% think education is necessary for specific group of nurses and physiotherapists and 4,50% have an opinion they don't need additional education. (Fig 6)



*Fig. 6 The need of additional education for the nurses and physiotherapists.*

#### DISCUSSION

These results indicate necessity of additional education in chronic vascular diseases health-care's domain. The competences that are necessary for the nurses and physiotherapists to maintain the contemporary health-care conditions, are a significant requirement for a good quality of health-care services.

The differences of chronic vascular disease treatment compared with the treatment of acute vascular diseases is that the former requires permanent healthcare and rehabilitation in order to maintain good health and achieve a comfort of life, which will avoid complications.

The development of contemporary healthcare is based on the development of medicine, but in the same way it is based on the application of the theory in practice. The contemporary patients are not only clients of health-care services, but they need to be an active participant in the complicated proces of health-care. The medical teams must to give to the patients and their relatives the suport that is necessary for them to survive the psychological crisis and to build a new conception of life.

#### CONCLUSIONS

1. The results of this study show that only 27.32% of the nurses and physiotherapists are prepared to educate the patients and their relatives.
2. Only the small number (4,50%) of the nurses and physiotherapists have an opinion they don't need additional education for upgrading their skills.
3. The nurses and the physiotherapists have to collaborate not only with doctors, but with another kind of specialists.
4. Good communication and coordination between different medical specialists participating in this process is still missing.
5. It is necessary to develop some forms of additional after university education for nurses and physiotherapists especially for chronic vascular diseases prevention and health care.

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