

OBESITY AS RISK FACTOR OF POSTOPERATORY COMPLICATIONS IN CORONARY PATIENTS

Autores

Fernández-Oliver Alberto, Rojas-Mata Margarita, Mgueraman-Jilali Rachida

Unidad de Gestión Clínica del Corazón. Hospital Clínico Universitario Virgen de la Victoria de Málaga.

Introduction: The high prevalence of overweight and obesity currently evidenced in our society, is a cardiovascular risk factor added an important influence on the postoperative cardiac surgery (CS).

Objectives:

1. To analyze the relationship between the presence of obesity or overweight and the occurrence of complications in patients undergoing CS.
2. Designing a plan of action to prevent them.

Method: An observational, analytical, longitudinal. Displays of 40 patients (53% males, 47% females), intervened CS. In our unit 1/1/2006 to 30/5/2006. Inclusion criteria: Patients undergoing Valve Heart Disease and Surgery, age range 50-80 years. Key variables: age, sex, height, weight, abdominal circumference, body mass index (BMI.), clinical and laboratory data from the clinical history. We conducted semi structured interview adjusted eating habits, lifestyle and psychosocial aspects.

Results: Mean age: 70.34 years; average weight 73.08 Kg., 166.56cm height, average BMI of 26.37 Kg./m2.

	Normal BMI	Overweight I	Overweight II	Obesity	total
Nº patients	7	15	13	5	40
Presence of complications	1	4	6	5	16
Complication %	14%	27%	46%	100%	40%

Conclusions: 1. The increase in BMI raised the risk of surgical complications in coronary patients, highlighting the sternal dehiscence and mediastinum infection. 2. Obesity affects a higher morbidity and mortality, preventing it should occupy prominent place for the important social and implications involved. 3. We must undertake a programme of weight loss in these patients since the consultation once the diagnosis and planned intervention as primary prevention.

Enferm Cardiol. 2009; Año XVI(47-48):56-57

Bibliografía

1. Lefevre M; Dupuis A. Juicio clínico en cuidados enfermeros. Ed Masson. Barcelona. 1995.
2. Luis MT. Los diagnósticos enfermeros. Revisión, crítica y guía. Ed Masson. Barcelona. 2000.
3. Kerouac S; et al. El pensamiento enfermero. Ed Masson. Barcelona. 1996.
4. Memoria 2005 Hospital Universitario Virgen de la Victoria.
5. Manual de Planes de Cuidados de Enfermería. Hospital Universitario Virgen de la Victoria de Málaga. 2005.
6. Manual de Protocolos de Enfermería. Hospital Clínico Universitario Virgen de la Victoria de Málaga. 2005.
7. Manual de Intervenciones Enfermeras. Hospital Clínico Universitario Virgen de la Victoria de Málaga.
8. Sparks S., Craft-Roseberg M., Herdman T., Lavin MA. NANDA: Diagnósticos enfermeros, 2003-2004. Ed Elsevier España, S.A. Madrid. 2004.
9. Johnson M., Bulechek G., McCloskey J., Maas M., Moorhead S. Diagnósticos Enfermeros, Resultados e Intervenciones. Ed Harcourt, S.A. Madrid. 2002.

“OBESITY AS RISK FACTOR OF POST OPERATORY COMPLICATIONS IN CORONARY PATIENTS”.

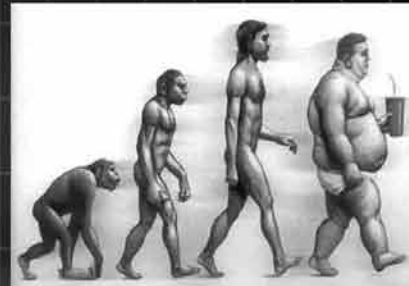


Alberto-Luís Fernández- Oliver , Rachida Mgueraman-Jilali, Margarita Rojas-Mata.
 Enfermeros. Unidad de Gestión Clínica del Corazón. Hospital Universitario Virgen de la Victoria . Málaga. Spain
 e-mail: albertofernandezoliver59@yahoo.es

Con Ayuda –Beca de la Asociación Española de Enfermería en Cardiología A.E.E.C.

BACKGROUND/AIMS

The high prevalence of overweight and obesity currently evidenced in our society is a cardiovascular risk factor added an important influence on the postoperative cardiac surgery (CS). For everything previous we appear the following aims:
 1. To analyze the relationship between the presence of obesity or overweight and the occurrence of complications in patients undergoing CS.
 2. To design a plan of action to prevent them.



METHODS

An observational, analytical, longitudinal study. Sample of 40 patients (53% males, 47% females), intervened CS. In our unit from 1/1/2006 to 30/5/2006. Inclusion criteria: Patients undergoing Valve Heart Disease and Surgery, age range 50-80 years. Key variables: age, sex, height, weight, abdominal circumference, body mass index (BMI), clinical, laboratory and biological data from the clinical history. We conducted semi structured interview adjusted eating habits, lifestyle and psychosocial aspects.

RESULTS

Mean age: 70.34 years; average weight 73.08 Kg., 166.56cm height, average BMI of 26.37 Kg/m2. *Graphics 1,2. Table 1.



Patients classification according to BMI GRAPHIC 1.

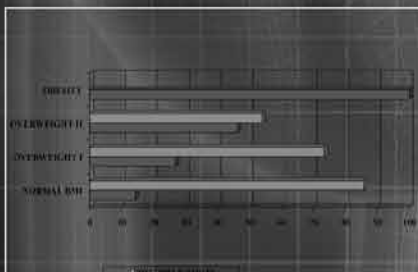
COMPLICATIONS

a) Mediastinum Infection	22,5 % (9)
b) Sternal Delicence	10 % (4)
c) General Sepsis	2.5 % (1)

TABLE 1

CONCLUSIONS

1. The increase in BMI raised the risk of surgical complications in coronary patients, highlighting the sternal delicence and mediastinum infection.
2. Obesity affects a higher morbidity and mortality, preventing it should occupy prominent place for the important social and implications involved.
3. We must undertake a programme of weight loss in these patients since the consultation once the diagnosis and planned intervention as primary prevention.



Relation Overweight/Obesity and Complications GRAPHIC 2.

BIBLIOGRAPHY

1. Lefevre, M.; Dupuis, A. Juicio clínico en cuidados enfermeros. Editorial Masson. Barcelona. 1995.
2. Luis Rodrigo, M^o T. Los diagnósticos enfermeros. Revisión, crítica y guía. Editorial Masson. Barcelona. 2009.
3. Kerouac, S.; et al. El pensamiento enfermero. Editorial Masson. Barcelona. 1996.
4. Memoria 2005 Hospital Universitario Virgen de la Victoria.
5. Manual de Planes de Cuidados de Enfermería. Hospital Universitario Virgen de la Victoria de Málaga. 2005.
6. Manual de Protocolos de Enfermería. Hospital Clínico Universitario Virgen de la Victoria de Málaga. 2005.
7. Manual de Intervenciones Enfermeras. Hospital Clínico Universitario Virgen de la Victoria de Málaga.
8. Spink, S. Craft-Rosenberg, M., Herdman, T., Lavin, M.A. NANDA: Diagnósticos enfermeros, 2003-2004. Editorial Elsevier España, S.A. Madrid. 2004.
9. Junon, M., Balchouk, G., McCluskey, J., Mass, M., Moorhead, S. Diagnósticos enfermeros, resultados e intervenciones. Ediciones Harcourt, S.A. Madrid. 2002.