

CONFERENCE ABSTRACT

Management of Decompensated Heart Failure in the ICU

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In 2021, there were 56.5 million prevalent cases of heart failure globally, 27.3 million females, and 29.2 million males. Ischemic heart disease (33.8%), hypertensive heart disease (22.6%), and other cardiomyopathies (8.2%) were responsible for the most prevalent heart failure cases worldwide.

Heart failure is not a single pathological diagnosis, but a clinical syndrome consisting of cardinal symptoms (e.g. breathlessness, ankle swelling, and fatigue) that may be accompanied by signs (e.g. elevated jugular venous pressure, pulmonary crackles, and peripheral edema). The objective of this presentation is to provide an overview of the strategies to manage patients with decompensated acute heart failure in intensive care units.

The 2022 Guidelines developed by the American College of Cardiology, the American Heart Association, the Heart Failure Society of America, and the 2021 European Society of Cardiology Guidelines for the Diagnosis and treatment of acute and chronic heart failure, provide recommendations to manage decompensated patients in the intensive care unit (ICU).

- The first recommendation addresses the identification of the patient at admission, early diagnosis, and classification, to provide adequate treatment according to their needs.
- The second one is the initial assessment and stabilization to gather information required to identify Nursing Diagnoses and subsequent to Care Plan. Monitoring vital signs, hemodynamic parameters, and fluid balance must be included in this step.
- The third recommendation includes pharmacological and non-pharmacological management to improve myocardial contractility, optimize renal function, and continue previous therapy in addition to Nursing Interventions for symptom management such as oxygen therapy, position, and pain management. In severe cases, the preparation of the equipment for ventricular assistive devices, mechanical circulatory support, ultrafiltration, and dialysis may be required.
- The fourth recommendation consists of prevention of complications and rehospitalization. Nurses play a pivotal role in providing patient and family education either at the hospital or during outpatient visits. Education should focus on the recognition early signs of heart failure, medication adherence, dietary modifications, physical activity, and psychosocial support.

Nurses play a key role in supporting patients with heart failure at all stages. To provide evidence-based care, nurses must be familiar with guideline recommendations. In addition, nurses can contribute to the multidisciplinary team, delivering unique patient-centered care; in doing so, critical care nurses contribute to patient survival and recovery. Patient and family support and education help patients seek medical care early to avoid further hospital readmission.