

Companions' perceptions regarding guidance on dressings in pediatric surgery





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ABSTRACT

Introduction: Pediatric surgery highlights the responsible-child binomial, experiencing the surgical periods together. In this sense, the surgical wound requires care that allows the evaluation of its progression, the presence of phlogistic signs, and instruments used in order to enable the integrality of the tissue. Thus, companions should be active participants in the promotion of techniques related

to surgical incision, since home care is relevant in the quality of surgical evolution and response. Objective: To identify the perception of the companions of the children submitted to surgery regarding the orientations regarding the dressings. Methodology: This is a descriptive, exploratory, qualitative study. In view of the opinion number 2.940.781 of the Research Ethics Committee, 102 semi-structured interviews were conducted addressing the perspectives of the companions regarding the perioperative period, one of the criteria being the perceptions of the companions regarding the orientations on dressings in the pediatric surgery ward of a University Hospital in the city of Rio de Janeiro. The Excel program was used to store the collected information. Results: The data show the prevalence of instructions offered to the caregiver, based on demonstrations and guidance to the companions. Thus, the explanations are aligned with the procedures performed, obtaining a higher incidence of promoting surgical wound cleaning. In palatoplasty, it expresses the care of nutrition, oral health such as the use of soft bristles and the use of saline solution. There is the presence of the exchange of information between companion and professional, corroborated by the previous search in virtual media. Feelings such as fear in the dressing are also highlighted. The orientations culminated mostly in the care practices necessary for the protection of the surgical wound, not addressing the evaluation of phlogistic signs. Among those analyzed, 34.3% of the interviewees reported not having guidance. Conclusion: Nursing orientations strengthen the role of companions in the care of pediatric patients, expanding the bond between the binomial and demonstrating its importance in the evolution of referral. The reduced insertion of the companion interferes with the lack of knowledge and lack of habit to the technique. The study allows the evaluation of the experiences, contributing to the theoretical-practical alignment in the sectors.

Keywords: Wound, Surgical, Paediatrics, Perioperative Care.



1 INTRODUCTION

Children, like all human beings, are likely to undergo surgical procedures at some point in their lives. These procedures, in turn, can assume the most diverse levels of complexity (Amatuzzi; Souza; Melo, 2019). And the perioperative process begins with the preparation of the child's clinical conditions for their best response to surgery, which can also be at the outpatient level, continuing with the child's hospitalization and inclusion in the operative agenda. The hospitalization process can be understood as a moment that generates discomfort for the child, who has his daily routine modified and is subjected to restrictions and exposure to people who are not part of his experience. In addition, there is the fear of the unknown and the performance of a procedure that can cause pain and discomfort. All of this results in intense anxiety and tension for both the child and their companion (Sampaio et al, 2021).

The Statute of the Child and Adolescent (ECA) establishes the need and right of the child to be accompanied by a parent or guardian during the period of hospitalization (Brasil, 1990). The companion, who is also impacted by the child's hospitalization, may feel anxiety, tension, and stress for several reasons, including the child's recovery and dressings. Many caregivers crave guidance during the process and beyond, in order to regain the autonomy lost to health professionals in caring for their children during the hospitalization period. For mothers in particular, the possibility of taking care of their children is capable of developing well-being and balance, reducing anxiety. For this reason, it is important for nursing to care for both the child and the companion, providing care guidance associated with the necessary reception, with a view, for example, to dressings after discharge (Costa e Silva et al, 2022).

Dressing is an important action in the wound healing process. The dressing acts as a physical barrier that keeps the wound dry, clean, and protected. It is the nurse's responsibility to evaluate the lesion, choose the most appropriate dressing, supervise the procedure or perform it by himself, in order to reduce the risk of contamination, proliferation of microorganisms, and infection as much as possible (Vieira et al, 2018).

Considering the important role of nurses as health educators, postoperative guidance is essential at hospital discharge to allow the continuity of the child's care at home and reduce surgical complications, in addition to reducing parents' feelings of insecurity and anxiety. Through teaching strategies, nurses are able to promote autonomy for the newly operated individual and their families, as proposed by Dorothea Orem in her Theories of Self-Care (Freire et al, 2021).

Based on this, the following guiding question was defined as the guiding question of the study: "What is the perception of the companion regarding the guidance on dressings in pediatric surgery?", with the objective of identifying the perception of the companions of the children undergoing surgery regarding the orientations regarding the dressings. The research is justified for the purpose of



understanding and possible improvement of the guidelines on dressings for companions of pediatric patients, in addition to serving as a basis for studies for nursing professionals.

2 METHODOLOGY

The present research is an exploratory, descriptive study with a qualitative approach. The exploratory study aims to provide greater knowledge about the theme that will be analyzed, promoting an important survey on the researched content, as it is usually little addressed or does not present all the relevant information. Thus, this type of study makes this theme well explored, deepening and clarifying concepts previously addressed. Descriptive research aims to describe the particularities of a group, using a standard technique known as data collection.

The researcher will have the function of observing the events, annotating, ascertaining, categorizing them in order to be able to interpret them. The researcher does not interfere with these data (PEROVANO, 2014). According to Polit (2011), the qualitative approach is carried out through a research that expresses interest in the scope of the personal experiences that the interviewees report, each person is seen as a unique individual by the researcher, and he will present a more detailed understanding of the situations presented by the research subjects.

The place used to carry out the research was in the pediatric ward of a University Hospital in the city of Rio de Janeiro, located on the third floor, the target audience was the companions of children in surgical situations. Data were collected through semi-structured interviews, containing open questions about the guidance provided by the nurse during the perioperative period, and closed questions about the profile of the companion and the child.

If the interviewee was faced with any questions that made them feel coerced, they could interrupt the interview at any time. At the beginning of the interview, the companions were explained about the research and the objective of the study and asked to read the Free and Informed Consent Form (ICF) and sign it, in case of agreement.

After approval under opinion number 2,940,781 by the Research Ethics Committee, 102 semistructured interviews were conducted, addressing the perspectives of the companions regarding the perioperative period, especially related to the guidance on dressings in the pediatric surgery ward of a University Hospital in the city of Rio de Janeiro.

The Excel program was used to store the collected information. According to Bardin (2010), the data were processed using the categorization model, which is determined in two stages.

In the first stage, the data was isolated, while in the second stage, a classification of these elements was generated through previously defined criteria, with the function of simplifying the raw data into organized data.



3 RESULTS

The data show the prevalence of instructions offered to the caregiver based on demonstrations and guidance to the companions. The nursing team is a determining agent in the process of building and sharing knowledge with the caregivers who accompany the children during surgery. The nurse is articulated in providing ways through which they include the role of the companion in the care of the child, helping in the understanding of the steps to be carried out and in the growing emotions during this moment. (Costa e Silva *et al.*, 2022)

Based on the guidelines provided, the possibility of greater integration between the caregiverenvironment-child is made possible, providing the understanding of the agent in the management of care, such as the need to use the ostomy bag. Thus, some perceptions of the rapporteurs are contemplated, such as the following:

"They explained how the colostomy bag is changed." (D44)

However, in view of the reality expressed by the research, the effectiveness of the guidelines that culminate in the comprehensive care of a child in the ostomy process is not evidenced. Nursing is integrated into the clinical, social and family assessment of the patient, in order to promote the planning of actions in the hospital and home environment. Therefore, it is necessary to adapt strategies that encourage the use of the colostomy bag appropriately, implementing guidelines that consider the child's routine activities, the level of education of family members, food, as well as techniques for cleaning the place, changing the bag, and adhering to prescribed covers (Esteves, 2022).

According to the literature, the higher incidence of mothers in the care of pediatric patients using ostomy is evidenced, influenced by stigmatizing sociocultural aspects, obtaining an alarm scenario for a more concise family approach regarding the reality of each case. (Esteves, 2022).

The explanations provided by the nurses in the study portray the alignment with the procedures performed, obtaining a higher incidence of promoting the cleaning of the surgical wound.

"Use for cleaning with serum only, without dressing" (DX)

In view of the evaluation of the surgeries performed, they are characterized as elective surgeries with a high prevalence of herniorrhaphy, postectomy and palatoplasty, the latter including bone grafting and thus obtaining another surgical site. In genitourinary surgeries, nursing plays a relevant role in the evaluation and prevention of urinary retention, helping with negative feelings and

[&]quot;1x a day. Clean with neutral soap, serum, dry, put gauze so as not to stick to the diaper" (D70)

[&]quot;Yes, she was instructed to stay with the bandage for 48 hours, not being able to get it wet. Rinse with saline and keep closed" (D62)

[&]quot;Nursing showed how to clean: gauze, nebacetim, sterile compress. They haven't informed us about the dressing yet." (D98)



discomfort during the surgical process. (Pinheiro *et al.*, 2020). The study expresses perceptions of care in postectomy surgeries, represented by:

"24 hours with the dressing, then wash use 70% alcohol" (D11)

As a finding, the companions also report the need to check vital signs, evidencing the evaluation regarding the presence of hypoxia in the extremities, mostly after adhesion of a fixation device and support such as a splint, applied in congenital clubfoot correction surgery.

"She said she would be in a cast for around 15 to 20 days, she was told to pay attention to the extremities, on the tips of her fingers, to evaluate if it turns purple." (D13)

In palatoplasty, it expresses the care of nutrition, oral health such as the use of soft bristles and the use of saline solution. They also portray behaviors that should be modified by children during the postoperative period to optimize the healing process of the surgical site and the technique of the dressings performed. The parents affirm their understanding regarding the recommendation for children not to put their hand in the oral region, considering palatoplasty.

"Do not change the bandage, as it looks like a jelly and when it turns a dark color it will fall off on its own." (D71)

"You don't do a bandage, you have to brush your teeth, don't leave food residues. Oral hygiene." (D.52)

"Until now, I had only received guidance not to let the child put his hand in his mouth." (D31)

The exchange of information between companion and professional is also evidenced, corroborated by the previous search in virtual media. Scientific knowledge and common sense are associated in orientation processes, demystifying myths and enabling greater construction of knowledge.

"It hasn't been oriented yet. He researched that he would have to: brush his teeth with soft bristles, gases to sanitize and bathe with soap and water for the region of bone removal". (D80)

It expresses the construction of previous knowledge intensified by the internet, as well as by the prolonged experience of hospitalizations and procedures that provide greater curiosity, anxiety and interest in the formulation of strategies that make it possible to contribute to a discussion with the professional team, by the companions.

Feelings of distress during dressing are also highlighted.

"He said he was very afraid and that he had not received guidance." (D6)

The surgical process is experienced by the binomial by the intensification of various feelings, from the initial moment of hospitalization and planning of actions. The instability and fear of the



surgical process increasing in the preoperative period returns to the adjustments that will be implemented in the postoperative period, the observation of the challenges and discomforts present at the time of recovery and the readaptation of the routines of the companion-patient, with the adherence of more autonomous care practices to the children's guardians. Thus, feelings of inadequacy, unpreparedness, fear and apprehension are accentuated. (Sampaio *et al.*, 2021)

In general, the guidelines focus on the care practices regarding the surgical wound, however, the approach does not seem to effectively address the doubts and insecurities presented by the parents.

4 CONCLUSION

Nursing guidance and the promotion of active participation of companions are essential for caregivers to act correctly in the necessary care during the preoperative period and especially in the postoperative period of pediatric patients. The home care provided by the guardian will not only help in the child's recovery, but also in the way to generate emotional balance and contribute to the child's clinical evolution. In addition, it expands the bond between the responsible binomial and the child, because in a moment of anxiety and fear of the child who is being hospitalized for a surgical procedure, the child feels safe with the guardian by his side and participating in the care. Nursing intervention offers security and guidance to family members who do not have knowledge and are not close to the techniques and care to be performed for a good recovery of the child.

In the study carried out, most companions reported that they received guidance from the nursing team, thus feeling safe for postoperative care, such as cleaning with serum, time to change the dressing, when there is a need for change. However, there were reports of mothers who felt distressed because they had to research how to proceed in the postoperative period because they had not received instruction and guidance. Thus, this study can serve as a reflection for the nursing team, who, through the results, express the relevance and need for the active participation of the companion in all nursing care so that he can learn and be safe when this binomial is discharged.

The study, therefore, made it possible to highlight the role of nurses as educators in the health area and the perceptions of those responsible for this learning, contributing to the alignment and theoretical and practical improvement in the sectors.

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