# Algorithm of Nursing Approach in the Prevention of Complications of Bronchial Asthma and Assessment of Its Effectiveness

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**ABSTRACT**

The purpose of the study. Assessment of the effectiveness of the nursing approach in bronchial asthma by training and self - monitoring of patients to develop the qualifications and medical level of nurses according to the nursing approach algorithm for patients with bronchial asthma.

**Keywords:**

**Relevance of the problem.** In our country, comprehensive measures are being implemented aimed at developing the field of Medicine, adapting the medical system to the requirements of World templates, including the Prevention of bronchial asthma among the population. In this regard"...aimed at improving the effectiveness, quality and popularity of medical care, as well as the introduction of high – tech methods of diagnosis and treatment, support of a healthy lifestyle and Prevention of diseases by creating effective models of patronage service and dispensary", and in the 56th goal, Part 4 of the 7 priorities of the country's development strategy in 2022 – 2026 "...Population Health Protection, capacity building of medical workers and 2022 – Implementation of a set of measures aimed at implementing a program for the development of the health system in 2023...", as important tasks are defined. Due to these tasks, there is a need in our republic to more intensively conduct scientific research on the adaptation of the nursing approach to international standards and the improvement of the role of nurses in bronchial asthma in teaching patients to control themselves by establishing asthma schools in outpatient Polyclinic institutions for patients with bronchial asthma.

**The purpose of the study.** Assessment of the effectiveness of the nursing approach in bronchial asthma by training and self - monitoring of patients to develop the qualifications and medical level of nurses according to the nursing approach algorithm for patients with bronchial asthma.

**Material and research methods.** The study examined the nursing approach and its effectiveness in asthma at various stages of medical care for patients with bronchial asthma, including primary health care facilities: op, oshp, KTMPS lari, as well as specialized medical facilities (RIIAM). To do this, 430 nurses were randomly selected from 30 of

Riiam, 200 from OPS of Tashkent City and 200 from districts of Syrdarya region to conduct a survey between them. The responses received during the survey were recorded in the"survey to assess the role of nurses in monitoring the health of patients with bronchial asthma". The survey included questions about the age of the nurse, length of work, the place of work occupied, as well as her knowledge in the Prevention of BA disease, asthma attacks. In addition, the astma control test (ast) was carried out from 200 patients who were registered with ba in the Syrdarya region oshp, op, KTMPS and who applied to their DPMS several times over a year, and 6 - day (12-hour) asthma schools seminar-training was organized for these patients. The purpose of the workshop is to teach skills in BA disease to prevent BA complications through self-control. The main tasks are to use a picfluometer, determine the high rate of breathing through a picfluometer and maintain a diary for self - control, teach to record the results of a picfluometer in a diary, teach the technique of using ingalizers. It was attended by 2 pulmonologists, 1 allergist Doctor, 2 nurses from RIIAM.

4-day seminar-trainings were organized for 200 nurses operating in OPS, oshps of Syrdarya district. 183 nurses attended the Seminar training. The topic of the seminar for nurses is "the algorithm of nursing approach in the Prevention of complications of bronchial asthma", the main task of which is to teach nurses the algorithm of nursing approach to patients with ba on an outpatient basis, in particular, conducting an ast test in patients and its analysis, techniques for performing picfloumetry, assessment and treatment of asthma complications, During the study, the nurses of BTSYo institutions were introduced to the algorithms for using our special mobile application "STOP-asthma", which was developed with the aim of early detection of ba complications. For patients, it was practically taught to control the rules for keeping our individually developed diary.

Of the 200 patients living in a stable in the Syrdarya region, 30 patients were selected through a random selection. Patients were presented with 15 pikfluometers of the Omron PFM 20 brand, a UK-made Pikfloumeter by RIIAM. In the first three months, 15 patients were monitored, and in the second three months, 15 patients used a picfluometer for self-control and kept a diary for 3 months. To do this, a "self-control diary" was distributed to patients, and the patronage, in which patients participated in seminar - trainings, was supervised by nurses. After 3 months, the following indicators were analyzed in patients: the number of daytime and evening attacks, the interval between seizures, the frequency of referral to a doctor, quality of life indicators, the cost of the drug going to drugs.

At the stage of processing and analysis of research materials, methods of evidence-based medicine and Variational statistics were used. In particular, the calculation of average errors (m), reliability coefficient (t), probability of errors (p)was carried out using relative and average quantities.
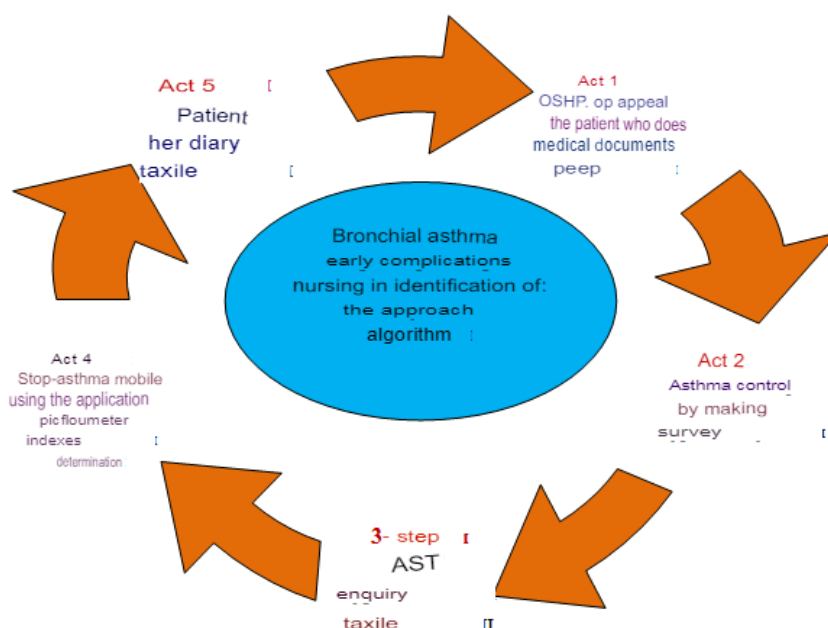
**The results obtained and their discussion.**
In the Prevention of bronchial asthma, it is very important to educate patients on self - control and the implementation of daily maintenance. BA li's training of patients in medical rehabilitation includes a set of measures aimed at achieving a reliable compensation of the disease and satisfactory control of asthma.

According to the results of the analysis of the disease histories of patients who applied to RIIAM with bronchial asthma and received inpatient treatment, the average incidence of inpatient hospitalization with complications of ba is 2-3 times a year, including the frequency of complications requiring inpatient hospitalization with ba as follows: 1 time in 1 year-6.7%, 2 times-46.7%,

According to the survey, patients used different groups of drugs to relieve an asthma attack. Also, 33% of patients used Sal'butamol, 27% - Symbicort, 23% - budesonide (Pulmicort), 17% - berodual, although budesonide was not part of the "ambulance" group of drugs to relieve asthma attacks, it was not unexpected to see it on this list. In this regard, patients do not understand the basics of treatment and do not have information about the resulting remedies.

Asthma schools are very important for these patients, where they receive information about bronchial asthma, the basics of its treatment, complications of the disease, its prevention.

The shortest time of treatment lying on RIIAM (which in our study amounted to 8.0±1.44 days) leads to a limitation of training time. Often the recommendations are short-term and irregular in nature, which is explained by the specific peculiarities of the stationary stage of emergency medical care. It is also considered to be a very short time for patients to strengthen their knowledge of their disease. In

this regard, the principle of continuity between hospital and outpatient institutions becomes extremely important. It would be desirable if patients discharged from the hospital with Ba disease turned to the area OPS in which they live and divided them into small groups and continued training in the OPS with the help of nurses. Specially developed two-stage programs (hospital-Polyclinic) provide the basis for the qualitative training of patients with asthma. Only in this case it is necessary to carry out special asthma schools for patients with asthma, as Gina insists.



**1. image. Algorithm of nursing approach for patients with bronchial asthma in outpatient conditions**

In the rehabilitation of patients with various acute and chronic pathologies, it is important to operate cooperatively and educate the patient about his illness. Such a system of medical care is designed to establish cooperative relations between the nurse, the patient and his family.

Nurses approach patients in asthma in every possible way and help control asthma. Monitoring asthma by nurses in Ba disease prevention can help achieve the best effect. The approach by nurses involves self-control, drawing up documented plans in collaboration with the patient, promoting the use of essential

medicines, and coordinating appropriate control.

The purpose of the algorithm: oshp, which serves patients with asthma, aims to assist nurses in their OPS in a way that reduces the severity of the illness and its symptoms by controlling asthma, as well as improving the quality of life. The result of our study showed that 63% of patients received information about asthma from reliable sources, 27% of them from nurses. According to the majority of patients (43%), they have sufficient information about their diseases, 17% of patients have partial information. It can be

seen that within the framework of complex control of chronic diseases, we believe that this process needs to be improved in order to improve the quality of training in the treatment process for BA li patients. At the stationary stage, such a matter as eliminating the symptoms of ba with medication, providing information about medications, self-control methods, eliminating the development of risk factors and complications that aggravate an attack, training breathing exercises are relevant. The shortest time of treatment lying in the pulmonology departments of DPMS was 8±1.44 days in our study. This results in limited study time for patients to receive information about their illness. Often, making recommendations becomes short-lived and disorganized in nature. This is explained by the peculiarities of the stationary stage of emergency medical care.

It is an extremely important issue for asthma patients to have the primary medical system under the control of OPS, oshp and KTMPS. The aim of this is that the treatment that applies to ba, the control of asthma, as well as the administration of diagnosis and the necessary clinical study should be carried out by the primary medicine network.

In order to study the effectiveness of the established asthma school, as well as the developed algorithm, patients were selected voluntarily according to the criteria of physical activity, taking into account the age indicators of 30 patients who received inpatient treatment at RIIAM several times a year directly and who were diagnosed with Stage IV BA, were able to control the disease or not. They were presented with 10 pikfluometers, branded Omron PFM 20, a British-made Pikfloumeter by RIIAM. In the first three months, 10 patients were monitored, and in the second three months, 10 patients used a picfluometer for self-control and kept a diary for 3 months. To do this, a "self-control diary" was distributed to patients, and the patronage, in which patients participated in seminar-trainings, was supervised by nurses.

After 3 months, the following indicators were analyzed in patients: health status of patients, number of seizures, interval of seizures, number of visits to the doctor, quality of life indicators, expenditure on medication.

When assessing patients ' own health status, the following results were noted, those who rated good health until they attended asthma school were not observed at all, while those who reported satisfactory accounted for 20.0%, and those who rated bad for 80.0%, while those who rated good health after Disease Control rated 55.0%, and those who rated satisfactory for 45.0%.

The results obtained showed that the number of attacks in patients decreased, in particular, if asthma attacks were observed up to 3 - 4 times a week before, after controlling the disease, it was pinched up to 1-2 times a week. While patients often went to the doctor due to asthma attacks, the number of Doctor requests after attending asthma school decreased to 2 times. In addition, when analyzing the change in these indicators 9 months after the training program, it was found that the number of hospitalizations decreased by 2.0 times, the number of planned hospitalizations by 2.4 times, as well as the number of emergency hospitalizations. The results obtained see that medical, social, economic efficiency has been achieved through the full control of the disease. The provision of patients with a pikfluometer tool will give impetus to keeping a diary. This provides the basis for early detection of the number of seizures and Risk Factors in bronchial asthma, as well as for self-control.

**Conclusion**

1.Ba in order to increase the medical level of patients in the disease and teach them to be able to provide self-help, the establishment of asthma schools in primary health care institutions and the education of BA li patients through the involvement of nurses with higher education directly in this school and the "algorithm of nursing approach to patients with ba in outpatient conditions" is an important Through this, the principle of continuity arises between the stationary and the primary zveno.

2. The developed Stop asthma mobile application program helps patients determine in which God (red, yellow, green) the patient's

condition is through the result of Pikfloumeter indicators in self-control. This device allows patients to improve quality of life indicators not only as a remedy for complications of ba, but also through constant self-control of patients, as well as to make individual plans by the Attending Physician.

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