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SCIENTIFIC PRODUCTION IN NURSING AND CARE OF PATIENTS WITH KIDNEY DISEASE

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The chronic kidney disease (CKD), defined as abnormalities in the structure or function of the kidney for more than three months, presenting health implications⁽¹⁾, is characterized as a worldwide public health issue in a growing epidemic. Consequently, there is an evident decrease in the quality of life of the affected population and high public expenses, especially in Brazil. The CKD affects approximately 11 to 13% of the world population and is strongly associated with a high risk of death and cardiovascular events^(2,3). In 2018, the Brazilian nephrology society (SBN) reported that, according to the Brazilian Dialysis Census of 2017, there were 126,538 patients in renal replacement therapy (RRT), with an estimated prevalence of 610 patients per million of the population (pmp) in dialysis in Brazil between 2011-2017⁽⁴⁾.

Regarding the epidemiological data on the CKD in the general population, a significant systematic review of the literature on the prevalence of chronic kidney disease in adults in Brazil revealed that the Brazilian studies with population representativeness did not adequately assess the disease. The authors emphasized that investigations with better diagnostic criteria used convenience sampling, which could compromise the quality of the studies. Finally, they identified that the prevalence of chronic kidney disease varied according to the method employed for defining the disease and, according to the population criteria, 3-6 million Brazilians would have the disease⁽⁵⁾.

Considering the eminently severe, epidemic, and expanding situation of renal disease in Brazil, of which preventive and therapeutic approach must be multidisciplinary, we expect a large number of sources on the subject with the primary purpose of generating scientific evidence to guide clinical decisions in the field. However, what we perceive in the nursing field is that the scientific production is still far below the potential of the professionals involved in the care of patients with kidney disease, especially during the earlier stages and considering the national context.

In the last two years, without the commitment of review status, we conducted a survey of two electronic libraries, the Scientific Electronic Library Online - SciELO and Virtual Health/Nursing Library – VHL, to obtain a brief knowledge of the state-of-the-art of the proposed theme and verified that little more than six articles were published in 2018. We found approximately 36 articles from 2017 and 2018, which represents an extremely limited number of national articles, considered even more reduced when searching for the initial stages of CKD.

Despite this, it is important to emphasize that nursing has a fundamental role in assisting the patient with kidney disease during all phases of the illness, including in the beginning, when, in general, the patient is asymptomatic, and an active search is fundamental for an early diagnosis. However, it is worth noting that very little is known on nursing care for patients with CKD since there are practically no national publications on this practice in primary care. The larger production on the subject, although still reduced, refers to nursing care during the terminal phase of the disease when the patient is in RRT.

In 2011, in an integrative review of the literature on the scientific production of nursing in nephrology, in Brazil, the authors indicated a small number of publications in this area, but with expectations of growth⁽⁶⁾. In this same year, Bastos and Kirsztajn highlighted the fact that, although the forms of CKD diagnosis were known, the number of patients who arrived at clinics in urgent need of RRT without the prior knowledge of CKD or any preventive or protective approach to renal function was impressive. They also reported that multi-professional and early care would have a high impact on the prognosis of these patients⁽⁷⁾.

Once again concerning the nursing profession, we believe that it is imperative to know the real scenario of assistance in primary care so that efforts are made in the active search of potential patients to allow early diagnosis and, consequently, improve the prognosis. However, this reality remains obscure since the most viable form of socializing the knowledge conveyed by scientific publications are still scarce. At present, much is discussed on the valuation of the nursing professional and the importance of this category in the care of patients with CKD, not only in the initial phase but also during RRT. However, for this recognition to be widely socialized and enhance professional excellence, it is essential to disseminate better forms of therapeutic approach derived from scientific evidence generated from well-designed and robust studies published in impacting scientific journals.

Considering all the exposed, we propose that all nursing care action to the patient with renal disease be based on the scientific evidence published, especially by nursing professionals in some way involved with nephrology.

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