International Journal of Scientific Research Studies

ISSN(print): Applied, ISSN(online): Applied

Volume 01 Issue 01 September 2024

Page No: 11-13

Impact of GNPs on Heart Failure Management: A Systematic Review

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ABSTRACT ARTICLE DETAILS

The role of a geriatrics nursing practitioner (GNP) in managing patients with heart failure, particularly in the administration of treatments like intravenous (IV) furosemide, is crucial for improving patient outcomes. Heart failure is a chronic condition that disproportionately affects older adults, and effective management of this condition often requires a multidisciplinary approach. GNPs, with their expertise in elderly care, play a vital role in ensuring personalized treatment, optimizing medication administration, and addressing the unique challenges that geriatric patients face.

Heart failure (HF) is a chronic and progressive condition that disproportionately affects elderly populations. The role of a Geriatrics Nursing Practitioner (GNP) in heart failure management, particularly in administering intravenous (IV) furosemide, is critical for improving patient outcomes. This systematic review investigates the impact of GNPs on heart failure management in older adults, focusing on symptom control, medication optimization, patient education, and coordination of care. A PRISMA approach is used to identify relevant studies and assess their findings.

Published On: 30 September 2024

Available on: https://ijsrs.org/

INTRODUCTION

Heart failure is a significant health concern among the elderly, affecting quality of life and increasing morbidity and mortality rates. The role of healthcare providers, particularly GNPs, is critical in managing this condition. GNPs, with specialized knowledge of geriatric care, can improve patient outcomes by providing holistic care, optimizing medication administration, and managing complex cases involving comorbidities. Furosemide, a loop diuretic, is a cornerstone in managing heart failure to alleviate symptoms associated with fluid retention. This review explores the role of GNPs in administering IV furosemide and optimizing heart failure care.

Objectives

The main objective of this review is to assess the impact of GNPs on the management of heart failure in elderly patients, with a focus on the administration of IV furosemide. Specific aims include:

- 1 .Examining GNPs' role in symptom management and early intervention.
- 2 .Investigating their contribution to medication optimization, particularly IV furosemide.
- 3 . Analyzing their role in holistic care, patient education, and coordination of multidisciplinary teams.

METHODOLOGY

Search Strategy

A comprehensive literature search was conducted using PubMed, CINAHL, Cochrane Library, and Scopus databases for studies published between January 2010 and September 2023. Keywords included "geriatric nursing practitioner," "heart failure," "IV furosemide," "elderly," and "multidisciplinary care".

Inclusion Criteria

- -Studies focusing on the role of GNPs in managing heart failure in geriatric populations.
- -Studies assessing the administration of IV furosemide by GNPs.

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- -Clinical trials, cohort studies, and observational studies.
- -Articles published in English.

Exclusion Criteria

- -Studies involving non-geriatric populations.
- -Reviews or meta-analyses without specific focus on GNPs or IV furosemide.

PRISMA Flow Diagram

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** |Phase** | **Records| ** |------| |Records identified (database search) | 198 | |Records screened after duplicates removed | 152 | |Full-text articles assessed for eligibility | 34 | |Studies included in qualitative synthesis | 15 | |

** ###PRISMA Diagram**
![PRISMA Flowchart](https://example.com/prisma-diagram)
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RESULTS

Impact of GNPs on Heart Failure Management:

.1** ###Improved Symptom Management**

Several studies highlighted that GNPs play a pivotal role in the early identification and management of heart failure symptoms in elderly patients. GNPs were found to closely monitor patients for fluid retention and intervene by administering IV furosemide when necessary. A cohort study by Fang et al. (2020) demonstrated a significant reduction in hospital readmissions among elderly heart failure patients managed by GNPs.

GNPs are adept at recognizing subtle changes in geriatric patients with heart failure. Their focus on frequent monitoring can help to identify worsening symptoms early, allowing for timely interventions such as the administration of IV furosemide to manage fluid overload.

2. Medication Optimization

GNPs are involved in optimizing complex medication regimens in elderly patients, especially those with multiple comorbidities. Calder et al. (2018) found that GNPs are skilled in adjusting dosages of IV furosemide based on individual patient responses, ensuring effective fluid management while minimizing side effects such as electrolyte imbalances and renal dysfunction.

GNPs are involved in managing complex medication regimens, which is critical in older adults who often have multiple comorbidities. They ensure the proper dosage and timely administration of IV furosemide, a diuretic that is commonly used to reduce fluid retention and alleviate symptoms of heart failure.

3. Holistic Care and Patient Education

Studies by Christensen et al. (2020) and Gray et al. (2018) emphasized the holistic approach GNPs take in managing heart failure. GNPs ensure comprehensive care by addressing nutrition, mobility, and mental health, alongside medication management. Additionally, they provide education to patients and caregivers on symptom monitoring, medication adherence, and lifestyle modifications.

GNPs provide comprehensive care that goes beyond medication management. They assess the patient's overall health, including nutrition, mobility, and mental health, ensuring that heart failure management is part of a broader care plan tailored to the needs of the elderly.

4. Coordination of Care

GNPs coordinate with multidisciplinary teams, including cardiologists, dietitians, and home health aides, to ensure comprehensive care for elderly heart failure patients. Bauer et al. (2021) reported that GNPs effectively reduce care fragmentation, improving patient outcomes and reducing healthcare costs.

GNPs often serve as care coordinators, ensuring that heart failure patients receive multidisciplinary care. They collaborate with cardiologists, pharmacists, and home health aides to optimize treatment outcomes.

5. Patient Education and Support: GNPs play a key role in educating patients and their families about heart failure management, including how to recognize symptoms, adhere to prescribed treatments, and make lifestyle changes. This support is vital for preventing hospital readmissions and promoting long-term health.

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DISCUSSION

The findings of this review underscore the critical role of GNPs in the management of heart failure in elderly patients. Their expertise in geriatric care allows for individualized treatment plans, optimizing the administration of IV furosemide, and managing complex medical regimens. Through continuous monitoring and patient education, GNPs reduce the risk of complications and hospital readmissions, thus improving patient quality of life.

Strengths and Limitations

This review highlights the importance of GNPs in elderly care, particularly in managing chronic conditions like heart failure. However, the limited number of randomized control trials in this area poses a challenge in determining causality. Future research should focus on larger, controlled studies to validate these findings.

Administration of IV Furosemide:

- Effectiveness in Fluid Management: Furosemide is a loop diuretic commonly used in heart failure patients to reduce
 excess fluid accumulation, which can alleviate symptoms such as shortness of breath and swelling. GNPs ensure the safe
 and effective administration of this treatment, monitoring for potential side effects such as electrolyte imbalances or
 dehydration.
- Monitoring and Adjustments: GNPs closely monitor patients after IV furosemide administration, tracking urine output, fluid balance, and electrolyte levels. This careful observation allows for timely adjustments to the treatment plan, ensuring optimal effectiveness and minimizing complications.
- Managing Comorbidities: In geriatric patients, heart failure is often accompanied by other conditions like renal impairment, which can complicate the use of diuretics. GNPs are skilled in balancing the need for fluid management with the potential risks, adjusting doses or supplementing treatments as needed.

CONCLUSION

The role of GNPs in managing heart failure among elderly patients is vital, particularly in the administration of IV furosemide and the provision of holistic care. Their ability to monitor patients closely, optimize medication, and coordinate care across multiple disciplines contributes to improved outcomes and enhanced quality of life in geriatric patients with heart failure.

The involvement of GNPs in managing heart failure patients, particularly in administering treatments like IV furosemide, is essential for delivering high-quality, patient-centered care. Their expertise in geriatrics allows them to tailor treatment plans to the unique needs of older adults, improving symptoms, preventing complications, and enhancing overall quality of life. Through careful monitoring, patient education, and a holistic approach, GNPs play a critical role in optimizing the management of heart failure in the elderly population.

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