

Introduction

The patients with acquired brain injury (ABI) are frequently cared in many ways. This care include interventions that are made with the aim to benefit the patient. Despite this, several researchers have suggested some kind of relationship between these interventions and the occurrence of secondary insults like increase or decrease of blood pressure, intracranial pressure, cerebral perfusion pressure and heart rate.

Objective

To determine the magnitude of changes in physiological variables during three intervention performed by the healthcare team to patients with CVD or TBI in the ICU of two hospitals in Barranquilla, Colombia.

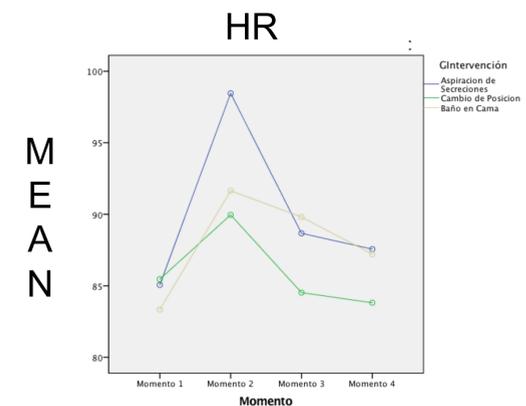
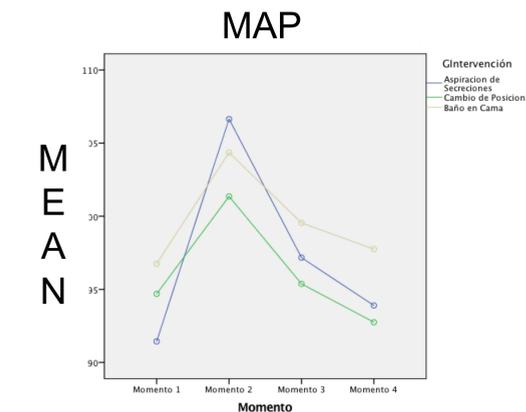
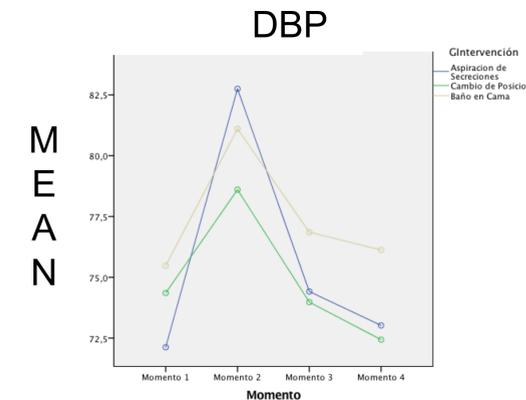
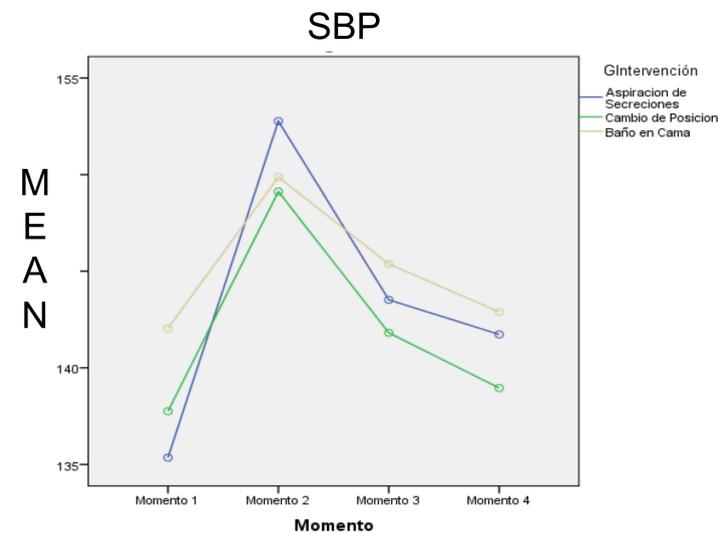
Methods

Longitudinal observational study of 48 CVD/TBI patients during bedbathing, suctioning of respiratory secretions and mobility interventions are being analyzed; Physiological variables included systolic blood pressure (SBP), diastolic blood pressure (DBP), Mean arterial pressure (MAP), heart rate (HR), respiratory rate (RR) and oxygen saturation (SatO2).

An ANOVA including the physiological variables established the changes during the intervention in each of the times in which they are being measured, M1: start of the intervention, M2: at the end of the intervention, M3: 5 minutes after the intervention ends and M4: 10 minutes after the intervention ends.

Results

SBP, DBP, MAP and HR have statistical significance difference among M1-M2 and M2-M3, M2-M4 in the three interventions



Conclusions

Changes in physiological variables during the interventions suggest that patients able to respond to changes in intracranial dynamics are at a lower risk for poor outcomes. However, when these changes become a secondary insults the risk of secondary brain injury increase.

ETHICAL CONSIDERATIONS: This project was approved by the Ethics Committee of the Universidad Nacional de Colombia.

Bibliography

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