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Emotions Experienced by Nurses in the Care of Terminal Heart Failure Patients

Marta Polanowska, Sylwia Krzemińska

Higher Medical School in Kłodzko

Correspondence address: sylwia.krzemińska@wsm.klodzko.pl

Orcid: 0000-0001-7695-0967

Summary:

The text discusses the challenges and emotional impact of caring for patients with terminal heart failure (HF) on nurses. HF is a chronic condition leading to progressive cardiac dysfunction and hypoxia, with terminal HF marked by severe symptoms like dyspnea, edema, and fatigue. At this stage, treatment focuses on palliative care to manage symptoms and improve patient comfort, emphasizing a holistic approach that addresses physical, psychological, emotional, and spiritual needs.

Nurses face significant emotional challenges, including sadness, frustration, helplessness, empathy, and compassion. These emotions can affect their psychological well-being, quality of care, and job satisfaction. The study aims to analyze these emotions and the coping strategies nurses use. Sadness and frustration stem from patient suffering and limited medical options, while empathy and compassion, though positive, can lead to emotional exhaustion and burnout.

Key words: heart failure, emotions, death

Introduction

Heart failure (HF) is a complex clinical syndrome characterized by progressive cardiac dysfunction, leading to impaired ability of the heart to supply adequate blood flow to tissues and organs, resulting in hypoxia. It is a chronic condition marked by frequent exacerbations and significant deterioration in patients' quality of life. In its advanced stage, referred to as the terminal phase, heart failure becomes irreversible, and available treatments focus primarily on symptom management and improving patient comfort [1].

Terminal heart failure is marked by severe symptoms such as dyspnea, edema, fatigue, and chest pain, which are challenging to control despite intensive pharmacological therapy. At this

stage, restoring cardiac function to a level that allows normal patient activity is not feasible, and the average life expectancy ranges from a few weeks to a few months [2,3]. As a result, care for terminal heart failure patients centers on palliative care, which aims to enhance quality of life, manage symptoms, and provide psychological support to patients and their families [4]. Palliative care in heart failure differs from traditional medical care as it emphasizes a holistic approach addressing physical, psychological, emotional, and spiritual aspects. Effective symptom management and emotional support are key elements of this care, with nurses playing a central role in ensuring patient comfort and support during the final stages of life [5].

Caring for terminal heart failure patients represents one of the most demanding tasks for nurses. The combination of patient suffering, the need to support their families, and nurses' personal experiences with the dying process generates a range of challenging emotions [6]. Studies show that the emotions experienced by nurses during palliative care for heart failure patients significantly affect their psychological well-being, quality of care, and job satisfaction [7,8].

The aim of this study is to analyze the emotions experienced by nurses caring for patients with terminal heart failure, considering the factors influencing the intensity of these emotions and coping strategies.

The literature indicates that nurses caring for terminal patients experience a wide range of emotions, including sadness, frustration, helplessness, as well as compassion and satisfaction derived from their work [9,10,11]. One of the predominant feelings is sadness, associated with direct exposure to patient suffering and the inevitability of death. Nurses may feel helpless in the face of limited medical options at this stage of the disease, exacerbating their sense of frustration [12]. On the other hand, many nurses report experiencing empathy and compassion toward their patients, which, while positive, can lead to emotional exhaustion [13,14]. Empathy helps build bonds with patients, but excessive emotional involvement may result in burnout [15]. Therefore, emotional involvement in the care of terminal patients necessitates the development of effective stress management strategies by nurses [16].

Many researchers highlight the risk of burnout among nurses working in palliative care. The high intensity of emotions such as stress, frustration, and a sense of loss can lead to chronic emotional and mental fatigue [17]. Nurses who are unable to manage their emotions effectively are particularly vulnerable to this phenomenon, which adversely affects their mental health and the quality of care they provide to patients [18,19].

Effective emotional management in nursing requires the use of appropriate coping strategies. The literature identifies two main strategies: active and passive. Active strategies, such as participating in support programs, discussing challenges with colleagues, or attending emotional resilience training, can help reduce emotional tension and improve mental well-being [20]. Conversely, passive strategies, such as avoiding emotional contact with patients, may provide short-term relief but increase the risk of burnout in the long run [21].

The impact of caring for terminal patients on nurses' quality of life Research indicates that the intensity of emotions experienced by nurses caring for terminal heart failure patients directly affects their quality of life. These nurses are more likely to encounter mental health issues, such as depression or anxiety [22,23]. On the other hand, nurses also emphasize the satisfaction derived from this type of work. Providing care for patients in the terminal stages of illness allows them to find meaning in helping others and improving the quality of life for patients in their final days [24].

The intensity of experienced emotions is influenced by several factors, such as professional experience, social support, and personal beliefs about death. Nurses with more years of service often cope better with emotional burdens due to developed adaptive mechanisms. In contrast, novice nurses may be more susceptible to stress related to direct exposure to death [25]. Social support, both from colleagues and family, plays a crucial role in reducing emotional tension. Studies show that nurses who receive regular emotional support are less likely to experience burnout [26]. An important factor is also individual attitudes toward death nurses with a more positive perspective on dying, possibly related to religious beliefs, are better equipped to handle the challenges of caring for terminal patients [27].

Conclusions

Caring for patients with terminal heart failure involves numerous challenging emotions, such as sadness, helplessness, but also empathy and satisfaction. It is crucial for nurses to develop strategies for managing these emotions, as this can improve both their mental well-being and the quality of care provided to patients. Social support, education, and the development of effective stress-coping mechanisms are essential for preventing burnout.

Implications for Nursing Practice

Caring for patients with terminal heart failure presents numerous challenges that demand both advanced clinical competencies and the ability to cope with difficult emotions. In nursing

practice, it is essential to implement measures that help nurses address these challenges and safeguard their mental and physical well-being.

First and foremost, nurses should have access to training in palliative care and emotional management. Education on symptom alleviation, communication with patients and their families, as well as dealing with stress and grief, can significantly improve the quality of care and reduce the risk of burnout [21].

Psychological and emotional support for nurses should be a priority in workplaces. Organizing regular support groups where nurses can share emotions and experiences may help reduce emotional tension and better cope with the difficulties of caring for terminal patients [28]. These programs should also include supervision and consultations with psychologists or therapists.

Promoting a healthy lifestyle among nurses, who are often exposed to chronic stress, is another important aspect. Regular physical activity, a healthy diet, and adequate sleep are critical elements that support psychophysical balance and can enhance workplace performance [18].

Another key issue is the individualization of patient care. Nurses should be trained to identify the specific needs of patients with terminal heart failure and to create care plans tailored to their individual requirements. This personalized model of palliative care can not only improve patient comfort but also provide nurses with a greater sense of satisfaction in their work.

In summary, improving nurses' working conditions, providing them with support, and developing their skills in palliative care are essential for enhancing the quality of care for patients with terminal heart failure and preventing professional burnout.

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