



QUALITY OF LIFE, QUALITY OF CARE, AND PATIENT SAFETY

DERMATOLOGICAL NURSING INTERVENTIONS IN THE PATIENT DIAGNOSED WITH GRAFT- VERSUS-HOST-DISEASE CUTANEOUS MANIFESTATIONS: AN EXPERIENCE REPORT

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Background: Hematopoietic stem cell transplantation (HSCT) is the treatment of choice for many hematologic diseases and graft-versus-host-disease (GVHD) is a serious post-allogeneic HSCT complication. The care service provided to a patient who undergoes HSCT is dynamic and requires interventions against complications due to infection and chemotherapy toxicity. In this severe context, skin care may receive less attention from patients and multiprofessional team, which contributes to the embrittlement of the dermis. According to the National Institutes of Health, GVHD can be classified as acute or chronic, ranging from grade I to IV. The graft lymphocytic aggression reflects upon various organs; upon the skin it can manifest erythroderma, desquamation, blister, and painful or pruriginous rash.

Observation: In order to improve skin resistance in response to injuries caused by lymphocytic reactions, and to reduce the risk of lesions in the immunocompromised patient, the work proposes the systematization of a skin care protocol for GVHD. The skin care topics were listed according to a survey of needs, nursing diagnosis and GVHD staging. The interventions were categorized into care and educational, contemplating hygiene, hydration, protection, promotion of self-care and self-image. The evaluation of the interventions is based on regular follow-up with physical examination, symptomatology survey and evaluation of skin moisture and oiliness conditions measured by a skin analyser.

Key message: It is important to highlight the relevance of this report as a way of sharing the challenges experienced by a dermatological nursing team in an HSCT service, assisting patients facing GVHD and helping to minimize the impact on their quality of life. The implementation of effective actions and the regular monitoring of the patient are instruments that should be discussed aiming the improvement of the care service, since there are no well defined care protocols for the management of GVHD and its various cutaneous manifestations.

