

**Challenges encountered by nurses in the nursing consultation with hypertensive patients in primary care**

*Desafios encontrados por los enfermeros en la consulta de enfermería con pacientes hipertensos en la atención primaria*

*Desafios encontrados pelos enfermeiros na consulta de enfermagem ao paciente hipertenso na atenção primária*

**Aline Silva da Fonte Santa Rosa de Oliveira<sup>1</sup>**

ORCID: 0000-0002-4070-7436

**Luciana Carneiro de Brito<sup>1</sup>**

ORCID: 0000-0002-4258-8143

**Simone Pinho Rozendo Leite<sup>2</sup>**

ORCID: 0000-0003-0684-9243

**Suely Lopes De Azevedo<sup>3</sup>**

ORCID: 0000-0003-1107-3427

**Adriana Loureiro Da Cunha<sup>1</sup>**

ORCID: 0000-0002-6971-4357

**Roziclea Estevão do Nascimento<sup>1</sup>**

ORCID: 0000-0002-3654-518X

**Thais de Rezende Bessa<sup>4</sup>**

ORCID: 0000-0003-0282-9333

**Cláudio José de Souza<sup>3</sup>**

ORCID: 0000-0001-7886-039X

**Juliana Ribeiro Manhães Da Silva<sup>5</sup>**

ORCID: 0000-0001-8478-0726

<sup>1</sup>Universidade Federal do Rio de Janeiro. Rio de Janeiro, Brazil.

<sup>2</sup>Universidade do Estado do Rio de Janeiro. Rio de Janeiro, Brazil.

<sup>3</sup>Universidade Federal Fluminense. Rio de Janeiro, Brazil.

<sup>4</sup>Instituto de Nutrição do Cérebro e Coração. Rio de Janeiro, Brazil.

<sup>5</sup>Instituto Federal da Educação, Ciência e Tecnologia da Bahia. Bahia, Brazil.

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**Corresponding author:**

Aline Silva da Fonte Santa Rosa de Oliveira  
E-mail: [alinefontesantarosa@gmail.com](mailto:alinefontesantarosa@gmail.com)

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**Abstract**

The aim was to identify the challenges of health promotion and prevention encountered by nurses in nursing consultations for hypertensive patients. This is an integrative, descriptive review, carried out between March and September 2021, on the Virtual Health Library Portal, in the following databases: Latin American and Caribbean Literature on Health Sciences, Bibliographic Index Español en Ciencias de la Salud, Online Medical Literature Analysis and Retrieval System, Nursing Database. The descriptors were: Nursing Consultation, Arterial Hypertension and Primary Care, using the Boolean operator "AND". Inclusion criteria: articles in Portuguese, English, Spanish; available in full; and indexed in the last 05 years. Exclusion criteria: incomplete articles and those outside the purpose of the research. Of the selected articles, 13 met the proposed objective. In these, it was observed that the Nurse in Primary Health Care has as a challenge both to motivate adherence and to encourage the maintenance of the treatment of the hypertensive patient. In this context, in which there is an increase in the number of people with SAH, it is essential that there is resoluteness of assistance in the UBS so that the recommended protocols are fully adhered to by this population.

**Descriptors:** Office Nursing; Hypertension; Primary Health Care; Health Policy; Nursing.

**Resumen**

El objetivo fue identificar los desafíos de promoción y prevención de la salud encontrados por los enfermeros en las consultas de enfermería de pacientes hipertensos. Esta es una revisión integradora, descriptiva, realizada entre marzo y septiembre de 2021, en el Portal de la Biblioteca Virtual en Salud, en las siguientes bases de datos: Literatura Latinoamericana y del Caribe en Ciencias de la Salud, Índice Bibliográfico Español en Ciencias de la Salud, Análisis de Literatura Médica en Línea y Sistema de Recuperación, Base de Datos de Enfermería. Los descriptores fueron: Consulta de Enfermería, Hipertensión Arterial y Atención Primaria, utilizando el operador booleano "AND". Criterios de inclusión: artículos en portugués, inglés, español; disponible en su totalidad; e indexados en los últimos 05 años. Criterios de exclusión: artículos incompletos y fuera del objeto de la investigación. De los artículos seleccionados, 13 cumplieron con el objetivo propuesto. En estos, se observó que el Enfermero en la Atención Básica a la Salud tiene como desafío tanto motivar la adherencia como incentivar el mantenimiento del tratamiento del paciente hipertenso. En este contexto, en el que hay un aumento en el número de personas con HAS, es fundamental que haya resolutividad en la asistencia en las UBS para que los protocolos recomendados sean cumplidos íntegramente por esta población.

**Descriptoros:** Enfermería de Consulta; Hipertensión; Atención Primaria de Salud; Política de Salud; Enfermería.

**Resumo**

Objetivou-se identificar os desafios da promoção e prevenção a saúde encontrada pelo enfermeiro na consulta de enfermagem a pacientes hipertensos. Trata-se de revisão integrativa, descritivo, realizado entre março e setembro de 2021, no Portal Biblioteca Virtual de Saúde, nas bases de dados: Literatura Latino-Americana e do Caribe em Ciências da Saúde, Índice Bibliográfico Español en Ciencias de la Salud, *Medical Literature Analysis and Retrieval System on-line*, Base de dados da Enfermagem. Os descriptores foram: Consulta de Enfermagem, Hipertensão arterial e Atenção Primária, sendo utilizado o operador booleano "AND". Os critérios de inclusão: artigos em português, inglês, espanhol; disponíveis na íntegra; e indexados nos últimos 05 anos. Os critérios de exclusão: artigos incompletos e os fora do propósito da pesquisa. Dos artigos selecionados 13 atenderam ao objetivo proposto. Nestes, observou-se que o Enfermeiro na Atenção Primária em saúde, tem como desafio tanto motivar a adesão como estimular a manutenção ao tratamento do paciente hipertenso. Neste contexto em que existe acréscimo ao número de pessoas portadoras de HAS, é imprescindível que haja resolutividade da assistência nas UBS para que os protocolos preconizados sejam aderidos de forma integral por essa população.

**Descriptoros:** Enfermagem no Consultório; Hipertensão; Atenção Primária à Saúde; Política de Saúde; Enfermagem.



## Introduction

Arterial hypertension (AH) is clinically characterized by a sustained increase in blood pressure greater than or equal to 140x90 mmHg, at least on two occasions, measured outside the office, using the correct technique, without the use of antihypertensive medication, through Ambulatory Blood Pressure Monitoring, Arterial Blood Pressure (MAP), Home Blood Pressure Monitoring (HRBP), and Self-Measurement of Blood Pressure (AMPA)<sup>1</sup>.

According to the Brazilian Society of Cardiology, not infrequently, AH is associated with metabolic diseases, functional and structural changes in target organs, in addition, they are exacerbated by the presence of other risk factors (RF), such as dyslipidemia, obesity abdominal pain and diabetes mellitus (DM).

SAH stands out as a pathology whose incidence has increased substantially, and therefore stands out as a Public Health problem, as a challenge for nurses working in Primary Health Care. Bad eating habits, potentiated by the excessive consumption of ultra-processed foods, obesity and a sedentary lifestyle significantly influenced the increase in this disease<sup>2</sup>.

In Brazil, approximately 32.5% (36 million) of adult people are affected by systemic arterial hypertension (SAH), of which more than half are elderly, about 60%. This pathology directly or indirectly contributes to 50% of deaths from cardiovascular diseases (CVD). In addition, cardiac and renal complications and cerebrovascular accident (CVA) both promote a high socioeconomic impact that influence, for example, the loss of work productivity and family income, as it is the main cause of death in the country<sup>1</sup>.

In 2016, the Brazilian Society of Cardiology (SBC) elected as non-modifiable risk factors age and premature family history of cardiovascular disease (men > 55 years and women > 65 years); sex and ethnicity (prevalence among women (24.2%) and black people (24.2%). The prevalence and severity of SAH in the black population are higher, as is the incidence of stroke, malignant arterial hypertension, and chronic renal failure (CRF), which may be related to ethnic or socioeconomic factors<sup>3</sup>.

The modifiable risk factors are listed below, and those that can somehow be intervened: overweight (waist circumference greater than 102 centimeters in men and greater than 88 centimeters in women) and obesity Body Mass Index (BMI) greater than or equal to 30 kg/m<sup>2</sup>; alcohol intake; salt intake; sedentary lifestyle; dyslipidemia, stress; smoking<sup>3</sup>.

The nurse working in primary care is able to offer care in an individualized way from the collection of data, carried out in the anamnesis and physical examination, the elaboration of a nursing diagnosis and to finally outline the nursing interventions with a view to achieving results. previously established sequentially making the evaluation of these cares that must be procedural and the records of these actions in the patient's chart. In this aspect, nursing has the Systematization of Nursing Care (SAE) as an excellent working methodology. Resolution No. 358, of 2009, considers SAE as a method of the work process, which evidences the contribution of nurses in the health care of the

population, helping nurses to make decisions, predict and evaluate consequences<sup>4</sup>.

The implementation of SAE in the Basic Health Unit (BHU) allows nurses to assist users with CNCs at different stages of their lives. This favors their adherence to treatment and contributes to an effective change in lifestyle, which is of fundamental importance in monitoring and raising awareness of users about their health condition<sup>5</sup>. Success in treatment must go beyond the traditional practices used in the sphere of primary care, therefore, nurses in the exercise of their profession must act so that their work positively interferes to reduce both lack of adherence to treatment and late diagnosis and the absence of information about the disease, as these are variables that influence the therapeutic resolution to the client with this pathology<sup>6</sup>.

The importance of intensifying nursing practices that promote the effectiveness of the treatment of hypertensive patients in Primary Care is verified, using reception, empathy, the nursing consultation (NC) with active listening that promotes interpersonal relationships and monitoring of the patient<sup>6</sup>.

The practice of the nursing team in public health programs is important due to its work with users in the various health services, through a holistic and individualized practice. Thus, systematized EC should have as its main focus the identification and prevention of risk factors that influence the treatment and control of chronic diseases. Most of the time, users find it difficult to follow up the treatment due to the lack of knowledge about the diseases and possible complications of their disease, which makes its control difficult and can cause irreparable damage to health.

Managerial actions such as the implementation of EC can contribute to the monitoring of users in the self-care process and in solving the problems that affect patients with chronic non-communicable diseases<sup>5</sup>. Thus, the objective of the study is to identify the main challenges regarding health promotion and prevention encountered by nurses in nursing consultations with hypertensive patients. The improvement in the performance of nurses in primary health care and the implementation of effective strategies can stimulate patients' adherence to the treatment of SAH, promoting the involution of possible complications, in addition to mitigating both the expenses with hospital admissions, paid mostly by the System Unified Health System (SUS), as well as reducing Social Security costs in cases of permanent disability, thus promoting numerous benefits to society.

Despite the problems encountered, in most Primary Care units, it is essential that nurses guarantee the quality of care during the nursing consultation, using all possible resources, so that full adherence to treatment is encouraged, promoting partnership between the nurse and the patient and their family and there is a decrease in cases of complications in which the primary disease is SAH.

Faced with the increase, both in individuals with SAH and in the complications that this pathology culminates, in cases of ineffective treatment, it is essential that there is the development of specific and educational actions that contribute to the professional qualification of nurses and their team, aiming at solving care and the decrease in



morbidity and mortality in health services, specifically in this population.

Although the literature reports the effectiveness of conventional actions in the treatment of patients with SAH, it is currently undeniable that there is a need for innovation in the approaches used by nurses so that strategies increase actions and achieve the expressive goals of health promotion and reduction in incidence of possible complications.

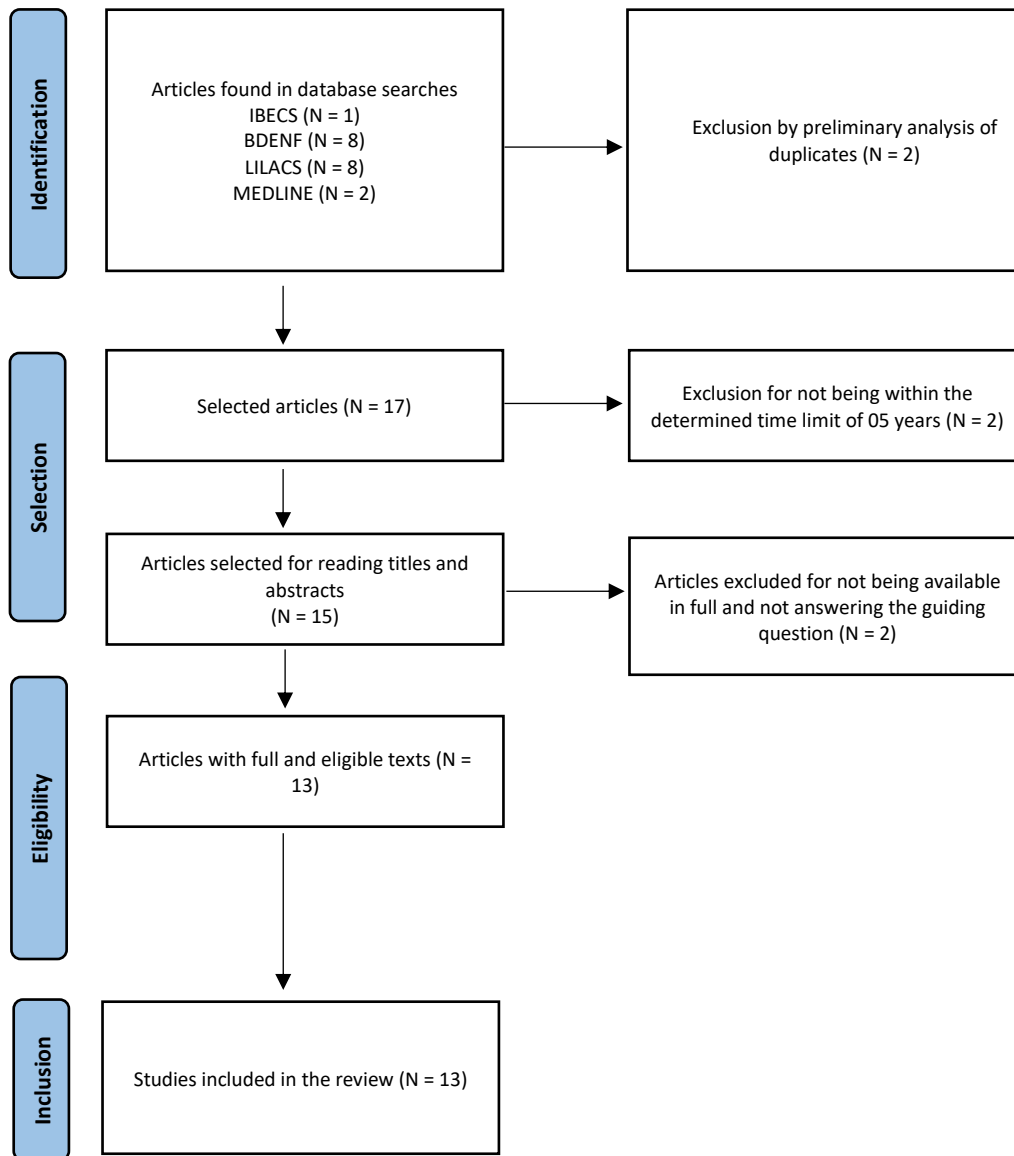
**Methodology**

This is a study with a qualitative approach, using the Integrative Literature Review (RL), which provides the

synthesis of knowledge and the incorporation of the applicability of results of significant studies in practice. Its development was based on the six steps that make up this method, they are elaboration of the guiding question; search or sampling in the literature; data collect; critical analysis of the included studies, discussion of the results and presentation of the integrative review<sup>7</sup>.

To facilitate the analysis process, the PRISMA instrument was used, that is, a search strategy that organizes the data analysis through an explanatory flowchart containing the following topics: identification, selection, eligibility and inclusion<sup>8</sup>.

Figure 1. Flowchart of selected peer-reviewed articles. Rio de Janeiro, RJ, Brazil, 2021



The present research had as a guiding question: What are the strategies used by the Nurse, in Primary Health Care, during the nursing consultation that can influence the adherence to the treatment of the hypertensive user?

The search was carried out between March and September 2021, on the Virtual Health Library Portal (BVS), in the following databases: Latin American and Caribbean

Literature in Health Sciences (LILACS), Medical Literature Analysis and Retrieval System online (MEDLINE), Bibliographical Index Español en Ciencias de la Salud (IBECS) and Databases of Nursing (BDENF), being descriptors selected for the search: Nursing Consultation, Arterial Hypertension and Primary Care, both using the Boolean operator "AND".



The inclusion criteria adopted for the search were the following: articles made available in full, in the selected databases, which present adherence to the theme, which are written in Portuguese, Spanish and English, published between the years 2016 to 2021, with a view to find evidence of the subject of study. The exclusion criteria adopted were: scientific productions that presented only the abstract and publications that did not address the proposed objective of the work, resulting in 19 articles, being excluded

2 duplicates, 17 articles in full, of these, 13 met the purpose of the research.

**Results and Discussion**

According to the inclusion and exclusion criteria, 13 articles published in national journals were selected, grouped in Chart 1, containing year, study type, publication title, author and results.

Chart 1. Table of the search performed in the databases. Rio de Janeiro, RJ, Brazil, 2021

Year	Study type	Publication title	Author (s)	Results
2016	Cross-sectional study.	Hypertension Control at the Primary Health Care: A Comparison Among Portuguese Natives and Portuguese Speaking African Countries Immigrants	Elisa Lopes, et al.	786 treated hypertensive patients participated (participation rate: 71%): 449 natives and 337 immigrants. Of these, 46% had controlled hypertension. Diastolic blood pressure was higher in younger immigrants associated with male gender, non-adherence to treatment, low education.
2016	Exploratory descriptive study with a quantitative approach.	Risco para lesão renal aguda em hipertensos e diabéticos na atenção primária à saúde	Stanlei Luiz Mendes de Almeida Kamilla Grasielle Nunes da Silva Marcia Cristina da Silva Magro.	A total of 79 patients were followed, the majority (74.7%) were female, with a mean age of 6010 years. Of the total percentage of the sample, 5.1% developed renal dysfunction according to the RIFLE. The most common comorbidity among patients was arterial hypertension (94.9%).
2016	Case study.	Programa Hiper Dia e suas repercussões sobre os usuários	Darla Lusia Ropelato Fernandez, Sandra Helena Isse Pollaro, Lucia Hisako Takase Gonçalves.	Through the study, three patterns of meaning were conceived: Precariousness in the management of Hiper Day; Users' lack of adherence to the practices of controlling Arterial Hypertension (AH); and Diabetes Mellitus (DM) and poor coping with chronicity.
2017	Quantitative, descriptive study.	Perfil clínico-epidemiológico e adesão ao tratamento de idosos com hipertensão	Ana Larissa Gomes Machado et al.	The findings are similar to other studies with hypertensive elderly, highlighting the predominance of females (68.3%), however, not having a caregiver 58.6% increases even more the difficulty of adherence, and that forgetting the medication still represents a major obstacle for the elderly.
2017	Cross-sectional descriptive study.	Medidas no farmacológicas en personas hipertensas atendidas en una consulta de Enfermería en Atención Primaria	Beatriz Mota Pérez, Luis Ignacio Mendibil Crespo.	121 people participated in the study. 11% lead a healthy life. The others were oriented according to the group to which they belonged: practice or not of regular physical activity, alcohol intake, healthy diet and sodium intake, smoking.
2017	Cross-sectional descriptive study.	Task shifting in the management of hypertension in Kinshasa, Democratic Republic of Congo	Aimée M Lulebo et al.	The study included hypertensive female patients (53.1%), with a mean age of 59.5 ± 11.4 years.
2017	Exploratory study.	O papel da enfermagem na atenção básica para minimizar os agravos das crises hipertensivas nos serviços de urgência e emergência	Annellyne Ferreira França et al.	The study showed that there is a need for better nursing conduct with the team and the patient at the primary level of Health, through a quality consultation based on the Ministry of Health's notebooks and adequate guidelines, which will contribute to the prevention of hypertensive crises and their aggravation, culminate in the adherence of clients to the treatment of hypertension.
2017	Experience report.	Consulta de enfermagem para pessoas com diabetes e hipertensão na atenção básica: um relato de experiência	Priscila Pereira Santiago da Encarnação Eglia Sara Almeida dos Santos Margarete Costa Heliotério.	The study highlighted the importance of light technology to capture a demand hitherto distant from the Unit, requiring the strengthening of users' access to the service, in order to reduce the distance between comprehensive care and the qualification of care.
2018	Quantitative and cross-sectional study.	Risco cardiovascular em usuários hipertensos da atenção primária à saúde	Ludmilla Borges dos Santos.	A study revealed that in female, elderly, hypertensive patients associated with DM, CHF, AMI and continuous use of diuretics evolved with a higher risk of cardiovascular events.
2018	Randomized study.	Protocolo de acupuntura a laser para hipertensão arterial sistêmica essencial: ensaio clínico randomizado	Raphael Dias de Mello Pereira; Neide Aparecida Titonelli Alvim; Claudia Dayube Pereira; Saint Clair dos Santos Gomes Junior.	Six sessions of standard and sham laser acupuncture were performed for 24 min over a 6-week period, where a significant reduction in systolic and diastolic blood pressure was observed in the participants in the arm that underwent intervention.



2019	Experience report.	Intervenção de saúde sobre hipertensão e diabetes	Fernando Henrique Meneses da Silva et al.	Faced with the non-adherence of hypertensive and diabetic patients to the Hiper Dia consultations and, with the help of the Arch steps by Charles Maguerez, a health intervention was carried out in which the participants were offered Nursing consultations with: checking blood pressure, blood glucose and weight test. A nutritious snack is distributed after the consultation, emphasizing the importance of a healthy diet, as well as encouraging the correct practice of regular physical activity, making this process essential for the control and treatment of diseases.
2019	Uncontrolled clinical trial.	Efetividade da consulta de enfermagem na adesão ao tratamento da hipertensão arterial sistêmica	Beatriz Amaral Moreira Mota; Fernanda Moura Lanza.	There was a statistically significant difference in adherence to the treatment of systemic arterial hypertension after the nursing interventions ( $p=0.102$ ), which were performed individually and collectively. "Willingness for increased control of the therapeutic regimen" and "Sedentary lifestyle" were the most prevalent Nursing Diagnoses.
2021	Methodological study.	Consulta de Enfermagem na Atenção Primária à Saúde: Cuidando das pessoas com doenças Cardiometabólicas	Maria Clara Moreira Matias Uiara Aline de Oliveira KaizerII Thaís Moreira São – João.	The questionnaire had a high content validity index (CVI = 0.96) and moderate applicability (due to the time of application).

Regarding the years of selected publications, it is analyzed that in 2016 they obtained (n=3; 23.07%); 2017 was the largest year of publications related to the topic (n=5; 38.45%), 2018 and 2019 (n=2; 15.38%) publications respectively and 2021 (n=1; 7.69%). After analyzing and categorizing the articles, we can list them in 03 categories described below.

### Nursing consultation for patients with arterial hypertension in primary care

The Nursing consultation is proposed with the main objective of carrying out health education and guidance, stratification of cardiovascular risk, monitoring of anthropometric measurements, and inserting the user in this process, encouraging and promoting self-care<sup>9</sup>.

Some studies show that in order to perform a quality nursing consultation, long-term follow-up is necessary, since the nurse uses behavior and habits change, as well as non-drug treatments, and for the prevention of complications, the consultation needs to be based on scientific evidence<sup>10</sup>.

The Nursing Process is a method that systematizes nursing care for the patient and requires clinical reasoning from nurses, so that they can identify the main needs of the individual, enumerate the diagnoses, using NANDA, NOC and NIC taxonomy and from these, plan the main care and evaluate its effectiveness. However, there is still a gap between theory and practice<sup>10</sup>.

According to a study, the nursing consultation in Primary Health Care strengthens the bonds between the professional and the patient, enabling their autonomy in the face of the chronicity of the disease, as well as differentiating the identity of the nurse in the care process. Also according to the study, the implementation of an in-depth data collection model is defended, containing socioeconomic information and possible vulnerabilities that can be consulted later, and a set of ICNP diagnoses, according to the needs found in care basic<sup>11</sup>.

However, there are some obstacles that weaken the execution of the nursing consultation in primary care.

The following stand out: lack of physical space to perform, deviation from the function, the multiple functions performed by the nurse in the context of the Family Health Strategy, or even the lack of incentive to perform and even the lack of understanding by the nursing professional about the nursing process<sup>12</sup>.

Last but not least, the nursing consultation for hypertensive patients is still undervalued due to a portion of the population, which still prioritizes specialized medical care as the ideal form of treatment, such paradigms exist and disqualify the nursing consultation, which is an important tool in the treatment of SAH<sup>10</sup>.

### Factors that favor non-adherence to the treatment of patients with arterial hypertension

The precariousness of nursing care is a factor that negatively influences the process with regard to adherence to treatment and the lack of professionals makes service difficult and discourages the user who, not infrequently, needs to be rescheduled for future appointments, promoting discontent. In addition, the scarcity of drugs in the pharmacy makes it impossible to last longer in the treatment, as customers are unable to maintain the regularity essential to the therapy<sup>13</sup>.

Other studies describe that certain patients do not adhere to the pharmacological treatment as prescribed to avoid the side effects that some drugs promote. Other users drop out due to lack of understanding of the prescribed therapy and there are still those who subdue the disease due to the absence of symptoms<sup>13</sup>.

According to the study, one of the variables that hinders the treatment and adherence of hypertensive patients, especially African immigrants, is socioeconomic conditions and access to health services<sup>14</sup>.

As a study describes, factors that can influence the process of adherence to the treatment of SAH are: some cultural aspects, lack of knowledge about the disease, the need to adopt changes in habits and lifestyles of users and the devaluation of education groups in health, because such meetings are not understood as a space for exchanging



experiences, reflections, learning and construction of coping strategies<sup>10</sup>.

### Strategies used by nurses to increase treatment resolution

Communication is essential for promotion and adherence to treatment and it is up to the nurse to establish a relationship with patients and use it as a tool for care. Such a bond between the professional and the patients with chronic degenerative diseases is characterized as an indispensable means for the success of the control of the diseases. Therefore, operationalizing the reception and worrying about equity, influence the care process, facilitating both adherence and therapeutic longevity of these users<sup>15</sup>.

For resoluteness in the treatment, the encouragement and presentation of non-pharmacological strategies such as weight control, reduction of sodium intake; adoption of healthy eating habits; support for reducing the consumption of alcoholic beverages; encouraging smoking cessation and regular physical activity are important and should be used as part of the treatment<sup>16</sup>.

Elderly people, in particular, must be monitored by the team in particular, as the difficulty faced in relation to the identification of medicines, the time of ingestion, either due to illiteracy, or decreased visual acuity, and also due to senility that favors forgetfulness is identified<sup>17</sup>.

Actions carried out by the nurse together with the multidisciplinary team based on the protocols of the Ministry of Health, associated with an approach focused on the needs of the user with CNCD, favor adherence and reduce the risk of emergencies and future complications<sup>18</sup>.

The stratification of cardiovascular risk is fundamental, because through the Framingham score it is possible to classify the risk of each individual, making it possible to increase resolution in a specific way and through longevity in the service to prevent possible complications<sup>19</sup>.

The lectures and workshops in groups aim at health education and are important to offer information to the population, provide an exchange of experiences and stimulate actions that promote lifestyle changes. Health education should preferably be carried out by nurses who are trained to perform this activity with a view to health promotion and disease prevention<sup>13</sup>.

According to a study, the use of health education favors the quality of life of hypertensive users and, associated with monitoring and stimulating self-care, are essential for adherence and treatment to achieve the desired success<sup>20</sup>.

Early identification of risk for kidney injury in patients with SAH, in primary care through preventive strategies, reduces the risk of progression to stages of chronicity<sup>21</sup>. Users with NCDs, in studies, point out that patients who are using diuretics are at greater risk for cardiovascular events. Therefore, it is necessary to provide comprehensive and preventive care that qualitatively prolongs the life of hypertensive users<sup>21,22</sup>.

Nursing care is directed towards the recovery and well-being of the individual, with the main focus being person-centered care, using interpersonal relationships, with active listening, in a holistic way within the health-disease process. The resoluteness of the treatment tends to effectively reduce the need for hospitalization and the complications of the disease<sup>11</sup>.

The management of SAH should be promoted at all levels of health. However, in PHC, as it has the characteristic of promotion and prevention, it should be emphasized, since the high number of individuals affected by chronicity, reflects in high cost at the hospital and social security level<sup>23</sup>.

### Final Considerations

Low adherence to drug therapy represents an important factor that directly affects the treatment of patients, in addition to increasing the chances of complications to the patients' health, allowing occurrences such as stroke, acute myocardial infarction (AMI), heart failure (HF) and chronic renal failure (CRF).

Given this scenario, it becomes relevant that the strategies used by nurses during the nursing consultation promote changes in this reality and enhance the resolution and longevity of treatment. For this, it is essential that nurses engage in the search for strengthening adherence. They should lead the patient to comply with the recommendations, in addition to allowing the inclusion of the family, aiming to increase the effectiveness of the treatment.

Success also depends on the commitment and responsibility of health professionals who must use all available knowledge seeking to understand the patient about the importance of treatment and the harm of abandoning therapy.

Therefore, this study identified that it is extremely relevant to develop research that promotes innovations in strategies to deal with both the problem of lack of adherence to treatment and increase the resolution of nursing care by the professional nurse in the treatment of SAH that it represents an exponential problem in public health in Brazil.

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