

# *Capacitación del personal de enfermería para la atención a la preeclampsia*

## *Nursing staff training for preeclampsia care*

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**RESUMEN:** En el presente trabajo se realiza una sistematización teórica relacionada con la capacitación a los profesionales de enfermería para la atención integral a gestantes que presentan preeclampsia. Se emplearon métodos del nivel teórico tales como el analítico-sintético, el inductivo-deductivo e histórico-lógico para resumir las posiciones más actualizadas con respecto al tema objeto de estudio. Las principales conclusiones, como resultado de la revisión de la literatura científica, corroboran la importancia de la capacitación al personal enfermero en aspectos referidos al conocimiento de los signos y síntomas de la enfermedad y la educación sanitaria así como otras acciones interventivas en estos pacientes.

**Palabras clave:** Capacitación; Habilidades profesionales; Personal de Enfermería; Pre-Eclampsia; Embarazo; Instrucción; Educación maternal; Cuidados de Enfermería

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**ABSTRACT:** In the present work, a theoretical systematization related to the training of nursing professionals for the comprehensive care of pregnant women with preeclampsia was carried out, using theoretical methods such as the analytical-synthetic, inductive-deductive and historical-logical to summarize the most updated positions regarding the subject under study. The main conclusions, as a result of the review of the scientific literature, corroborate the importance of training nursing staff in aspects related to the knowledge of the signs and symptoms of the disease and health education as well as other interventional actions in these patients.

**Keywords:** Training; Professional skills; Nursing staff; Pre-Eclampsia; Pregnancy; Instruction. Maternal education; Nursing care

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## **Introduction**

A study conducted by the American College of Obstetricians and Gynecologists (2022) revealed that, worldwide, between 15 and 20 percent of pregnant women present some type of obstetric emergency each year as a result of diseases related to this period, childbirth or the puerperium.

Among the most frequent are preeclampsia, eclampsia, hemorrhage and puerperal sepsis.

Preeclampsia, which is the subject of this study, is considered to be a specific hypertensive disorder of pregnancy which generally appears after 20 weeks of gestation and can have a negative impact on both the mother and the fetus.

The above clarifications show that patients with this disease require special attention from the nursing staff as part of the health professional involved in their care in the different health institutions where they are (hospitals, maternity homes or outpatient care).

In this sense, it has been recognized by several experts in the field that, in general, the interventional actions required by patients are in correspondence with the disease they suffer from, for which a work algorithm is used that differs in terms of the way they are cared for and properly managed.

Taking into account the above mentioned, as well as the systematization of the works consulted, it is necessary to improve the preparation of these health personnel by providing them with knowledge that allows the development of professional skills, in order to guarantee an integral nursing intervention of quality to pregnant women with these obstetric emergencies.

In this direction, it is pointed out that education is a continuous process that accompanies human beings from their origin and remains throughout their lives.

Hence, nursing education implies the socialization of knowledge, values, principles and techniques in the health care of people who require it, which in its broadest framework is conceived as the possibility of autonomy for the creation of projects through which to develop their human dimension (Chiodelli, Lenise, 2007).

That is why nurses must be permanently updated in terms of the knowledge necessary for the provision of services to patients who require it.

In this endeavor, the different training programs that are implemented play an important role.

This research addresses some of the theoretical and methodological aspects related to the training of nursing personnel, specifically those who work with patients with preeclampsia, due to the connotation that this disease has for both (pregnant woman and fetus).

## **Development**

### **Nursing staff training for the care of pregnant women with preeclampsia**

Early detection and management of preeclampsia are essential to prevent the complications of this disease.

Several authors have referred to preeclampsia as one of the most dangerous diseases suffered by pregnant women and it usually occurs after 20 weeks of pregnancy.

This specific disorder of pregnancy presents, among others, the following symptoms:

- Presence of high blood pressure and proteinuria (The latter is not necessary to occur in all cases of pregnant pregnant pregnant women).
- Although proteinuria does not necessarily occur in all pregnant women with preeclampsia, it may appear with other symptoms such as decreased renal function, pulmonary edema, liver damage and coagulation disorders.
- Swelling of the hands and face may appear suddenly.
- Nausea or vomiting
- Headaches
- Blurred vision
- Upper and right abdominal pain

According to studies, the precise cause of the onset of preeclampsia is unknown. However, many researchers believe that it is related to problems in the placenta during the gestation period.

It is no less important to specify how some risk factors in the development of this disorder include a family history of preeclampsia, multiple pregnancies, diabetes, obesity and chronic hypertension.

If pregnant women who develop preeclampsia do not receive adequate treatment, it can **have serious complications for both (mother and fetus)**.

These include eclampsia, which is a severe form of preeclampsia, causing renal failure, seizures, HELLP syndrome (elevated liver enzymes, plateletopenia and hemolysis).

In addition to the aforementioned symptoms, the lack of timely treatment could result in premature delivery, low birth weight and other complications for the newborn.

Therefore, nurses in charge of addressing these key points **require a high level of training to provide comprehensive and quality care to pregnant women** suffering from preeclampsia, which, as mentioned above, is one of the most dangerous hypertensive disorders during pregnancy.

To face this difficult task, nurses must develop the professional competence that allows them to put into practice the necessary knowledge for the management of each of the essential aspects that are included in the care required by the patients in their care, making the preparation of this personnel a social necessity.

In relation to nursing education, many researchers agree that, at present, Latin American countries have experienced great progress in this process, especially in the implementation of curricular plans that have been subject to self-assessment, evaluation and accreditation as a sign of commitment to the quality required by the teaching-learning process (Castrillón, 2008).

However, this panorama does not show the same level of progress since there are some programs whose elaboration still preserves the precepts of a traditionalist pedagogy, supported, in addition, by the biomedical model and morbicentrism, which, making a deep analysis, are not in line with the professional development nor discuss the advances that the discipline has had (Rosagenla, Coelhl, 2004). (Rosagenla, Coelhl, 2004).

In this context and after reviewing the literature, the authors of this paper agree with the definition of training provided by Flores and Alonso (2006).

These researchers analyze training as an active and permanent process consisting of the acquisition, maintenance, renovation, reinforcement, updating and increase of knowledge, skills and attitudes that allow the personnel who receive it to face and solve, or in the case that allows it, contribute to improve problems with the objective of preserving their professional competence and attitudes.

Hence, nursing training is not understood as a moment but as a process that is carried out on a permanent basis.

The purpose, in addition **to providing the personnel who receive it with knowledge**, is to ensure that this knowledge can be updated, reinforced and increased in accordance with scientific advances.

In this endeavor, the development of specific professional skills in nursing personnel is among the greatest aspirations.

In the specific case of this work, nursing professionals should have knowledge that allows the timely detection of complications that may appear, **developing a set of skills among which is the nursing diagnostic skill in patients with preeclampsia and eclampsia.**

In this sense, Davon and Elias (2024) defined the nursing **diagnosis in patients presenting preeclampsia and eclampsia as:**

(...) process conformed by a system of academic actions, practices revealing the domain of knowledge that possesses nursing and diagnosis in particular, related to preeclampsia and eclampsia, that allow you to identify, interpret, explain and argue the DE-PEO/PEgE, expressing an ethical and humanistic attitude. (p. 5)

With respect to the nursing **diagnostic skill in patients presenting preeclampsia and eclampsia**, the reference authors consider it to be the:

Mastery expressed by the nurse of the system of relative academic, practical and attitudinal actions and operations, which allow him/her to identify, interpret, explain and argue the real and risk nursing diagnosis in patients with obstetric emergency due to severe pre-eclampsia and eclampsia. (p. 5)

While defining the term **Development of nursing diagnostic skills in patients presenting with pre-eclampsia and eclampsia** (DE-PEO/PEgE) as:

(...) actual level reached by the nurse in the mastery of academic, practical and attitudinal actions and operations in the process of familiarization, understanding and application of the system of contents related to DE-PEO/PEgE. (p. 5)

The theoretical position assumed in this research is consistent with the criteria of authors such as Galdeano (2003), Carvalho *et al.* (2009) and Silva, da Lucena (2011) referring to the fact that the execution of the nursing diagnosis in patients presenting preeclampsia and eclampsia is conceived as a specific professional nursing skill which implies a correct clinical interpretation of the responses of users to current and growing health problems.

On the other hand, it is a skill that implies a potential expression of diagnostic reasoning ability that justifies the selection of nursing interventions to obtain the desired results, in which the nursing staff has a great responsibility.

Authors such as Carmona *et al.* (2015) and Sabbagh *et al.* (2015) allude to the possible nursing diagnoses in correspondence with the 14 needs of Virginia Henderson, highlighting the following:

- Breathing normally
- To eat and drink adequately

- Eliminate through all body pathways
- Moving and maintaining proper posture
- Sleeping and resting
- Dressing and/or grooming
- Maintaining body hygiene and skin integrity
- Maintaining personal safety by avoiding environmental hazards
- Maintaining body temperature
- Communicating with others
- Beliefs and values
- Work and fulfillment
- Develop play and recreational activities
- Learning

Training programs related to preeclampsia that are designed and delivered to nursing professionals should incorporate **a system of knowledge** that nurses need in professional practice.

An example of this is the **therapeutic interventions** suggested by Nursing Intervention Classification (NIC) 6680 which are aimed at:

- Vital Signs Monitoring
- NIC 4200: Intravenous Therapy
- NIC 0590: Management of urinary elimination
- NIC 5614: Teaching: Prescribed diet

NANDA diagnosis 00134: Self-reported pregnancy-related nausea.

The expected outcome of the therapeutic intervention is the control of nausea and vomiting.

To this end, it is suggested to work on:

NIC 1450: Management of nausea (1450).

- Teach a high-carbohydrate and low-lipid diet, as appropriate.
- Encourage the patient to eat small amounts of food that are appealing to those with nausea.
- Use frequent oral hygiene to promote comfort, unless it stimulates nausea.

- Reduce or eliminate personal factors that trigger or increase nausea such as: anxiety, fatigue, fear, and lack of knowledge.
- It is also important to address the different aspects to be taken into account in the nursing care of pregnant patients with preeclampsia elements such as:
  - Continuous monitoring both maternal and fetal and management of preeclampsia.
  - Medication administration
  - Fluid and electrolyte control
  - Comprehensive assessment of the pregnant woman for signs and symptoms of preeclampsia (proteinuria, edema, neurological symptoms and hypertension).
  - Weight control
  - Well-being of the mother and fetus.
  - Communication, support and health education for both the pregnant patient and her family.

A no less important aspect to incorporate in training programs is that which has to do with **nursing interventions**.

In this sense, it is necessary to highlight how these nursing interventions focus, in addition, on symptom control as well as on preparing the pregnant woman and her family for any eventuality during the gestation period and childbirth.

In this process of care and intervention for patients with preeclampsia, everything related to the **development of communication skills** of the nursing staff is essential in order to allow these professionals to carry out an adequate **health education**.

To this end, work is basically focused on the correct way of informing pregnant women and their families of everything related to the signs and symptoms of preeclampsia.

In the same vein, training is aimed at preparing them in the **preventive measures** that can be taken to reduce the risk.

Among these measures are: the recommendation by the nursing staff to pregnant women to regularly check their blood pressure, as well as lectures on the importance of eating a healthy diet, highlighting those that are low in salt.

The habit of being physically active can also be promoted as long as their state of health allows it.

Pregnant women should also be told that if they experience symptoms that they consider worrying, they should report them immediately.

An important factor to take into account in the health education that nurses should carry out with pregnant women with preeclampsia is the **psychological** aspect.

The emotional aspects related to the diagnosis and management of preeclampsia have a great impact on these patients.

In this sense, the nursing staff can provide emotional support to pregnant women and provide them with additional resources such as counseling services, if required, and their incorporation into support groups.

## Conclusions

The theoretical systematization carried out in this research led to the conclusion that the nursing professional is an indispensable entity in health institutions, so that the training of these personnel for the comprehensive care of pregnant women with preeclampsia is a continuous and permanent process that requires adequate preparation.

This training should respond to the needs of the personnel who receive it with emphasis on the improvement of professional skills and attitudes to care for pregnant women with preeclampsia, a disease that has a negative impact on both the mother and the fetus.

A scientifically based and organized training program offers the possibility of updating, perfecting and increasing the knowledge necessary for professional performance with emphasis on the development of skills to perform nursing diagnosis in patients with preeclampsia, the development of skills to carry out health education, as well as intervention actions.

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