

SMALL PALLIATIVE CARE NEEDS OF HIV/AIDS PATIENTS TREATED AT NHAN AI HOSPITAL IN 2022

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Summary

Palliative care is measures aimed at improving the quality of life of patients and their families, who are facing problems related to life-threatening illness, through the prevent and reduce the burden they endure by early recognition, comprehensive assessment, and treatment of pain and other problems such as physical, psychological, social, and spiritual symptoms.

Objectives: Describe the current situation of palliative care needs of HIV/AIDS patients inpatient treated at Nhan Ai Hospital in 2022.

Subjects and methods: A cross-sectional descriptive study was carried out. Currently with a sample size of 180 HIV/AIDS patients being treated at Nhan Ai Hospital from January 2022 to October 2022.

Results: Patients with HIV/AIDS have a high need for palliative care. In which, the rate of needing medical information is 91.7%, the rate having the need for care support is 84.5%, the rate having the need for communication and relationship is 83.6%, the rate having The need for spiritual support is 78.3% and the rate for material needs is 85.7%. These results are very high, proving that the need for health care care of HIV/AIDS patients is very large.

Conclusion: Patients with HIV/AIDS have high needs for different groups of care needs. The largest demand for medical information accounted for 91.7% and the smallest was the need for emotional support accounted for 78.3%. It is necessary to understand the needs of the patient in order to have appropriate palliative care for people living with HIV.

Keywords: *Palliative care needs, HIV/AIDS.*

INTRODUCTION

In Vietnam as of December 31, 2020, the whole country has 215,220 people living with HIV, 108,719 people living with HIV have died and the number of people on ART is 152,116 people, accounting for more than 70% of the HIV infected people have been detected¹.

People living with HIV/AIDS face a heavy burden of disease due to weakened immune systems and face social problems such as stigma, poverty, stress and anxiety that affect their quality of life. their physical, mental and social health. Health care is a way to comprehensively address physical, mental and social health problems for people living with HIV/AIDS².

According to WHO, preventive care is measures to improve the quality of life of patients and their families, who are facing problems related to life-threatening illness, through the prevention and reduce the burden they bear by early recognition, comprehensive assessment, and treatment of pain and other problems such as physical, psychological, social, and spiritual symptoms³.

The definition emphasizes: Helping people with HIV/AIDS cope with pain by preventing and

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alleviating it in all its forms, focusing not only on physical problems but also psychological ones, social and spiritual, maximize the quality of life for patients and their families. Palliative care is a new field in Vietnam. There have not been many studies to assess the need for palliative care for people living with HIV/AIDS. At Nhan Ai Hospital so far there has been no research on this content. That's why we conducted a study: "Paliative care needs of people living with HIV/AIDS inpatient treatment at Nhan Ai Hospital in 2022" with specific objectives: Describe the current situation of care needs. Alleviation of HIV/AIDS infection inpatient treatment at Nhan Ai Hospital in 2022.

SUBJECTS AND METHODS

Subjects: The patient was diagnosed with HIV infection and is being treated as an inpatient at Nhan Ai Hospital. Patients voluntarily participated in the study.

Exclusion criteria: The patient is unable to answer questions such as: unable to hear or speak; narrow goods; hardly when talking.

Time and place of study: Study period: from January 2022 to October 2022. Research location: Nhan Ai Hospital.

Research Methods: A descriptive cross-sectional study. Sample size: Including 180 people with HIV/AIDS.

Methods of information collection: Direct interview with patients. Survey form Data collection technique: Data collection is done through the following steps:

Step 1: Build, test and perfect the research toolkit.

Building a toolkit: The toolkit is built on the basis of the "Guidelines for palliative care for patients with cancer and AIDS" of the MOH4 and research on assessing the need for palliative care of some other authors such as: Research by author Nguyen Thi Mai5.

Step 2: Conduct investigation.

Step 3: Summarize the collected data.

Data processing method: Analysis on SPSS 25.0 software with descriptive statistics algorithms percentage.

Evaluation criteria

Rating Index	Number of Subsections
The need for medical information	7
Need for care support	5
Communication and relationship needs	5
Need for emotional support	7
Material needs	4
Total of subsections	28

For each question content, use a rating scale divided into 2 levels. Each answer is 1 of 2 options "Yes" or "No" depending on whether or not the customer has a need. Yes: 1 point; No: 0 points.

We assess the needs of patients in this study according to 2 levels: High need and low need. These two levels are based on the average score of the total scores of the questions in the yes subsection and the total score is 28 points, so: High need: > 14 points Low demand: ≤ 14 points.

RESULTS

General characteristics of research subjects (n = 180)

Population characteristics		Frequency	Ratio (%)
Sex	Male	147	81.7
	Female	33	18.3
Age group	< 30 years old	20	11.1
	From 30 - 39 years old	53	35.6
	40 - 49 years old	77	41.1
	50 years old	30	12.2
	Average age: 41.2 ± 8.8; The youngest age: 22, the oldest: 69		

Population characteristics		Frequency	Ratio (%)
Level	Don't go to school	21	11.7
	Middle school and below	118	65.6
	High school	24	13.3
	Intermediate and up	17	9.4
Job	Driver	18	10.0
	Farmer/worker	29	16.1
	Unemployment	43	23.9
	Other professions	90	50.0
Residence	City. Ho Chi Minh	160	88.9
	Other places	20	11.1
Marital status	Single/unmarried	84	46.7
	Separated/divorced/widowed	55	30.6
	Having a family	41	22.8
Pay Hospital's fee	Have insurance	171	95.0
	Self-pay	9	5.0

Among 180 HIV/AIDS patients participating in the study, in which: Males accounted for a higher proportion than females, respectively 81.7% and 18.3%. Age divided into 4 groups, the mean age was 41 ± 8.3 years old, the youngest was 22 years old, the oldest age was 69 years old, the highest proportion of 40 - 49 years old group accounted for 53.2%. The Kinh ethnic group accounted for 91.7%. Religion: True religion accounted for 43.4%, Catholic accounted for 23.1%, Worship of grandparents accounted for 21.1% and 12.2% was non-religious. Education level: Junior high school and below accounted for the highest rate 65.6%, high school level accounted for 13.3%, the lowest intermediate level or higher accounted for 9.4%, 11.7% is the percentage of study subjects who do not attend school. The occupation of the study subjects is driver, which accounts for the highest rate of 10.0%, followed by citizens or workers with 16.1%, unemployment at 23.9% and other occupations with the highest rate is 50%. The subject of the study has a place of residence in Ho Chi Minh City. Ho Chi Minh City accounts for 88.9%, the percentage of residents living in other places accounts for 11.1%. Study subjects are single or unmarried, accounting for 46.7%, currently married with the

lowest percentage (22.8%) and patients with health insurance account for 95.0%.

Information needs

Table 1. Information needs of the patient (n = 180)

Information needs	Yes		No	
	SL	%	SL	%
Diagnosis of disease	151	83.7	29	16.3
Disease prognosis	141	78.1	39	21.9
Treatment intervention	144	80.1	36	19.9
Treatment intervention	125	69.7	55	30.3
Test every time	136	75.3	44	24.7
Disease remission	138	76.4	42	23.6
Drug complications	133	73.9	47	26.1
General demand	158	91.7	22	8.3

The results of Table 1 show that: The percentage of patients who need to know about general medical information accounts for 91.7%. In which the demand "Need more information about your diagnosis" has the highest rate, accounting for 83.7%; Next is the rate of demand "Need to be explained more about the treatment method of their disease" accounted for 80.1%, the percentage



of patients with the need "Need to know about the purpose of tests, therapeutic interventions". value that they are allowed to perform" is the lowest accounting for 69.7%.

Care support needs

Table 2. Care support needs (n = 180)

Care support needs	Yes		No	
	SL	%	SL	%
Good disease control	150	83.4	30	16.6
Food, clothing, and bathing support	136	76.1	44	23.9
Nursing care	153	85.1	27	14.9
Support movement	138	76.7	42	23.3
Self-care guide	131	73.3	49	26.7
General needs	152	84.5	28	15.5

The results of Table 2 show that: The percentage of patients with general care needs accounted for 84.5%. In which the highest demand rate is "Getting more attentive care from nurses" accounting for 85.1%, followed by the proportion of demand "Getting care to better control the symptoms of the disease" accounting for 85.1%. 83.4%, the percentage of patients with the lowest need is "Supported for movement and travel" accounting for 76.7%.

Table 3. Communication and relationships (n = 180)

Communication and relationship needs	Yes		No	
	SL	%	SL	%
Sharing of medical staff	146	81.4	18.6	34
People in the same situation	143	79.9	20.1	37
Encouragement from relatives	142	78.9	21.1	38
Confidentiality of personal information	140	77.5	22.5	40
Behave like everyone	136	78.7	21.3	44
General needs	150	83.6	16.4	30

The results in Table 3 show that: The percentage of patients with communication and general relationship needs accounted for 83.6%. In which

the highest demand is "Need sympathy and sharing of health workers" accounting for 81.4%, the percentage of patients with the lowest need is "Need to keep confidential information related to personal matters" accounting for 77, 5%.

The need for emotional support

Table 4. Percentage of patients with mental needs (n = 180)

The need for emotional support	Yes		No	
	SL	%	SL	%
Useful in the family	134	74.4	46	25.6
Not abandoned	132	73.5	48	26.5
No harm	139	77.3	41	22.7
Endure the pain	147	81.9	33	18.1
Gradually reduce health	125	69.6	55	30.4
Sickness and illness	127	70.3	53	29.7
Psychic house consultation	124	68.7	56	31.3
General needs	141	78.3	39	21.7

The results in Table 4 show that: The percentage of patients with general emotional support needs accounted for 78.3%. In which the highest need is "need care to reduce the fear of suffering pain due to illness or medical procedure" accounting for 81.9%, the percentage of patients with the lowest need is "need care to reduce the fear of the gradual deterioration of health after the treatment process" accounted for 68.7%.

Physical needs of the patient

Table 5. Percentage of patients with material needs (n = 180)

Physical needs of the patient	Yes		No	
	SL	%	SL	%
Better service from BV	132	79.6	48	20.4
Economic related	139	78.2	41	21.8
Economic help	141	87.6	39	12.4
Background information, patronage...	139	77.2	41	22.8
General needs	154	85.7	26	14.3

The results in Table 5 show that: The percentage of patients with general material needs accounts for 85.7%. In which the highest rate is in need of economic assistance, accounting for 88.6%, the percentage of patients with the lowest need is information about social protection establishments and organizations, accounting for 77.2%.

Situation of demand for palliative care

Table 6. Palliative care bridge

Situation of demand for palliative care	Yes		No	
	SL	%	SL	%
Demand for medical information	165	91.7	15	8.3
Care support needs	152	84.5	28	15.5
Communication and relationship needs	150	83.6	30	16.4
Need for emotional support	140	78.3	40	21.7
Material needs	154	85.7	26	14.3
General care needs	161	89.8	19	10.2

The results of Table 6 show that the percentage of patients with the highest need for palliative care in terms of medical information accounted for 93%, with the lowest need for communication support, accounting for 87.3%.

DISCUSSION

Medical information

Hospitalization for treatment because of the accompanying diseases, so the care needs of HIV/AIDS patients is very necessary. In which, medical information for patients with HIV/AIDS plays an important role in helping patients fully understand the disease and related issues, increasing the ability to coordinate with health workers in choosing treatment methods, appropriate care plan, increase the ability to adhere to ARV treatment, thereby increasing the effectiveness of the quality of care and treatment. According to our research results, the rate of HIV/AIDS patients with medical information needs is very high, the overall rate is 87.7%. Among the needs for medical information in general, the need for "more

information on disease prognosis" accounts for the highest rate of 83.7%. The demand "need more explanation about the treatment method" accounted for 80.1% and the demand "Need more information about the prognosis" accounted for 78.1%. This result in Nguyen Thi Mai's study accounted for 95.4% of patients with a need for medical information⁵, in Nguyen Thi Lieu's study this rate accounted for 95.3% of patients with a need for medical information provide information and knowledge on HIV/AIDS and HIV/AIDS related issues⁶.

According to the research results of author Wilbroad Mutale assessing the need for palliative care in children with HIV and cancer, parent/guardian interviews show that the need for information on prognosis has a gap between needs. (the proportion of patients in need minus the proportion of patients who have no need) is 63.4%, the rate of need for information on disease prognosis is 81.7%⁷. The research results show that the patient's need for medical information accounts for a high proportion.

Care support

During the course of the disease, HIV/AIDS patients often suffer from opportunistic infections and present many uncomfortable symptoms. According to the research results of author Nguyen Thi Thuy Trang, the common symptoms in HIV/AIDS patients are: pain accounted for 58%, fever 67.6%, cough 37.8%, shortness of breath accounted for 18.9%, anorexia 73.9%, nausea and vomiting 31.5%, diarrhea 25.5%, insomnia 69.4%, itching 25.2%⁸. Therefore, support in palliative care helps HIV/AIDS patients reduce pain, control symptoms, and help patients recover quickly and increase the effectiveness of treatment. According to our research results, patients with needs related to general care support accounted for 84.5%.

Relationship communication

Stigma and discrimination are reasons that limit HIV/AIDS patients from communicating with others as well as accessing HIV/AIDS prevention, care, support and treatment services. According to our research results, the percentage of patients with need for relational communication is quite high,



the overall rate is 83.6%, and the rate of meeting the need for general relational communication is 87.3%. Studies show that stigma and discrimination are still quite common, research by Nguyen Thi Thuy Trang shows that 61.3% of HIV patients feel stigmatized by society⁸, research by Do Van Dung and Dr. colleagues concluded that the subject's self-stigmatization was still quite common, 79.8% of the respondents would hide from everyone if infected with HIV/AIDS⁹.

This shows that stemming from anxiety about illness, fear of isolation and stigma, HIV/AIDS patients lack confidence when communicating and relating to people. They feel bored, lonely, guilty, do not dare to contact the community, afraid of revealing their identity. Anxiety, stress, frustration, depression, and fear of stigma cause them to refuse care and pursue treatment. This is also one of the barriers to the full implementation of the rights of HIV/AIDS patients, including the right to health care, education, and labor as prescribed by law. Therefore, being respected and behaving normally like other people will help people with HIV/AIDS be more confident and self-reliant in life. Another aspect is that we have wasted a great deal of resources, without realizing the potential of HIV/AIDS patients.

Communication is an important factor in providing quality care. Our research results show that “the need for sympathy and sharing of medical staff” accounts for a relatively high rate, 81.4%. People with HIV/AIDS are always in a state of anxiety, confusion, sometimes panic, and despair. It is thanks to the sympathy and sharing of medical staff that will help patients easily express their difficulties, and at the same time feel secure and trust the doctor. This shows that communication skills with patients have an important role and are one of the professional contents that medical staff need to pay attention to in the care and treatment of patients.

Mental support

One of the common health problems of HIV/AIDS patients is exhaustion. This condition has many causes, one of which is mental stress and prolonged sadness. Mental support to help HIV/AIDS patients

stabilize their emotions plays an important role in PPR care for HIV/AIDS patients. Mental support helps them to slow down and also helps them to have a healthy mind to live productively for their family and society and better cope with AIDS. According to our research results, the percentage of patients with emotional support needs is relatively high, the overall rate is 78.3%. This result is similar to the results in Nguyen Thi Mai's study, accounting for 77.8%.

Material needs

The peculiarity of HIV/AIDS patients is to live with HIV for life because there is no specific treatment or vaccine for the disease. On the other hand, among low-income people, HIV/AIDS patients account for a high proportion, most of them do not have stable jobs, low income, while they need financial resources to pay. for medical activities. According to the research results of Nguyen Thi Lieu, up to 72.1% of HIV/AIDS patients have no source of income or an unstable source of income⁶. This has affected the access to health care services of HIV/AIDS patients, making their lives more difficult.

Our research results show that the proportion of patients with material needs is relatively high, the overall rate is 85.7%. This result is higher than the result in Nguyen Thi Mai's study. The overall rate in Nguyen Thi Mai's research accounted for 84.3%⁵.

CONCLUSION

The proportion of patients with general supportive care needs accounted for 89.8% and for each factor: the rate with general medical information needs accounted for 91.7%; rate of need for general care support accounted for 84.5%; rate of need for communication and relationship accounted for 83.6%; rate of need for general spiritual support accounted for 78.3% and rate of common material need accounted for 85.7%.

Patients with HIV/AIDS have high needs for different groups of care needs. The largest demand for medical information accounted for 91.7% and the smallest was the need for emotional support accounted for 78.3%. It is necessary to understand the needs of the patient in order to have appropriate palliative care for people living with HIV.

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