

Symposium

Introduction

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Symptom Management in Critically Ill Patients

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So much of the critical care nurse's day is focused on the complex assessment and management of the patient to optimize the patient's physiologic status, including addressing and managing symptoms. A symptom is defined as a subjective experience reflecting changes in the biopsychosocial function, sensations, or cognition of an individual.¹ The body of evidence continues to grow chronicling how symptoms impact the patient's overall health and quality of life. However, the complexities of the critical care practice environment and difficulties with effective communication because of mechanical ventilation and pharmacologic agents make obtaining subjective evaluation of the patient's symptom experience challenging. It is necessary to rethink how critical care nurses can anticipate, assess, and successfully manage the patient's symptoms during a critical illness.

This symposium addresses the complexities of assessing symptoms in critically ill patients, reviews current evidence to guide best practice, and identifies areas for which continued nursing research is needed to optimize symptom management for critically ill patients. Many symptoms do not occur in isolation, and the body of evidence describing how symptoms can have synergistic effects is growing. The articles in this issue explore the management of symptoms of fatigue, sleep, delirium, dyspnea, pain in patients with substance abuse or chronic pain, nausea, vomiting, and diarrhea. The final article discusses symptom clusters and challenges us to think about how symptoms can group together and have synergistic effects on a patient's symptom experience. Advanced practice nurses and bedside critical care nurses are in an optimal position to intervene in the observation and management of symptoms. We are also well positioned to conduct research to discover better ways to assess and manage symptoms for vulnerable patients in our care. We hope that you enjoy reading the articles in this symposium and that you find the evidence helpful in your daily practice.

REFERENCE

1. Dodd M, Janson S, Facione N, et al. Advancing the science of symptom management. *J Adv Nurs*. 2001;33(5):668–676.

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