

# [Critique of living with chronic obstructive pulmonary disease nursing essay](https://assignbuster.com/critique-of-living-with-chronic-obstructive-pulmonary-disease-nursing-essay/)

This assignment will be appraising a study by Fraser, D. Kee, C and Minick, P (2006) â€Å“ Living with chronic obstructive pulmonary disease: insiders′ perspectiveâ€, The aim of the study was to gain a better understanding of older people who suffer from severe COPD and their experiences of living with the condition in their daily lives, including techniques used to manage their disease. This knowledge could then be used along with nursing knowledge to aid patients with chronic obstructive pulmonary disease so they can achieve their maximum quality of life (Fraser et al2006). The appraisal will also include the researcher′s suitability for carrying out research for the study, the validity, methodology, ethical approval, data collection and analysis as well as sampling methods; it will touch upon what nursing implementations can be taken from the author′s findings.

Although not much is mentioned in the article to ascertain the suitability of the authors to carry out the study there is one small paragraph in the article at the bottom of the introduction which states the lead author (Fraser, D) had hospital experience in pulmonary nursing which then motivated her into getting a better understanding of the disease from the patients point of view, this form of clinical experience and dedication gives the author some insight into this disease which will contribute to the study (Parahoo 1997 p, 24) upon further investigation one of the other authors has various research interests including Nursing expertise and patient outcomes, Pain management, Phenomenology, Critical care nursing with several national and internationally published papers(Minick 2008), this form of academic achievement improves the rigor of this paper through its trustworthiness and its credibility.

According to Parahoo (1997) abstracts are short summaries of information from the study aimed at giving readers enough details of the article so that they may decide whether the article is of interest to them or not. The Fraser article is set out in a similar way to how Parahoo (1997) describes, such as it briefly states the aim of the study, its background, the methodology used in the study, the study′s findings and its conclusion, however it does not state what form of sampling was used in the study such as convenience sampling, purposive sampling or snowball sampling, there was also no mention of the type of data analysis that was used during the study as well as no mention of whether the interviews where structured or unstructured (Newell and Burnard 2006).

This article is laid out in an organised manner with clear sections which make it easy to follow, these include what the aim of the study are, it′s design, how data was collected and analysed, its findings, discussion, study limitations and its conclusion. However there is no section on what recommendations can be made from this study although it is mentioned in the conclusion section.

According to Fraser et al hermeneutic phenomenological research was used for the qualitative study due to the way it allowed the researcher to ask the subject a host of open â€” ended questions that are focused around the aim of the research study, this unstructured interview technique allows the subject to answer in their own words, this also allows the researcher to ask questions for elaboration on specific areas of the story so that they may get a better understanding of their experience, this in turn can allow intriguing and vivid insight into the patients care and their experiences (Newell and Burnard 2006). However Qualitative research does have its limitations such as the interviews themselves, Parahoo (1997) states that not enough information is given on what actually takes place between interviewer and the subject, this makes evaluating difficult. Secondly as the interviews were semi-structured the subjects may not be asked the same questions which may make you question the validity of the findings. Hermeneutic phenomenological research may be problematic when it comes to the rigor of the study itself for example this study may produce different results if the study was conducted on a different day or at a different time due to the subjects experiences being affected due to illness, moods or some other factor that could change (Parahoo 1997).

Fraser et al (2006) states Participants were contacted by telephone where a brief explanation about the purpose of the study was given, the article also states that consent was given prior to the interview and that they were interviewed either at the participant′s home or at the hospitals pulmonary rehabilitation centre. However it does not mention whether it was informed consent that was given and it also makes no mention if the study was clearly explained and understood by the participant (Ryan et al 2007). There is also no mention of the duration of the interviews for example were they carried out over two hours in one day or over several interviews throughout 2003 (Parahoo 1997).

Analysing qualitative data can be done in several ways and it is essential that the correct process is used to determine the credibility of their findings (Ryan et al 2007). The seven steps outlined in Colaizzi′s (1978) method allows the researcher to develop themes in the transcriptions by extracting specific phrases and statements, this can only be done by carefully reading the transcripts to get a better understanding of the subjects. Although this method allows the researcher to validate and verify the themes and conclusions with the subjects, this can cause problems with some researchers due to subjects changing their minds. This can happen for a number of reasons such as having time to think about the interview or looking at the question from a different perspective (Newell and Burnard 2006).

The reason for literature reviews is to determine what has already been published or researched on a given subject area, Caughlan (2007) states that literatures reviews are used to develop the research question which should help identify the correct method to use for data collection. This review would also identify any gaps in the literature that might be filled using the current research topic. Parahoo (1997, p96) also agrees that although a literature review helps those primarily doing the research it also gives the reader an insights into what research has been done previously and why the current study is necessary. Despite the Fraser et al article focusing solely on elderly people with severe COPD defined by the GOLD (2003) revision the author does believe that their study will contribute to the research of COPD and seems to agree with the other author′s findings.

There are some issues that appear in the article in relation to ethical approval such as there is no mention of informed consent being sought from the participants additionally the author has not stated whether the research process was explained to them clearly. This should have been clearly stated in the article (Griffiths, 2006), however Fraser et al does point out that ethical approval was obtained from the sponsoring University and the hospital institutional review boards.

A purposive sample of participants was taken aged 55 or older who were living at home, English speaking and willing to speak about their experiences with COPD (Fraser et al 2003). This sample consisted of five men and five women eight of which were Caucasian and two were African American and met the GOLD (2003) revision. This form of sampling can aid the researcher to hand pick his subjects based on his/her criteria. Sampling of this nature is often small as the researcher is not trying to generalise their findings this ensures richness in data for the study (Ryan 2007). Fraser (2006) states that the aim of the study was to explore the experiences of older adults with severe COPD to get a better understanding of how this disease effects their lives, this form of sampling may not be representative of the population due to possible subjectivity of the researcher (Black 1999).

The research findings were broken down into three themes knowing what works, hanging on â€¦barely and losing control-gaining control. Let′s look at knowing what works as an example to what type of information this method of research uncovers, the participants talk about the various ways they control and manage dyspnoea such as the use of inhalers or nebulizers, oxygen therapy and breathing exercises. They also talk about what doesn′t work such as friends and family hovering around and telling them what to do. The author recognised the study limitations that are common with most qualitative studies these include size of sample the limited geography of the sample and the criteria inclusion for the study. The author also accepts the fact that the participants may be better educated in their illness and thus have a better management of their illness due to their involvement in the relevant programs from which they were part of. More information could have been obtained in this study using a quantitative and qualitative approach known as Mixed Method triangulation (Maclnnes 2009). This form of study would give the researcher the statistical information as well as the in-depth richness which in turn would produce more insightful findings into the study (Maclnnes 2009). More research needs to be carried out to get a more accurate account of patients experiences of living with COPD, this study would need to include a larger sample from a wider geographical area so that it may be more representative of the population in question. Due to the scale of such a study, Mixed Method triangulation (Maclnnes 2009) may be better suited.

There are several aspects of this article that could have implications for nursing practice such as COPD affects everyone in different ways and no two days are the same. Nursing staff must take this into consideration when treating the patient as the patient has more experience with the illness than the nurse treating them and knows what does and doesn′t work. This is also stated in the NMC (2009) where â€Å“ you must support people in caring for themselves to improve and maintain their healthâ€ (NMC 2009). Another important point made in the article is addressing any interventions that may be implemented to help patients quality of life must have input from both patient and nurse. Fraser et al also states that you must acknowledge the changes and problems that are associated with COPD, this understanding will aid the rapport and communication between nurse and patient. The author also stated that general nursing care for all patients with this condition should include monitoring medication proper education on the use of that medication as well as breathing techniques, appropriate exercise and making sure patients have access to organisations that can help with financial aid, depression loneliness and other information that they may need.