

Keynote Forum May 23, 2019

Nursing Care 2019



28th International Conference on

Nursing Care May 23-24, 2019 | Vienna, Austria



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Application of an intelligent drinking system to prevent dehydration in old age

or older people, reduced thirst is a major problem in daily life (Bigorio, 2009; Hodgkinson et al, 2003; Bunn et al, 2015). To prevent dehydration, a functional prototype for an intelligent drinking system was developed within an experimental research project "Drink Smart" (2016-2018), which measures daily fluid consumption, visually displays it on the cup itself and also transfers the data to electronic care documentation. The aim of the evaluation study was to test the drinking system for suitability in home nursing practice. The individual measurements of system stability, acceptance and effects were collected by means of individual interviews with elderly people in need of care and group interviews with nursing personnel of mobile home nursing. The evaluation of usability took place by means of usage diaries and in final interviews and group discussions. The suitability of the system for practical use was also determined by the mobile nursing staff. Furthermore, a heuristic evaluation was carried out by an expert.

The intelligent drinking cup "Drink Smart" achieved technical performance and stability suitable for practical use in a three-

week test phase per person with 21 test participants (a total of 441 days). In principle, the use of the system was described as simple, but due to cognitive and physical limitations there may be barriers to use. The drinking system was described as motivating and meaningful and helped the elderly to drink more. For caregivers, the drinking system is perceived as an optimal aid when it comes to carrying out fluid balances and recording the amount of fluid and drinking events. The future use of the drinking system is aimed at by the elderly, and by the caregivers, when it comes to supporting sufficient hydration and calculating drinking quantities.

Speaker Biography

Elisabeth Haslinger-Baumann is Professor and Research Coordinator for Nursing Research in the Department of Applied Nursing Science at University of Applied Sciences in Vienna. She is registered nurse and graduated in Philosophy and Political Sciencees at the University of Vienna. She is PhD in Nursing Science and graduated from the Health and Life Sciences University in Hall in Tyrol, Austria. She leads experimental research projects in the Research Fields Active and Assisting Living, Evidence based Practice Health Care and Nursing and Evaluation Research in Health Care and Nursing.

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J Intensive Crit Care Nurs, Volume 2

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Hungarian nurse study for occupational cancer risk assessment using Geno-Toxicological Methodology

ealth professionals chronically exposed to cytostatic drugs, formaldehyde and anesthetic gases in hospitals are at higher risk of lung diseases, hematological, immunological and reproductive alterations. Without safety devises, cytostatic and anesthetic gas exposure often exceeds the safety limits, especially when no proper ventilation has been installed in operating theaters. In the present study we assessed the health risk among exposed nurses and measured geno-toxicological parameters in the presence or absence of confounding factors such as smoking. The investigations were carried out in 800 subjects, exposed to different hazards using in health services. The data were compared to healthy, nonexposed controls. The measured biomarkers were clinical laboratory routine tests, completed with geno-toxicological (Chromosome Aberrations (CA) and Sister-Chromatid Exchange (SCE), DNA repair) and immunotoxicity. The exposed groups were divided into three main groups exposed to cytostatic drugs, anesthetic gases and formaldehyde. In the groups of health personnel exposed to cytostatic and formaldehyde was carried out elevated chromosomal aberrations and depressed DNA-repair. Although those nurses who were exposed to anesthetic gases, we did not find significant changes in the frequency of chromosome aberrations. Sister-chromatid exchange rate in anesthetic gas exposed smokers, was increased, when it was compared



to nonsmokers. We also found increases of apoptosis and inhibition of UV induced DNA repair capacity. Clinically these exposed individuals had high incidences of anemia, elevated serum glucose levels, thyroid dysfunction and benign tumors compared to controls. Low level of cytogenetic changes may relate to the increased apoptotic rate of peripheral blood lymphocytes and depressed DNA-repair capacity due to the low risk of misrepair. Our results suggest that biomarkers can be useful in tracking occupational/environmental genotoxic effects among exposed health personnel.

Speaker Biography

Anna Tompa was graduated in medicine in Budapest Semmelweis Medical University and became an Assistant Professor at the Institute of Pathology and Cancer Research of the School of Medicine. After specialized in pathology she went to the United States to study the advanced methodology of experimental cancer research. She has continued her research activities focused on the cancer prevention and obtained her D.Sc. in 1999 from Hungarian Academy of Sciences. She has written more, than 160 publications and given about 200 scientific lectures in different domestic and international scientific societies, and presently she is emeritus fellow of Ramazzini Collegium and OECD expert in chemical safety. Today, She is an emeritus professor and vice director of Public Health Institute in the Semmelweis University, Budapest, Hungary.

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University of Applied Sciences, Austria Quality features in the 24 hours Home Care

Due to the demographic change, there is a growing demand for professional and institutional care, as well as the need for 24-hour home care. Due to the cost-efficiency and 24h availability, the 24-hour home care represents a cornerstone of the care of older people and with more than 60.000 users in Austria, it represents an important alternative to family assistance and mobile care. Care receivers range from elderly people, who only need assistance with household activities, to those with a high need for a round-the-clock care. Caregivers commute between Austria and the respective home country (mainly Slovakia, Hungary and Romania) for the care work in a two or more weeks rhythm. Burdensome working conditions arise mainly due to language problems, isolated coexistence with a person affected by e.g. dementia in combination with little to no relevant professional education and quality control.

The aim of the project is the development and evaluation of a distributed client-server software solution for the support and quality assurance of 24-hour home care. The application software contains an information and education portal (eLearning) with interactive learning content on common diseases and short videos on recurrent care situations in German, as well as in Slovak, Hungarian and Romanian as the most frequent languages of the caregivers. Secondly it contains a comprehensive electronic care documentation and thirdly an integrated emergency management, which offers caregivers the opportunity to react quickly and professionally to emergencies. By using the application software, the quality of care will be supported and further result in an increase of care quality and quality of life of the older adults cared for. In particular the people cared for, as well as their dependents and relatives who are supported in achieving a successful care arrangement, benefit from further training and qualification measures of the caregivers.

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