Eureka Open Access Journals
Open Access | Peer Reviewed | International Journals | Multidisciplinary Areas

Eureka Journal of Health Sciences & Medical Innovation (EJHSMI)

ISSN 2760-4942 (Online) Volume 01, Issue 02, December 2025
This article/work is licensed under CC by 4.0 Attribution
https://eurekaoa.com/index.php/5

PATIENT-CENTERED NURSING SUPPORT IN THE REHABILITATION OF INDIVIDUALS WITH BRONCHIAL ASTHMA

Z. T. Usmanova
Tashkent State Medical University

Abstract

Bronchial asthma is a chronic inflammatory disease of the airways that significantly affects patients' physical, psychological, and social well-being. Effective rehabilitation plays a crucial role in improving disease control, preventing exacerbations, and enhancing quality of life. Nursing support is a key component in organizing, implementing, and assessing rehabilitation processes for patients with bronchial asthma. This article highlights the importance of nursing care in asthma rehabilitation, focusing on patient education, monitoring, individualized care planning, and outcome assessment. Strengthening the role of nurses in rehabilitation contributes to improved clinical outcomes, better self-management skills, and long-term disease control.

Keywords: Bronchial asthma, nursing support, rehabilitation, patient education, quality of life, disease management.

Introduction

Bronchial asthma remains a major public health problem worldwide due to its high prevalence, chronic course, and tendency toward recurrent exacerbations. Despite advances in pharmacological treatment, many patients continue to experience symptoms, functional limitations, and reduced quality of life. Therefore, comprehensive rehabilitation programs are essential for effective

Eureka Open Access Journals
Open Access | Peer Reviewed | International Journals | Multidisciplinary Areas
Eureka Journal of Health Sciences & Medical Innovation (EJHSMI)
ISSN 2760-4942 (Online) Volume 01, Issue 02, December 2025
This article/work is licensed under CC by 4.0 Attribution
https://eurekaoa.com/index.php/5

asthma management. Rehabilitation in bronchial asthma is a multidisciplinary process that includes medical treatment, physical rehabilitation, psychological support, and patient education. Among healthcare professionals, nurses play a central role in coordinating rehabilitation activities and ensuring continuity of care. Nursing support is especially important in helping patients adapt to long-term disease management and develop self-care skills.

The Role of Nursing Support in Asthma Rehabilitation: Organization of Rehabilitation Processes. Nurses are actively involved in organizing rehabilitation programs for patients with bronchial asthma. Their responsibilities include assessing patients' physical condition, identifying individual needs, and participating in the development of personalized rehabilitation plans. Nursing support ensures that rehabilitation measures are tailored to the severity of the disease, age, comorbidities, and social factors. Nurses also coordinate communication between physicians, physiotherapists, psychologists, and patients, which enhances the effectiveness and consistency of rehabilitation interventions.

Patient Education and Self-Management

One of the most important aspects of nursing support in asthma rehabilitation is patient education. Nurses educate patients about the nature of bronchial asthma, trigger factors, proper inhaler techniques, medication adherence, and early recognition of exacerbation symptoms.

Through structured educational sessions, nurses empower patients to take an active role in managing their condition. Improved self-management reduces hospital admissions, prevents complications, and promotes long-term disease control.

Eureka Open Access Journals
Open Access | Peer Reviewed | International Journals | Multidisciplinary Areas
OPEN ACCESS JOURNALS

Eureka Journal of Health Sciences & Medical Innovation (EJHSMI)

ISSN 2760-4942 (Online) Volume 01, Issue 02, December 2025
This article/work is licensed under CC by 4.0 Attribution
https://eurekaoa.com/index.php/5

Monitoring and Assessment of Patient Condition

Continuous monitoring is a fundamental nursing function in asthma rehabilitation. Nurses regularly assess respiratory status, peak expiratory flow, symptom frequency, physical tolerance, and emotional well-being. These assessments allow early detection of deterioration and timely intervention.

Nursing Care Plan for ASTHMA

ASSESSMENT	NURSING DIAGNOSIS		PLAN	INTERVENTION
	Related to	Evidenced by		
* Assess the client's vital signs as needed while in distress. * Assess the respiratory rate, depth, and rhythm. * Assess breath sounds and adventitious sounds such as wheezes and stridor.	**Ineffective Breathing Pattern related to** Swelling and spasm of the bronchial tubes in response to inhaled irritants/ infection/ drugs/ allergies or infection.	**Possibly evidenced by** • Cough • Cyanosis • Dyspnea • Loss of consciousness • Nasal flaring • Prolonged expiration • Respiratory depth changes • Tachypnea • Use of accessory muscles	*Patient will maintain optimal breathing pattern, as evidenced by relaxed breathing, normal respiratory rate or pattern, and absence of dyspnea.	* Assess the client's level of anxiety. * Assess the relationship of inspiration to expiration. * Assess for signs of dyspnea (flaring of nostrils, chest retractions, and use of accessory muscle). * Assess for conversational dyspnea. * Assess for fatigue. * Monitor oxygen saturation. * Monitor capillary blood gasses (ABG) * Maintain head of bed elevated. * Maintain head of bed elevated.
* Assess respiratory rate, depth, and rhythm. * Assess for color changes in the buccal mucosa, lips, and nail beds. * Assess the effectiveness of cough. * Assess the amount, color, odor and viscosity of the secretions.	**Ineffective Airway Clearance related to** Bronchospasms/ Increased pulmonary secretions/ Ineffective cough/ Mucosal edema	**Possibly evidenced by** • Abnormal arterial blood gasses • Adventitious lung sounds (Wheezes, Rhonchi) • Changes in respiratory rate and rhythm • Chest tightness • Cough • Cyanosis • Dyspnea; orthopnea • Retained secretions	*Patient will verbalize understanding of cause and therapeutic management regimen. *Patient will maintain airway patency as evidenced by clear breath sounds, improved oxygen exchange, normal rate and depth of respiration, and ability to effectively cough out secretions.	* Auscultate lungs for adventitious breath sounds (wheezes and rhonchi). * Monitor and record intake and output (I&O) adequately. * Monitor oxygen saturation using pulse oximetry. * Monitor chest x-ray results. * Monitor laboratory results as indicated: WBc, Potassium * Monitor capillary blood gasses (CBGs). * Encourage deep breathing and coughing exercises. * Administer IV fluids and medication as ordered. * Administer oxygen as ordered. * Anticipate the need for HFNC, intubation and mechanical ventilation.
* Assess the client's knowledge of care for status asthmaticus, as appropriate. * Assess past and present therapies,	**Deficient Knowledge related to** Chronicity of disease/ Lack of information sources/ Long-	**Possibly evidenced by** • Absence of questions • Ineffective self-care • Inability to answer properly	*Patient and significant others will verbalize knowledge of the disease and its management and community resource available to help the client in coping with	* Explain the disease to the client and significant others. * Instruct the client how to avoid asthma triggers: Air pollution, Allergens. * Educate the client about the warning signs and symptoms of an asthma

Eureka Open Access Journals
Open Access | Peer Reviewed | International Journals | Multidisciplinary Areas
Eureka Journal of Health Sciences & Medical Innovation (EJHSMI)
ISSN 2760-4942 (Online) Volume 01, Issue 02, December 2025
This article/work is licensed under CC by 4.0 Attribution
https://eurekaoa.com/index.php/5

In addition, nurses evaluate the effectiveness of rehabilitation measures by monitoring changes in functional capacity, symptom control, and quality of life indicators. This ongoing assessment supports evidence-based adjustments to rehabilitation plans.

Psychological and Emotional Support Living with bronchial asthma can lead to anxiety, fear of attacks, and decreased social activity. Nurses provide psychological support by establishing trusting relationships, encouraging open communication, and helping patients cope with stress related to chronic illness.

Emotional support from nurses improves patient motivation, adherence to rehabilitation programs, and overall satisfaction with care.

Evaluation of Rehabilitation Outcomes

Nursing support plays a critical role in evaluating rehabilitation outcomes. Nurses participate in assessing clinical indicators, patient-reported outcomes, and functional improvements. This evaluation helps determine the success of rehabilitation interventions and identify areas for improvement.

By systematically documenting results, nurses contribute to quality improvement initiatives and the development of standardized rehabilitation protocols for bronchial asthma.

Conclusion

Nursing support is an essential element in organizing and assessing rehabilitation processes in patients with bronchial asthma. Through patient education, continuous monitoring, emotional support, and outcome evaluation, nurses significantly enhance the effectiveness of rehabilitation programs. Strengthening the role of nurses in asthma rehabilitation not only improves clinical outcomes but also promotes patient independence and quality of life. Integrating nursing-led interventions into comprehensive asthma care is crucial for sustainable disease management.

Eureka Open Access Journals
Open Access | Peer Reviewed | International Journals | Multidisciplinary Areas

Eureka Journal of Health Sciences & Medical Innovation (EJHSMI)

ISSN 2760-4942 (Online) Volume 01, Issue 02, December 2025
This article/work is licensed under CC by 4.0 Attribution
https://eurekaoa.com/index.php/5

REFERENCES

1. Wang S., Pan R., Wang H., Tang Y., Hu L., Ho XS, etc. Immediate psychological reactions and associated factors during the initial stage of the coronavirus disease (COVID-19) epidemic among the Chinese population in 2019. Int J Environ Res Public Health. 2020; 17 (5). Electronic publication 03/12/2020. doi : 10.3390/ijerph17051729; PubMed Central PMCID: PMC7084952. [PMC free article] [PubMed] [CrossRef] [Google Scholar]

2.Ahmed MZ, Ahmed O, Aibao Z, et al. Epidemic of covid-19 in China and associated psychological problems. //Asian J Psychiatr . 2020;51:102092.

3.Arasli, H., Furunes, T., Jafari, K., Saydam, MB, Degirmencioglu, Z. Hearing the voices of wingless angels: A critical content analysis of nurses' Covid-19 experiences. //International Journal of Environmental Research and Public Health. 2020; 17(22); 8484: 1-16.

4. Atay , S., Cura, ŞÜ. Problems Encountered by Nurses Due to the Use of Personal Protective Equipment The current document contains no sources. 2020; 66(10): 12-16.

5. Bostan , S., Akbolat, M., Kaya, A., Ozata , M., Gunes, D. Assessments of anxiety levels and working conditions of health employees working in COVID-19 pandemic hospitals //Electronic Journal of General Medicine. 2020; 17(5): em246.

6. Brugliera L, Spina A, Castellazzi P, et al. Rehabilitation of COVID-19 patients. //J Rehabil Med. 2020; 52(4): jrm00046.

7. Study of factors influencing the effectiveness of rehabilitation during COVID-19. authors Tuychiev LN, Khudaykulova GK, Eraliev UE, Dzhuraeva NK, Sadullaev SE

8. Negrini S, Ferriero G, Kiekens C, Boldrini P. Facing in real time the challenges of the Covid-19 epidemic for rehabilitation. Eur J Phys Rehabil Med. 2020. doi: 10.23736/S1973-9087.20.06286-3.

Eureka Open Access Journals
Open Access | Peer Reviewed | International Journals | Multidisciplinary Areas
OPEN ACCESS JOURNALS

Eureka Journal of Health Sciences & Medical Innovation (EJHSMI)

ISSN 2760-4942 (Online) Volume 01, Issue 02, December 2025
This article/work is licensed under CC by 4.0 Attribution
https://eurekaoa.com/index.php/5

9. The role of rehabilitation in primary health care. Authors: Tuychiev Laziz N., Eraliev Umid E., Khudaykulova Gulnara K., Juraeva Lily
10. Simpson R, Robinson L. Rehabilitation following critical illness in people with COVID-19 infection. Am J Phys. Med Rehabil. 2020;99(6):470–474. doi 10.1097/ PHM.0000000000001443.
11. Eraliev U. E., Djurayeva Nilufar Kurvankulovna, «Quality of communication between a patient and a nurse during the COVID-19 pandemic», Journal of Natural and Medical Education, 2.- T. 119-127Volume 01, Issue 06, 2023 (14.00.00; 15).