

Nursing Care Plans For Patients Who Are Undergoing Alcohol Withdrawal

Posted on October 7, 2019

Assessment of Alcohol Dependence and Depression

The following questions should be asked by the person to judge his or her dependence on alcohol and depression. They should be asked whether they ever tried to stop drinking but failed or lasted only a few days. Another question should be whether they ever get jealous of the people who drink a lot but never get into trouble. Relating to depression, Phillip should be asked if he ever thought of himself as a useless person or if he ever considered ending his life. It should also be noted that if he ever feels sad without any particular reason (Erfan et al., 2015).

Mental Disorder and Clinical Evaluation

A mentally disordered person is a person who shows defects to a substantially disabling degree in perception, reasoning, comprehension, judgment, learning, memory, and emotions (Baldwin, 2015). A mentally disordered person is unable to perform normal daily functions of life.

Symptoms and Signs of Depression

Depression is a mood disorder that can interfere with the person's ability to work, study, sleep, eat or enjoy life. Following are the five symptoms and signs of depression. Feeling of helplessness and hopelessness.. Change in appetite. A person suffering from depression may either not feel hungry at all or will have an increased appetite. Loss of energy is also a prominent symptom of depression. A person will lose interest in life and will feel sad all the time. Such a person loses all interest in activities he liked doing before. Trouble sleeping is also a symptom of depression (Junne et al., 2016).

Nursing Care Plans for Alcohol Withdrawal

Nursing care plans are very essential for patients who are undergoing alcohol withdrawal. The five recommended nursing care plans for such patients can maintain the psychological and emotional stability of the patient during the critical withdrawal process. Ensuring the physical safety of the patient is also essential. It is important to include regular follow-ups and suitable referrals for the

patient. The last nursing care plan should be the involvement of friends and family in the process (Coleman et al., 2015).

Post-Discharge Support Services

Support services are an essential feature in hospitals that provide care and treatment to patients after discharge (Zebrack et al., 2014). A hospital referred different support services to the patients; in the case of Philip 3, support services that could be referred are general support and counselling. This support service provides support and counselling to patients under stress or anxiety. Family drug support social service helps in maintaining collaboration between the family and the patient. Alcoholics Anonymous offers help to those who are finding it difficult to quit alcohol.

Discharge Planning and Family Involvement

Discharge planning usually involves doctors, therapists and loved ones. The medical staff evaluates and finalises the patient's treatment program and then leaves the decision to the family. In the case of Philip, the involvement of the family is very important for discharge planning. How much his family is willing to take care of him should be the first consideration (Stelfox et al., 2015). What are Philip's family members' views of him? Are they also important in making a discharge plan? I will try to ask the family members why they will be able to help him after his discharge.

Medication Management During Withdrawal

Benzodiazepine is an anti-psychotic drug that is used for alcohol withdrawal. It should be used for a short period as it can lead to abuse, addiction, or tolerance. Another antipsychotic drug is phenobarbital, which should also be used for a short period. Prolonged usage of this drug will lead to kidney failure and loss of coordination. Fluoxetine is an anti-depressant that can be given to Philip in a small dosage as these two drugs have side effects like dizziness, nausea, and sleeping disorders (IsHak and Naghdechi, 2016).

References

- Baldwin, S., 2015. The costs of caring: Families with disabled children. Routledge.
- Coleman, E.A., Roman, S.P., Hall, K.A., Min, S., 2015. Enhancing the care transitions intervention protocol to better address the needs of family caregivers. J. Healthc. Qual. 37, 2-11.
- Erfan, S., Amir, N., Dharmono, S., 2015. The Effectiveness of the Training Modules Advance in Depression And Psychosomatic Treatment (ADAPT) to Enhance the Knowledge and Skills of Physicians

to Diagnose Depression. J. Indones. Med. Assoc. 63.

IsHak, W.W., Naghdechi, L., 2016. Are sertraline, paroxetine and duloxetine the most effective antidepressants for use in depressed adults over 60 years? Evid. Based Ment. Health 19, e26.

Junne, F., Zipfel, S., Wild, B., Martus, P., Giel, K., Resmark, G., Friederich, H.-C., Teufel, M., de Zwaan, M., Dinkel, A., 2016. The relationship of body image with symptoms of depression and anxiety in patients with anorexia nervosa during outpatient psychotherapy: Results of the ANTOP study. Psychotherapy 53, 141.

Stelfox, H.T., Lane, D., Boyd, J.M., Taylor, S., Perrier, L., Straus, S., Zygun, D., Zuege, D.J., 2015. A scoping review of patient discharge from intensive care: opportunities and tools to improve care. Chest 147, 317-327.

Zebrack, B.J., Corbett, V., Embry, L., Aguilar, C., Meeske, K.A., Hayes-Lattin, B., Block, R., Zeman, D.T., Cole, S., 2014. Psychological distress and unsatisfied need for psychosocial support in adolescent and young adult cancer patients during the first year following diagnosis. Psycho-Oncology 23, 1267-1275.