

Drug titration by nursing professionals in heart failure units. Response



Ajuste de dosis por enfermería en unidades de insuficiencia cardíaca. Respuesta

To the Editor,

We appreciate the interest from our colleagues Civera et al. regarding the ETIFIC trial.¹ We believe, however, that some clarification is required:

The rationale for the study was the lack of adherence to dosage guidelines, as reflected in several articles, often associated with a lack of time rather than changes in the role of nurses.

ETIFIC was the first randomized multicenter trial¹ that demonstrated the noninferiority of drug titration (dose adjustment) by heart failure (HF) nurses compared with HF cardiologists. The Cochrane review² evaluated dose titration by HF nurses compared with primary care physicians.

The nurses in the ETIFIC trial had 400 hours of HF training, 2 years of HF experience, and training in dose titration.

Dose titration is not the same as prescribing. ETIFIC established the initial individualized prescription by physicians, including the timing of dose adjustment as shown in figures 2-5 of the article on the study design.³ The nurses adjusted the dose following a very precise protocol, with predetermined autonomy and regular supervision from the cardiologist, but not at every visit (mean number of HF nurse appointments was 6.41 ± 2.82 vs 2.20 ± 1.21 with the cardiologist of the group).¹

The protocol was agreed by cardiologists, nurses, and managers from 20 hospitals and 10 autonomous communities and was approved by 20 ethics committees and the Spanish Agency for Medicines and Medical Devices in 2014, when the law was more restrictive than now. Legal reform for dose titration is not necessary. The Law for the Regulation of Health Professionals 44/2003, of 21 November, preface explaining rationale, section II and Royal Decree 1302/2018, of 22 October, heading I, general provisions, establish the resolution of professional competencies through interprofessional agreement. In Spain, dose adjustment by HF nurses was a reality before the study and continues to be so.

The current legal framework, with the scientific support of ETIFIC, allows the option to titrate the dose safely and effectively as long as the conditions of the study are met: the nurses are trained, experienced, and have time, there is support from a cardiologist, screening for the procedure, and interprofessional agreement.

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Soft skills in cardiology telemedicine consultations



Las habilidades blandas en consultas telemáticas de cardiología

To the Editor,

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<https://doi.org/10.1016/j.rec.2020.06.032>

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Ideally, quality indicators of the drug titration process would be determined by the Spanish Society of Cardiology or Spanish Association of Cardiology Nursing, whichever corresponds to the organization. From our perspective, the major benefits of optimizing drugs, confirmed in the ETIFIC trial (table 3 and Figure 4 of the study¹), indicate that it is imperative that we adapt the process so that it is carried out in the safest possible way.

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Available online 15 January 2021

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<https://doi.org/10.1016/j.rec.2020.10.021>
1885-5857/

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The consensus document by Barrios et al.¹ makes recommendations for the use of telemedicine in cardiology consultations in response to the current global health emergency. Given the heightened patient vulnerability in this situation, the authors propose that cardiologists use soft skills during telemedicine interviews with their patients.

The article recommends that nursing professionals make the first contact with patients, aiming for telemedicine consultations that are as structured, efficient, and conclusive as possible.

Compared with the much more familiar face-to-face consultation, a telemedicine consultation requires high levels of concentration that can be a significant cause of stress for health professionals. One of the keys to adjusting to this new reality is the acquisition of skills in new information and communication technology tools.² To acquire these skills, nurses could benefit from shared learning with other health professionals to identify strengths and address weaknesses. Such an approach would not only ensure that teleconsultations are as effective as required, but would also help to ensure that they are conducted in a friendly, calm, and relaxed atmosphere, thus creating an agreeable experience for patients.

The application of soft skills in the cardiology teleconsultation ensures successful interaction with patients and family members. One of the key areas where physicians can benefit from training is communication skills, especially in relation to informing patients about their health status.³ The cardiologist needs to maintain a motivational and proactive approach, while demonstrating logical thinking and communication skills. These skills are not innate; they must be developed and maintained, and training in all these areas should therefore be a priority. Maintaining good communication is the surest guarantee that the consultation goals will fall within an integrated care approach.⁴

It is thus essential that physicians and nursing professionals internalize the importance of using soft skills during telemedicine consultations. This requires a conscious and constant effort. The goal is to achieve an appropriate response to the new situation that optimizes workflows while avoiding staff burnout, thus ensuring that the consultation is a positive experience for both the patient and the health professional. This is achieved through empathy, assertive communication, sensitivity, and emotional intelligence, with the aim of building a close and trusting relationship.⁵

Soft skills are an essential part of the health professional's toolkit, and their acquisition should therefore be prioritized to support interactions with patients, who are certain to feel vulnerable due to their health problem plus the added stress related to the current pandemic. An empathetic interaction with patients provides an important counterbalance to this difficult situation. To complement this community and human-centered

approach, health care specialists also need to acquire skills in the use of new technologies for teleconsultations in accordance with data protection regulations.

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Available online 15 April 2021

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<https://doi.org/10.1016/j.rec.2021.01.019>

1885-5857/

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Soft skills in cardiology telemedicine consultations. Response



Las habilidades blandas en consultas telemáticas de cardiología. Respuesta

To the Editor,

We appreciate the letter by Rosario Pacahuala et al. regarding our consensus document of the Spanish Society of Cardiology on telemedicine consultations.¹

By enabling adaptation to the new situations associated with medical modernization, telemedicine has become established as a form of care of both the here and now and the future. Telemedicine consultations permit a different form of health care that can be a source of stress for both medical staff and patients. Thus, satisfactory telemedicine consultations must be rewarding and reassuring, produce a positive feeling for both

physicians and patients, and avoid generating stress, anxiety, and discomfort.²

Accordingly, the telemedicine consultation must be optimized to maximize performance. Efficient consultations rely on soft skills focused on empathy, warmth, and trust. These skills underlie and enrich hard skills centered on abilities and scientific knowledge. Indeed, the combination of both skill sets is key to high-quality telemedicine. Such consultations must guarantee confidentiality, stressing privacy and data protection, and be efficacious and safe.

As highlighted by the authors, the role of nursing staff is crucial in this context, as well as probably that of pharmacists and other individuals involved in health care, such as caregivers. A consensus document on the telemedicine consultation for nursing staff would be highly valuable, with a special focus on the management and monitoring of lifestyle habits and control of risk factors. As one would expect, all components should be coordinated with primary care. The involvement of other professionals would facilitate the optimization of resources in telemedicine³ to offer health care that is at least as rewarding as

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