

Summary

Cirrhosis is a potentially life-threatening condition that occurs when scarring damages the liver. **Cirrhosis** is a chronic disease that causes cell destruction and fibrosis (scarring) of hepatic tissue. Fibrosis alters normal liver structure and vasculature, impairing blood and lymph flow and resulting in hepatic insufficiency and hypertension in the portal vein. Complications include; hyponatremia, water retention, bleeding esophageal varices, coagulopathy, spontaneous bacterial peritonitis and hepatic encephalopathy.

Functional status assessment is fundamental to patients care. It is the ability to manage daily routines. A change in functional status is often the only or the first sign of illness or exacerbation of a chronic condition. A recent study has indicated four risk factors for functional decline in hospitalized elderly patients: pressure sore, pre-existing functional impairment, cognitive impairment and low social activity.

The present study aimed to assess the associates of functional status among hospitalized patients with liver cirrhosis in Benha & Tanta University Hospital at the Internal Medicine Intensive Care Unit & Wards.

The study included a sample of 60 adult patients with confirmed diagnosis of liver cirrhosis involved at this study. The study carried out at Benha and Tanta University Hospital at the Internal Medicine Intensive Care Unit and Wards.

Research questions;

1. What is the functional status score among hospitalized patients with liver cirrhosis?
2. What are the associates of functional status among hospitalized patients with liver cirrhosis?

The data collection tools contained three sheets:

- (1) Socio-demographic data sheet.
- (2) Medical history and physical examination sheet.
- (3) Functional status score tool (physical function, psychological function , social / role function, social activity & quality of social interaction) (*Jetty et al., 1986*).

The main finding of the study generally revealed that patients with liver cirrhosis had low functional status score. , there was significant statistical relationship between gender & (basic ADL), marital status & (basic ADL), educational level & (basic ADL, intermediate ADL), splenomegaly & (social activity), fatigue and weakness& (social activity), ascites& (intermediate ADL, social function and social activity). And laboratory results (hypoalbuminia) & (social activity), there was no significant statistical relationship between occupation, income, duration of disease, causative agents, DM, esophageal varices ,hepatorenal syndrome, anemia, encephalopathy, hepatomegaly and other laboratory results& functional status score. And there was no correlation between age &functional status score.

The study concluded that majority of patients with liver cirrhosis had low functional status score and there was significant statistical relationship between gender, marital status, educational level, splenomegaly, fatigue & weakness, ascites and hypoalbuminemia & functional status score.

The study recommended that prevention and early detection of liver cirrhosis and their sequels should be considered to help lesser the burden of functional status limitation and improve quality of life. , functional status should be included in patient's assessment as six vital signs. , initiation of studies (qualitative & quantitative) to identify and develop nursing strategies that improve functional status among patients with chronic illness like patients with liver cirrhosis. , initiation of studies (qualitative & quantitative) to investigate and develop the family role as a caregiver for patients with liver cirrhosis.

Initiation of comparative studies may be helpful in assessing the change in functional status among patients with liver cirrhosis as the disease progressed in a trail to prevent the burden of functional status limitation and improve quality of life. , a proper evaluation tool of functional status should be delivered in hospital to assess patient's functional status and ensure the quality of care delivered. , a well planned orientation and inservice training programs on the performance standards will help the staff nurses to promote their professional skills.

A well planned orientation and training programs to develop the family role as a caregiver for patients with liver cirrhosis. , standards use for equipments and supplies must be developed to ensure provision of patients care in an efficient manner. , nurses should be aware and well oriented with the meaning of functional status among patients with chronic illness like patients with liver cirrhosis. , nurses should focus on supplementing the patient's strength, will and knowledge in performing his or her active role in performing daily activity to avoid subsequent loss of functional status.

Nurses should reinforce the positive coping strategies to develop better quality of life. , nurses should assist and teach patients to perform necessary activity of daily living. , nurses have an important role in linking patients to community resources that provide services to enhance the economic status to develop better quality of life and enhance their self esteem. , nurses should be aware about the important of instilling hope among patients with chronic illness like liver cirrhosis patients. , more psychological and financial support should be available to improve quality of life. And replication of the study on larger representative probability sample is highly recommended to achieve more generalization of the result.