



**Category: Applied Research in Health and Medicine**

**ORIGINAL**

## **Nursing role and care that favor the quality of life of institutionalized Alzheimer's patients in a geriatric hospital in the city of Rosario in August 2021**

### **Rol de Enfermería y cuidados que favorecen la calidad de vida del enfermo de Alzheimer institucionalizado en un Hospital Geriátrico de la ciudad de Rosario en agosto de 2021**

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#### **ABSTRACT**

The figure of the Advanced Practice Nurse as a care manager is a role under construction and a possibility of improving the response to the patient's demands. Therefore, a descriptive cross-sectional study was conducted with the aim of describing how nurses assess the nursing role and the care needed to improve the quality of life of institutionalized Alzheimer's patients. A non-probabilistic sample of twenty nurses working in the morning shift at a Geriatric Hospital in the city of Rosario in August 2021 was selected. Nurses, graduates or higher degree dedicated to caring for elderly residents and people with this type of dementia were included. The selected technique was the survey and a self-administered questionnaire-type data collection instrument with 13 questions of personal elaboration was used.

The opinion of the nurses surveyed about their role in the quality of life of institutionalized Alzheimer's patients shows an awareness of its importance and a perception of recognition by the interdisciplinary team. There is still contradiction regarding the action taken to face this responsibility and inconsistencies appear in the internal agreements of the nursing team.

The surveyed nurses' assessment of the care that favors the quality of life of the institutionalized Alzheimer's patient showed more intentions than practices. The aspects of humanization, innovation and the need for training in care favoring the quality of life of these patients are clearly valued. The nurses' self-perception regarding the care they provide for quality of life was positive in the order of 75% of the respondents.

**Keywords:** Nursing role; quality of life; institutionalized Alzheimer's patient.

**RESUMEN**

La figura de la Enfermera de Práctica Avanzada como gestora del cuidado es un rol en construcción y una posibilidad de mejorar la respuesta a las demandas del paciente por lo que se planteó un estudio descriptivo de corte transversal con el objetivo de describir qué valoración tienen los enfermeros del rol de enfermería y los cuidados necesarios para favorecer la calidad de vida del enfermo de Alzheimer institucionalizado. Se seleccionó una muestra no probabilística de veinte enfermeros que desarrollaron tareas en el turno mañana en un Hospital Geriátrico de la ciudad de Rosario en agosto de 2021. Se incluyeron enfermeros, licenciados o título superior dedicados a cuidar a los adultos mayores residentes y personas con este tipo de demencia. La técnica seleccionada fue la encuesta y se utilizó un instrumento de recolección de datos tipo cuestionario autoadministrado con 13 preguntas de elaboración personal. La opinión de los enfermeros encuestados acerca del rol que cumplen en la calidad de vida del enfermo de Alzheimer institucionalizado muestra una toma de conciencia respecto de su importancia y una percepción de reconocimiento por parte del equipo interdisciplinario. Aún existe contradicción respecto de la toma de acción para enfrentar esa responsabilidad y aparecen inconsistencias en los acuerdos internos del equipo enfermero.

La valoración del cuidado que favorece la calidad de vida del enfermo de Alzheimer institucionalizado que tienen los enfermeros asistenciales encuestados mostró más intenciones que prácticas. Aparecen claramente valorados los aspectos de humanización, innovación y necesidad de capacitación de los cuidados que favorecen la calidad de vida de estos pacientes. La autopercepción de los enfermeros respecto de los cuidados que brindan para la calidad de vida fue positiva en el orden del 75% de los encuestados.

**Palabras clave:** rol de Enfermería; calidad de vida; enfermo de Alzheimer institucionalizado.

**INTRODUCTION**

The care of patients with Alzheimer's disease (AD) represents a significant challenge for healthcare systems, especially in the field of institutionalized geriatric care. This neurodegenerative disease, characterized by the progressive loss of cognitive and functional abilities, requires multidimensional care that combines technical skills with a humanized approach. In this context, nurses play an essential role in improving the quality of life of these patients by providing specialized care that addresses both physical and emotional needs. However, the assessment of this role by the nurses themselves and the effectiveness of their interventions have been little explored, especially at the local level in Argentina.

The present study is being carried out at the Provincial Geriatric Hospital of Rosario, an institution with a long history of caring for the elderly. This hospital, located in the city of Rosario, in the province of Santa Fe, has an infrastructure that includes multiple specialized health services and an interdisciplinary team. In this environment, nurses face the challenge of providing care adapted to the different stages of AD, ensuring the continuity and quality of care while collaborating with other professionals on the healthcare team. However, recognizing their role within the team and the perception of their training to assume greater responsibilities in caring for patients with AD remain central issues for evaluating and strengthening their performance.

Using a non-experimental, descriptive design with a qualitative approach, this study seeks to explore nurses' perceptions and practices regarding their role in the care of institutionalized AD patients. To this end, information was collected using an anonymous questionnaire administered to 20 nurses working the morning shift at the hospital. The data obtained allows for the analysis of aspects such as care planning according to the evolutionary phases of the disease, the identification of humanized care, and the perception of the need for specialized training.

The importance of this study lies in highlighting the strengths and areas for improvement in nursing practice, especially in a context where population aging and the prevalence of AD are increasing. Furthermore, it underlines the need to promote continuous training and innovation in care, key elements in guaranteeing quality care. This work contributes to the construction of a professional space that enhances the role of nurses, consolidating their contribution in interdisciplinary teams and strengthening the care of patients with AD in geriatric institutions.

How do nurses assess the role of nursing and the care necessary to improve the quality of life of Alzheimer's patients institutionalized in a geriatric hospital in the city of Rosario in August 2021?

#### General objective

To describe how nurses assess the role of nursing and the care necessary to improve the quality of life of Alzheimer's patients institutionalized in a geriatric hospital in the city of Rosario in August 2021.

## METHODS

### Type of Study / Design

Given that the objective of the present study is to describe how nurses assess the professional role and the care necessary to improve the quality of life of Alzheimer's patients institutionalized in a Geriatric Hospital in the city of Rosario in August 2021, a non-experimental design was used, which was applied over time in a cross-sectional manner. Descriptive research with a qualitative approach was carried out.

### Participants Population

The study population consisted of all the nurses who carried out care activities in a Geriatric Hospital in the town of Rosario, Province of Santa Fe; for the development of this research, it was necessary to carry out a study of the institution's population to determine whether the proposal affected or benefited the research.

### Sample

In this research project, 20 nurses who work the morning shift in a geriatric hospital in Rosario, Santa Fe province, were surveyed. A non-probabilistic sample was used. The inclusion criteria were that they were nurses with a degree or higher and provided assistance/care to elderly residents and people with this type of dementia. Excluded were nurses, graduates or higher with any leave at the time of data collection, and those who did not wish to participate or did not complete the informed consent.

### Area of Study

The workplace was in a geriatric hospital in Rosario, Santa Fe Province. The institution's beginning date was 1899. The Rosario Charity Society initiative was set up to provide shelter for the chronically mentally ill and homeless beggars. It was called the Sacred Heart of Jesus Asylum for the Insane and Beggars. Currently, the Rosario Provincial Geriatric Hospital, recognized as such in 1978 during the military dictatorship, is an organization under the Ministry of Health of the Province of Santa Fe in the category of exceptional hospitals. The institution has approximately 350 employees who work rotating shifts to guarantee the well-being of the residents. Among them, some employees belong to the maintenance sector of the institution, administration, medical professionals and other specialties, general services, and nurses. The hospital has nine wards, each with 18 beds; three men's wards are located in the west wing of the hospital, and the rest: three women's wards, one mixed ward, one COVID ward, and one Palliative Care Unit ward are located in the east wing of the hospital. In its organizational system and general functioning, the Provincial Geriatric Hospital of Rosario has a nursing department, a medical department, ward doctors, an outpatient department (geriatric clinic, cardiology, ophthalmology, psychiatry, dermatology, rheumatology and nutrition), an on-call medical department, mental health department, nutrition service, dentistry service, physiatry and rehabilitation service, X-ray service, pharmacy service, laboratory service and general services (maintenance, supply, laundry and wardrobe).

#### Techniques, procedures, and instruments

The data collection instrument used was a simple, anonymous questionnaire with thirteen closed questions of personal elaboration; in some questions, arrows were proposed to identify characteristics of the Alzheimer's patient according to the phases of the disease they are going through and thus observe the interviewee's understanding; in others, they were asked to justify the answer and recognize humanized care.

The instrument was tested with 13 students of the Bachelor of Nursing at the Universidad Abierta Interamericana, Rosario regional headquarters. They received the instrument by email and made contributions in non-face-to-face meetings via videoconference. The corresponding corrections were made to the instrument until it resulted in a simple design, considering that the participant would not need assistance from the researcher to complete it. The participation of the nursing staff was voluntary and disinterested, completing the instrument in a physical format.

#### Ethical considerations

The express consent of all the nurses interviewed was requested and obtained in writing. When inviting them to participate in the research: The Role of Nursing and Care that Favors the Quality of Life of Alzheimer's Patients institutionalized in a Geriatric Hospital in the city of Rosario in August 2021, they were provided with detailed and accurate information about the purpose, duration, methodology, and criteria for ending their participation, emphasizing the right to withdraw at any time if they so wished. Furthermore, to preserve the confidentiality of the information provided, all data that could identify the participant was coded to protect personal data, safeguard their identity, and ensure anonymity. A written record of the commitment to maintain due confidentiality regarding the personal data of the project participants is kept, both in obtaining, processing, and storing the data and in the subsequent publication of the results.

## RESULTS

Analysis and interpretation of the data collected

**Table 9. Opinion on recognition of the role of nursing in the quality of life of institutionalized Alzheimer's patients. Nurses surveyed.**

|              | No. of nurses | Percentage of nurses |
|--------------|---------------|----------------------|
| YES          | 13            | 65%                  |
| NO           | 7             | 35%                  |
| <b>TOTAL</b> | <b>20</b>     | <b>100%</b>          |

**Source: Author's own creation.**

The nurses surveyed stated that they can perceive recognition of their role in favoring the quality of life of institutionalized Alzheimer's patients when they provide quality care. This perception is in line with the need expressed by PAHO (2012) that health systems must face the challenge of caring for a user with characteristics and needs that are different from the usual ones, and with Darpon's (2013) assertion that this is an opportunity to strengthen the role of nursing, where its responsibilities will be greater.

**Table 10: Collaboration and interdisciplinary agreement in nursing interventions. Nurses surveyed.**

|              | No. of nurses | Percentage of nurses |
|--------------|---------------|----------------------|
| YES          | 15            | 75                   |
| NO           | 5             | 25                   |
| <b>TOTAL</b> | <b>20</b>     | <b>100</b>           |

Source: Author's own creation.

**Table 11: Collaboration and intra-disciplinary agreement in the care of institutionalized Alzheimer's patients.**

|              | No. of nurses | Percentage of nurses |
|--------------|---------------|----------------------|
| YES          | 9             | 45                   |
| NO           | 11            | 55                   |
| <b>TOTAL</b> | <b>20</b>     | <b>100</b>           |

Source: survey data.

**Table 12: Guarantee the continuity of this care with their colleagues.**

|              | No. of nurses | Percentage of nurses |
|--------------|---------------|----------------------|
| YES          | 11            | 55                   |
| NO           | 9             | 45                   |
| <b>TOTAL</b> | <b>20</b>     | <b>100</b>           |

Source: Author's own creation.

When asked if they received collaboration from other members of the health team, such as doctors, physiotherapists, nutritionists, or psychologists, in their nursing interventions with this type of patient,

75% of those surveyed confirmed that collaboration did take place (table 10), but the level of intra-disciplinary agreement where it is proposed, new care is suggested, shared or coordinated was lower, 45% of those surveyed (table 11). Ensuring continuity of care with other nurses reached a slightly higher percentage, 55% of those surveyed (table 12).

**Table 13: Opinion on strengthening the role of nursing in the care of institutionalized Alzheimer's patients. Nurses surveyed.**

|       | No. of nurses | Percentage of nurses |
|-------|---------------|----------------------|
| YES   | 17            | 85                   |
| NO    | 3             | 15                   |
| TOTAL | <b>20</b>     | <b>100</b>           |

Source: Prepared by the author.

**Table 14: Self-perception of the ability to take on the challenge of more responsibilities in the care of institutionalized Alzheimer's patients. Nurses surveyed.**

|       | No. of nurses | Percentage of nurses |
|-------|---------------|----------------------|
| YES   | 7             | 35                   |
| NO    | 13            | 65                   |
| TOTAL | <b>20</b>     | <b>100%</b>          |

Source: Author's own creation.

85% of the nurses surveyed agreed that it is necessary to promote the role of nursing as an essential role in the care of Alzheimer's patients (Table 13). Still, only 35% considered themselves capable of assuming more responsibilities in this care (Table 14). According to PAHO (2012), it is understandable that this opportunity for role development will require new competencies that will enable them to respond to new professional demands. In the statements of Goodman et al. (2013), a differentiation process is proposed between the general nurse's functions and the specialist nurse's functions.

**Table 15: You usually make a care plan according to the evolutionary phase of Alzheimer's disease. Nurses surveyed.**

|     | No. of nurses | Percentage of nurses |
|-----|---------------|----------------------|
| YES | 10            | 50%                  |
| NO  | 10            | 50%                  |
|     |               |                      |

|       |    |      |
|-------|----|------|
| TOTAL | 20 | 100% |
|-------|----|------|

Source: Author's own creation.

**Table 16: Recognize the evolutionary phase of Alzheimer's in a person with this type of dementia. Nurses surveyed.**

|                          | No. of nurses | Percentage of nurses |
|--------------------------|---------------|----------------------|
| Yes                      | 2             | 10%                  |
| NO                       | 11            | 55%                  |
| A little (1 or 2 phases) | 7             | 35%                  |
| TOTAL                    | 20            | 100%                 |

Source: Author's own creation.

Regarding care to improve the quality of life of patients with Alzheimer's, half of those surveyed said that they consider the evolutionary phases of the disease to plan for them (Table 15). When given a list of symptoms and asked to indicate which phase they belonged to, 11 respondents did not answer the question; only 10% responded correctly, and 35% recognized them partially. (Table 16).

**Table 17: Recognition of 3 types of care associated with a better quality of life for institutionalized Alzheimer's patients. Nurses surveyed.**

|                          | No. of nurses | Percentage of nurses |
|--------------------------|---------------|----------------------|
| Yes                      |               | 0                    |
| NO                       | 5             | 25                   |
| A little (1 or 2 phases) | 15            | 75                   |
| TOTAL                    | 20            | 100                  |

Source: Author's own creation.

It is traditional to divide Alzheimer's disease into phases for study, and the basic 3-phase model was used as a proposal contained in the questions presented to the respondents to recognize symptoms of Alzheimer's disease and care associated with patients' quality of life. That is to say, the questions posed were based on a fundamental model if we consider the approaches of authors who describe four stages of Alzheimer's disease (Fernández Rodríguez, 2014) and up to 5 stages (Miguel González, 2017). 85% of respondents did not answer, 10% recognized 2 care, and 5% recognized one care.

**Table 18: Humanized care is a priority for Alzheimer's patients. Nurses surveyed.**

|              | No. of nurses | Percentage of nurses |
|--------------|---------------|----------------------|
| YES          | 16            | 80                   |
| NO           | 4             | 20                   |
| <b>TOTAL</b> | <b>20</b>     | <b>100</b>           |

Source: Prepared by the author.

**Table 19: Innovation in care is necessary. Nurses surveyed.**

|              | No. of nurses | Percentage of nurses |
|--------------|---------------|----------------------|
| YES          | 14            | 70                   |
| NO           | 6             | 30                   |
| <b>TOTAL</b> | <b>20</b>     | <b>100</b>           |

Source: Author's own creation.

Sufficient information is available to instrumentally address the care of these patients, such as the specific quality of life indicators presented by Miguel González (2017) that guide the care plan strategy concerning the actual and potential problems that the patient faces in the evolution of their disease, the guidelines of Lluesma Vidal (2017) on health-related quality of life (HRQOL), or the instruments for explicitly evaluating the quality of life of patients with AD and their caregivers published by López Perales et al. (2020).

In favor of the competencies already achieved in the role of Nursing, patients' quality of life correlates with their loss of autonomy in basic needs Fernández Rodríguez (2014), an area of good mastery of the discipline. The loss of higher cognitive functions with a great affectation of language generates few communication alternatives that will be reduced to physical contact and non-verbal language, well developed in Nursing by the classic theoretical impregnation of the school of interaction in its training programs (Elers Mastrapa & Gibert Lamadrid, 2016; León Romás, 2017). It can be seen that the nurses surveyed had no problem identifying the importance of humanization (Table 18) and innovation in care for the quality of life of institutionalized Alzheimer's patients (Table 19) (65% and 70%, respectively).



**Table 20: Their assessment in relation to the care they provide for these people. Nurses surveyed.**

|              | No. of nurses | Percentage of nurses |
|--------------|---------------|----------------------|
| Positive     | 15            | 75                   |
| Negative     | 0             | 0                    |
| Neutral      | 5             | 25                   |
| <b>TOTAL</b> | <b>20</b>     | <b>100</b>           |

Source: Author's own creation.

**Table 21: Opinion on whether they consider that they should receive training from specialists in Alzheimer's disease by the healthcare institution where they work. Nurses surveyed.**

|              | No. of nurses | Percentage of nurses |
|--------------|---------------|----------------------|
| YES          | 16            | 80                   |
| NO           | 4             | 20                   |
| <b>TOTAL</b> | <b>20</b>     | <b>100</b>           |

Source: Author's own creation.

Contradictory results are shown, such as when they believe they know, and reality shows that this acquired knowledge is insufficient. The lack of training space is ratified in the population when 80% said that nurses should have continuous training to acquire the necessary knowledge and skills to apply them in daily practice and then carry out their actions, fulfilling the role of nurses and providing quality care effectively and efficiently. According to the respondents, this learning should be provided by the healthcare institution that provides care for people with Alzheimer's (Table 21). The self-assessment (Table 20) they made of the quality of the care they provide reflected the situation well, as expressed by Miguel González (2017) when he was able to determine the difference in perception of the quality of life problems experienced by patients and caregivers, in line with the statement by Lluesma Vidal (2017) regarding overcoming the problem of the subjectivity of perception. Specifically, the perception of the quality of life of Alzheimer's patients by their caregivers is different from that of the patients themselves and is more related to the caregiver's overload. Furthermore, it should be remembered that we are dealing with a patient who will have little or no capacity to express their situation as dementia progresses.

## CONCLUSIONS

The nurses who took part in the study population feel that the role of nurses in providing care to improve the quality of life of institutionalized Alzheimer's patients is recognized. They found it easier to receive collaboration from other non-nursing members of the healthcare team (75% of cases) than to coordinate or agree with peers on innovations in care (45%). They reported that they can guarantee continuous care for Alzheimer's patients in just over half of the cases (55%). Although they agreed with the need to enhance the important role of nursing in the care of Alzheimer's patients, only 35% considered themselves capable of taking on more responsibilities in the care and assistance of these patients.

Half of the nurses stated that they plan care based on the stages of Alzheimer's disease. However, only 30% could correctly identify which symptom belongs to each stage: - Stage 1 long-term memory deteriorates - Stage 2 confuses words when speaking - Stage 3 incontinence. Furthermore, 85% of the nurses could not recognize three types of care associated with a better quality of life when presented to them in a list. The care to be distinguished was:

- optimizing the capacity for social interaction and functional capacity—providing comfort and positive nonverbal communication in times of crisis—adapting our communicative stimulus to that of the patient. However, they recognize the importance of humanization and innovation of care in the quality of life of institutionalized Alzheimer's patients (65% and 70%, respectively).

Seventy-five percent of the nurses rated the care they provide for the quality of life of Alzheimer's patients positively, and 80% thought that nurses should receive continuous training from the healthcare institution to care for this type of patient.

It is concluded that the nurses surveyed' opinions about the role they play in the quality of life of institutionalized Alzheimer's patients show an awareness of its importance and a perception of recognition by the interdisciplinary team. However, there is still a contradiction regarding the action taken to face this responsibility, and inconsistencies appear in the internal agreements of the nursing team.

The assessment of care that favors the quality of life of institutionalized Alzheimer's patients made by the surveyed care nurses showed more intentions than practices. The importance of planning care adjusted to each phase of the disease reached only half of the study population. However, the results regarding recognizing symptoms and recommended care were even poorer. The aspects of humanization, innovation, and the need for care training that favor the quality of life of these patients are valued. The self-perception of nurses regarding the care they provide for quality of life was positive in the order of 75% of those surveyed.

Nurses know the nursing role that is yet to be defined, which Sánchez (2014) called Advanced Practice Nurse. They are sufficiently experienced to be aware of its importance in the team and should define the role and fill it with content, as stated in Darpon (2013). There can be no other way than to improve specialized training, and incorporate specific assessment tests, standardized practices, and care processes that allow for debate, opinion, innovation, learning, and coordination; in short, that Nursing learn to incorporate intradisciplinary cohesive behaviors and there is more commitment among Argentine nurses to research into humanized care for patients with this type of dementia because throughout this research work it became clear that there is not a great diversity of material, with little or no production in Argentina.

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