

Federal University of Rio de Janeiro State



Journal of Research Fundamental Care Online


 ISSN 2175-5361
 DOI: 10.9789/2175-5361

RESEARCH

Produção científica sobre a pessoa idosa em cuidados paliativos: estudo bibliométrico

Scientific production on the elderly person undergoing palliative care: bibliometric study

Marcella Costa Souto Duarte ¹, Solange Fátima Geraldo da Costa ², Gilvânia Smith da Nóbrega Morais³, Jael Rúbia Figueiredo de Sá França ⁴, Maria Andréa Fernandes ⁵, Maria Emília Limeira Lopes ⁶

ABSTRACT

Objective: To characterize the scientific production disseminated in online journals on the elderly person undergoing palliative care. **Method:** This is a bibliometric study composed of 46 papers published in the databases LILACS, MEDLINE and IBECs, and in the digital libraries SciELO and COCHRANE, in the period from 2004 to 2014. **Results:** A concentration of titles in specialized journals in palliative care has been identified, with origin of Brazil, United States and United Kingdom, in *Qualis* A1, A2 and B1. The areas of Nursing and Medicine have obtained a greater amount of publications. There was a predominance of authors with the titration of PhD. As for the focus of the disease, 90% of the studies were related to cancer. **Conclusion:** The publications about the investigated issue have shown a little expressive amount, taking into account the surveyed period. It is suggested to perform new studies using bibliometric research as investigation method, so that other indicators can emerge and stimulate the expansion of knowledge about the theme. **Descriptors:** Palliative Care, Elderly, Bibliometrics.

RESUMO

Objetivo: Caracterizar a produção científica divulgada em periódicos *online* sobre a pessoa idosa em cuidados paliativos. **Método:** Estudo bibliométrico constituído de 46 artigos publicados nas bases de dados LILACS, MEDLINE e IBECs, e nas bibliotecas digitais SciELO e COCHRANE, no período de 2004 a 2014. **Resultados:** Identificou-se uma concentração de títulos em revistas especializadas em cuidados paliativos, com procedência do Brasil, Estados Unidos e Reino Unido, em *Qualis* A1, A2 e B1. As áreas de Enfermagem e Medicina obtiveram maior quantitativo de publicações. Houve predominância de autores com o título de Doutor. Quanto ao enfoque da doença, 90% dos estudos estavam relacionados ao câncer. **Conclusão:** As publicações acerca da temática investigada apresentam um quantitativo pouco expressivo, considerando o período pesquisado. Sugere-se a realização de novos estudos tendo como método a pesquisa bibliométrica, para que outros indicadores possam emergir e suscitar a ampliação do conhecimento sobre o tema. **Descritores:** Cuidados Paliativos, Idoso, Bibliometria.

RESUMEN

Objetivo: Caracterizar la producción científica divulgada en periódicos online acerca de la persona anciana bajo cuidados paliativos. **Método:** Estudio bibliométrico compuesto por 46 artículos publicados en las bases de datos LILACS, MEDLINE y IBECs, y en las bibliotecas virtuales SciELO y COCHRANE, en el período de 2004 a 2014. **Resultados:** Se identificó una concentración de títulos en revistas especializadas en cuidados paliativos, con procedencia de Brasil, Estados Unidos y Reino Unido, en *Qualis* A1, A2 y B1. Las áreas de Enfermería y Medicina han obtenido una mayor cantidad de publicaciones. Hubo un predominio de autores con titulación de Doctor. En lo que respecta al enfoque de la enfermedad, 90% de los estudios estaban relacionados con el cáncer. **Conclusión:** Las publicaciones acerca de la temática investigada presentan una cantidad poco significativa, teniendo en cuenta el período investigado. Se sugiere la realización de nuevos estudios teniendo como método investigativo la investigación bibliométrica, para que otros indicadores pueden despuntar y suscitar la expansión del conocimiento sobre el tema. **Descriptor:** Cuidados Paliativos, Anciano, Bibliometría.

¹Nurse. PhD Student in Nursing from the Federal University of Paraíba (UFPB). Member and Researcher of the Nucleus for Studies and Research in Bioethics. Federal University of Paraíba. João Pessoa, Paraíba, Brazil. E-mail: marcellasouto@hotmail.com; ²Nurse. PhD in Nursing from the University of São Paulo. Member of the Nucleus for Studies and Research in Bioethics. Federal University of Paraíba. João Pessoa, Paraíba, Brazil. E-mail: solangefgc@gmail.com; ³Nurse. PhD Student in Nursing from the Federal University of Paraíba (UFPB). Member and Researcher of the Nucleus for Studies and Research in Bioethics. Federal University of Paraíba. João Pessoa, Paraíba, Brazil. E-mail: gilvaniamorais.ufcg@gmail.com; ⁴Nurse. PhD in Nursing from the Federal University of Paraíba (UFPB). Member and Researcher of the Nucleus for Studies and Research in Bioethics - NEPB and of the Study Group on Child and Adolescent Health in Primary Care. Federal University of Paraíba. João Pessoa, Paraíba, Brazil. E-mail: jaelrubia@gmail.com; ⁵Master in Nursing from the Federal University of Paraíba (UFPB). Member and Researcher of the Nucleus for Studies and Research in Bioethics. Federal University of Paraíba. João Pessoa, Paraíba, Brazil. E-mail: m.andrea@hotmail.com; ⁶Nurse. PhD in Education from the Federal University of Rio Grande do Norte (UFRN). Member and Researcher of the Nucleus for Studies and Research in Bioethics. Federal University of Paraíba. João Pessoa, Paraíba, Brazil. E-mail: mlimeiralopes@yahoo.com.br

INTRODUCTION

Population aging has been a widely spoken theme in our society among researchers, social managers and health professionals, especially in the Nursing field, since it is an inexorable process that occurs in the global scenario. With the increase of elderly population, chronic non-communicable diseases (CNCD) arise and, consequently, disabilities that may limit the functional performance and generate dependency.¹

CNCD and degenerative diseases, such as cancer, and the health complications provoked by external factors, such as the environment and the lifestyle, are responsible for approximately two-thirds of the proportion of diseases in Brazil.²

In the elderly patient with incurable disease, the evolution to death takes place when it is in a state of fragility, with a decline of organic functions and of quality of life⁽³⁾. One should highlight that sick people without possibility of cure are usually subjected to restrictions in their daily lives, with phases of low functional, mental, social and spiritual ability. These implications imposed by the disease, such as in the case of cancer, require active and total care with a view to improving the quality of life, that is to say, palliative care.

Therefore, experiencing this reality implies rethinking the care and implementing new strategies aimed at enhancing the care for this segment of the population, and it is of utmost importance to promote palliative care to improve its quality of life.⁴

The word “palliative” stems from the Latin *pallium*, which means cloak, protection, that is to say, to protect those that curative medicine is no longer able to assist.⁵ Palliative care comprise an interdisciplinary field of total care, active and comprehensive, aimed at improving the quality of life of the patient without possibility of cure and of its family members, through right assessment and appropriate treatment for relieving pain and symptoms resulting from the advanced stage of a disease, besides providing psychosocial and spiritual support, in all stages, from the diagnosis of an incurable disease until the mourning period of the family.⁶

Studies⁷ assert that this palliative modality of caring for, within the biopsychosocial dimension, is indicated for the patient whose disease is irreversible, that is to say, when the possibilities for rescuing the health conditions of the patient are depleted. Thus, when considering that the biopsychosocial needs advance with the aggravation of the pathology, the palliative care is directed to the process of death and dying, that is to say, the care at the end of life.⁸

It is worth emphasizing that palliative care, due to being grounded on a holistic view of the human being, has a philosophy to value life and to face death as a natural process.⁹ Accordingly, it does not delay and nor prolongs death, but sustains the human being in its anguishes and fears by providing relief to pain and to other symptoms, thereby offering support so that one can live as actively as possible; this health care modality also helps the family and the caregivers in the mourning process.¹⁰

Under this perspective, palliative care is implemented in the sense of promoting pain relief, reducing discomfort and, mainly, minimizing other symptoms in the patient, arising from the illness itself and/or from treatments in advanced stages of incurable diseases, so that it can experience this reality with quality of life.¹¹ For this reason, the appreciation of palliative care as an important and differentiated approach of care is undeniable and should essentially be directed to the elderly person, due to systemic changes that occur during the process of a disease without possibility of cure, and with the proximity of death.

Thus, before the relevance of the palliative care directed to the elderly person, it was considered timely to explore the matter, from the method of bibliometrics, in national and international literature. The bibliometric research enables the dissemination of the scientific knowledge of the studied area, as well as assessment of the productivity and quality of research of actors (authors/researchers).¹² In light of the foregoing, this investigation sought to answer the following question: What are the characteristics of the scientific productions disseminated in online journals that address the elderly person under palliative care?

Given the above mentioned considerations, this investigation was aimed at characterizing the scientific production available in online journals on the elderly person undergoing palliative care.

METHOD

This investigation is a bibliometric study. It is worth mentioning that one of the possibilities of making assessments of the scientific production is the use of methods capable of measuring the intellectual production of researchers, groups or research institutions. To that end, it is essential to use quantitative techniques capable of showing indicators that represent the state of art of the scientific production about a certain theme, such as, for example, bibliometrics.¹³

It is worth highlighting that the definition of bibliometrics does not refer to a specific area of knowledge. In Nursing, studies of this nature have been used to indicate the characteristics of the scientific production of the area.¹⁴

In order to perform this study, three operational steps were considered, driven by the guidelines proposed by Vanz and Stumpf,¹⁵ mentioned hereinafter.

In the first step, there was a bibliographic survey with regard to scientific productions on palliative care directed to the elderly person with chronic disease and a sample selection. To that end, there was a search in the Virtual Health Library (VHL), managed by the Latin American and Caribbean Center on Health Sciences Information, also known by its original name - *Biblioteca Regional de Medicina* (BIREME), which is a

specialized center of the Pan American Health Organization/World Health Organization (PAHO/WHO), oriented towards technical cooperation in scientific information on health.¹⁶

As for the databases, the following were selected: Latin American and Caribbean Literature (LILACS), National Library of Medicine (MEDLINE), *Índice Bibliográfico Español de Ciencias de la Salud* (IBECS), and the Digital Libraries: Scientific Electronic Library Online (SciELO) and The Cochrane Library (COCHRANE).

One should highlight that, in order to accomplish the search of papers in the above mentioned data sources, the health terminology from the Health Sciences Descriptors (DeCS) was used, which is a structured and dynamic trilingual vocabulary with 31.865 descriptors, of which 27.232 are from MeSH and 4.633 are exclusively from DeCS, developed from the Medical Subject Headings (MeSH), from the U.S. National Library of Medicine (NLM), with the purpose of allowing the use of common terminology for research in three languages. This is a consistent and singular mean to recover information, irrespective of the language, produced by BIREME.¹⁷

Subsequently, the descriptors “*cuidados paliativos*” or “palliative care” and “*idoso*” or “elderly” were identified and combined with the Boolean operator AND, and its presentation was conditioned to the title of the work, in order to filter out studies addressing only the selected issue. Accordingly, it has enabled the identification of 63 publications.

In order to select the sample, the following inclusion criteria were adopted: publications in the modality of papers, with full text, addressing palliative care directed to the elderly person with chronic disease, published in the time cutout from January 2004 to July 2014. Accordingly, eighteen studies were excluded because they did not meet the proposed criteria. Therefore, the study sample was composed of 46 works that were organized and grouped in folders and named in accordance with the databases and the digital library in which they were located.

In the second step, there was the collection and organization of data. Data collection took place in the period from August to September 2014, when the data survey process was conducted, and it was mediated by a script elaborated by the researchers. It was made up of the following information: name of the journal, *Qualis* of the journal, year and country, database or virtual library, academic training and titration of the authors, geographic origin, institutional origin, number of authors per paper, language in which the paper was written, modality of study, place of research, participant group and keywords. Nonetheless, in order to ease up the collection of information required to accomplish this research, one table was elaborated, which was subsidized by the above mentioned script. Thus, data were obtained by means of an accurate reading of the selected papers.

The third step was the presentation and analysis of data. Firstly, there was the treatment of data, through the calculation of simple and relative frequencies, with distribution of frequency in absolute numbers and percentage, with the use of the program Microsoft Office Excel® 2010 as a tool. After this procedure, data were analyzed in the light of the literature pertaining to the investigated theme.

In order to organize the keywords, by seeking relationships between thematic concepts linked by these words, a teaching strategy used to develop critical thinking skills

was applied, namely, the conceptual map, due to being considered a graphical representation that stimulates the organization of concepts and the union between theory and practice.¹⁸ in the Nursing field, conceptual maps are used with the intention of promoting critical and reflective thinking, assisting in the resolution of problems and in the synthesis of concepts, enabling the planning of care shares, and finally synthesizing and assessing nursing actions.¹⁹

Based on this understanding, the conceptual map was considered as a widely relevant strategy to depict the keywords quoted in the papers selected for this study. Identified by conceptual thematic affinity, the keywords were grouped from the main - palliative care -, due to being the theme of study, and systematically organized in thematic classes, but not in a hierarchical way.

RESULTS AND DISCUSSION

This topic is about the results and the discussion of the study, related to bibliometric indicators, selected for this research.

Data relating to the journals

The sample of this study was composed of studies disseminated between the years 2004 and 2014, totaling 46 scientific papers. Of these, 23 (50%) studies were selected from the database National Library of Medicine (MEDLINE), 11 (24%) publications were present in the Latin American and Caribbean Literature (LILACS), ten (22%) in the Scientific Electronic Library Online (SciELO), one (2%) in the Cochrane Library (COCHRANE) and one (2%) in the *Índice Bibliográfico Español de Ciencias de la Salud* (IBECS).

Regarding the impact factor, one should highlight the BMC Medicine (7,27), a journal that publishes original research, comments and opinions of significant interest to all areas of Medicine and Clinical Practice, the Cochrane Database Syst Rev (5,94) and the Journal of the American Geriatrics Society (4,216), whose main objective is to publish papers that are relevant to the clinical care in geriatrics, and it encompasses a variety of disciplines and fields if it is revealed in immediate, intermediate or long-term benefit for the clinical practice.

The predominance of the database MEDLINE, with a greater number of studies when compared to other bases, comes from the fact that it is publishing since 1996 a large number of references, reason why it is considered one of the most ancient bases, as well as the emphasis on papers coming from several prominent countries such as the ones of English language, whilst the other bases are more recent, and some of them encompass a smaller number of countries.

The MEDLINE is the main database of the National Library of Medicine (NLM). It contains more than 17 million references of biomedical journals, from the year 1948,

published in the United States of America and in over 80 countries worldwide. It is worth emphasizing that there is a predominance of studies coming from the English language.¹⁷

Concerning the database LILACS, it encompasses publications of Latin America and Caribbean countries,²⁰ and includes the scientific production with regard to the Health Sciences, published in the countries of this region, since the year 1982. It contains papers from approximately 670 journals, considered the most renowned in the health area, with more than 350 thousand records and other documents such as: theses, chapters of theses, books, chapters of books, congress and conference proceedings, technical-scientific reports and governmental publications. It is available in three languages: Portuguese, Spanish and English.²¹

The Virtual Library SciELO is characterized by providing online open access to full texts of scientific journals, in Portuguese, Spanish and English languages and aims at contributing to the development of scientific research, in addition to seeking to improve the visibility, accessibility, quality, credibility, and the use and impact of the scientific publication of the developing countries at the national and international levels, in a systematic and sustainable manner. It exhibits 1.195 journals, 35.011 fascicles, 511.335 papers and 11.423.065 quotes.^{22, 23}

As for the Cochrane Library, it is a non-profit and independent global network of health professionals, with collaborators from more than 120 countries, who work together to produce credible and accessible health information, free of commercial sponsorship and off other conflicts of interest. It aims at promoting decision makings in health based on evidence by high-quality production, relevant systematic reviews and other evidence of synthesized research.²⁴

Concerning the *Índice Bibliográfico Español de Ciencias de la Salud* (IBECS), it is produced by the *Biblioteca Nacional de Ciencias de la Salud del Instituto de Salud Carlos III del Ministerio de Sanidad y Consumo de España*, which covers, besides the Nursing, the areas of Medicine, Pharmacy, Veterinary, Psychology and Dentistry. It provides bibliographic references of scientific papers published in journals of Health Sciences edited in Spain.²⁵

As for the time cutout of the studies, it was found that the years 2011 and 2012 showed the greatest number of studies, seven (15%) for each, involving the palliative care and the elderly person with incurable disease, followed by the years 2005, with six productions (13%); 2007, with five (11%); 2006 and 2013, with four (9%), each year; 2009, with three manuscripts (7%); 2004, with two papers (4%); and the years 2008 and 2014 obtained only one study published annually (2%), each, according to Chart 1. It is worth highlighting that the year 2014 was only surveyed until the month of July.

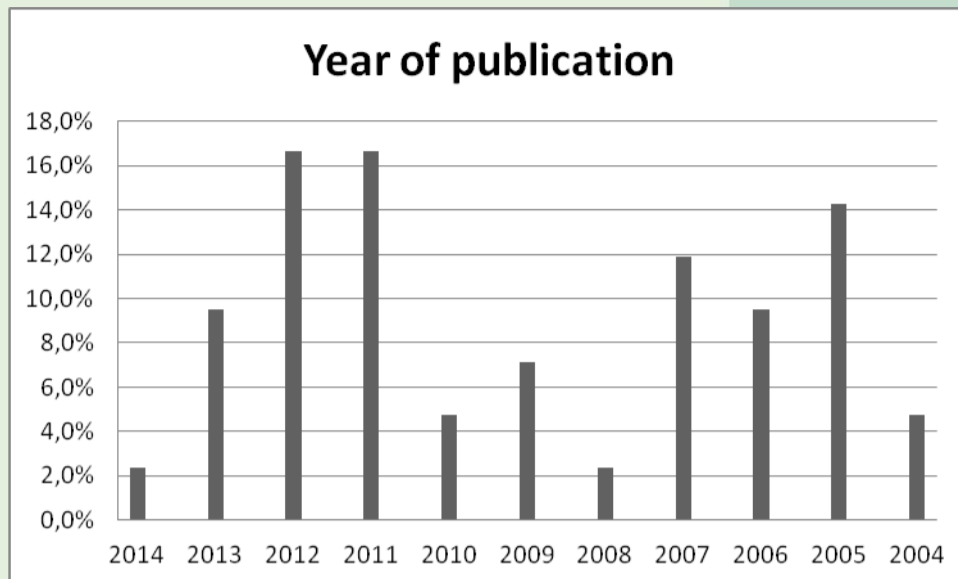


Chart 1 - Distribution of studies on the elderly people undergoing palliative care in line with the year of publication (n = 46).

As for the journals, the Brazilian journals were prevalent, among which the *Kairós* deserves evidence, with three (6,5%) publications, journal published monthly in the pharmaceutical sector for more than 20 years; *Ciência e Saúde Coletiva*, with two (4,2%) papers, journal created in 1996 with the purpose of publishing discussions, debates, presentation of research, besides exposing new ideas and controversies about the area; and the journals *Mundo da Saúde* and *Geriatrics e Gerontologia*, with two publications (4,2%), each. The first, with interdisciplinary nature directed to the focus on the relevant issues of health, especially when related to quality of life, citizenship and ethics, and the second aims at disseminating the scientific production in the Geriatrics and Gerontology field and contributing with the publication in issues related to the human aging.

By considering the international journals in which there was the predominance of studies related to the palliative care and the elderly person, it was found that the journal *Age and Aging* was prevalent, with four (8,6%), and its publications were dedicated to research on aging, clinical and epidemiological research, in addition to psychological aspects of the adult life.

With regard to the *Qualis* of the journals, the results were: A1 - with six (13,1%), A2 - seven (15,3%), B1 - eleven (24%), B2 - six (13,1%), B3 - nine (19,6%) and B4 - five (10,9%). It is worth emphasizing that there were no studies whose journal had a B5 quality assessment. Furthermore, one should highlight that two (4,3%) journals are not classified in *Qualis/Capes*.

The *Qualis* is defined as a list of media that disclose the intellectual production resulting from scientific investigations classified into strata of quality.^{26,27} As such, one should highlight that 24 (52,4%), considered as the majority of the journals used in this research, is classified in the upper stratum - A1, A2 and B1; and 20 (43,3%) of them were located between the intermediary stages - B2, B3 and B4.

With regard to the country of origin of the publication, the highest number of produced studies was concentrated in Brazil, 19 (41,3%); followed by the United States (USA), with 16 (34,8%); United Kingdom, with five (10,9%); Canada and Spain, with two (4,3%) each; and Peru and China, with only one (2,2%) publication, each.

Data relating to the authors

By considering the area of the authors of the research selected for this study, the publications of authors trained in the health area stood out, with a predominance of Medicine professionals, represented by 18 (39,1%). Secondly, there are the nurses, with 16 (34,8 %). Moreover, eight (17,4%) studies produced by a multidisciplinary team were identified, that is to say, they had the participation of, at least, three professionals from different areas of knowledge in the elaboration of the publication, such as: physicians, nurses, nutritionists, physiotherapists, psychologists and theologians, according to Chart 2, below.

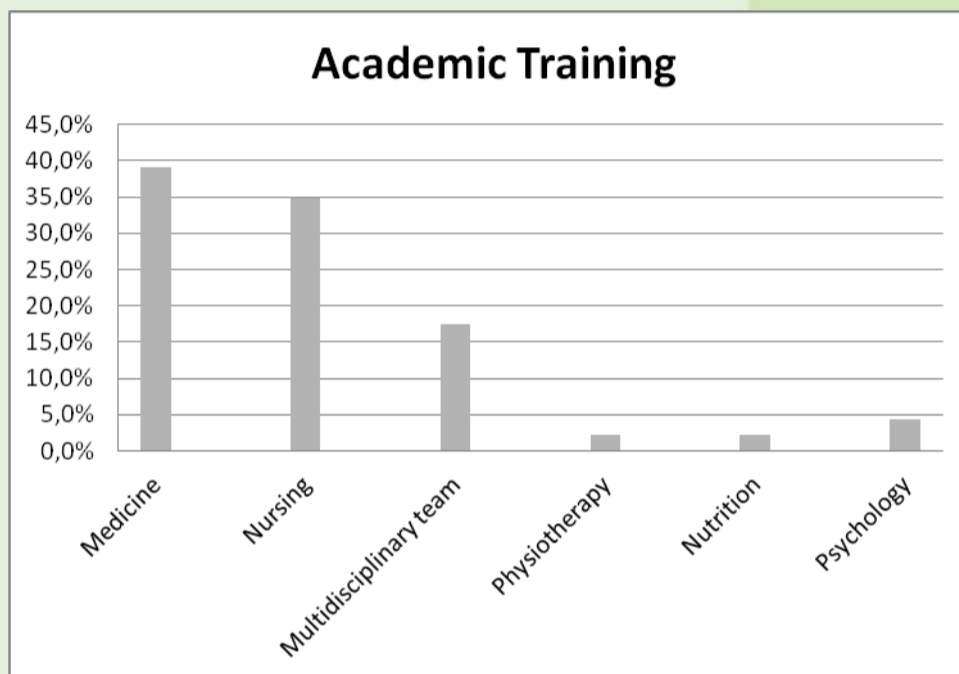


Chart 2 - Distribution of studies on the elderly people undergoing palliative care in line with the training area (n = 46).

This result suggests that the impact of the aging of the population with chronic diseases has expanded the demand of individuals for health services and changed the prospect on the use of these services, which requires efforts of health professionals, mainly physicians and nurses, in relation to the pursuit for knowledge about the problem through scientific studies, as well as the development of research with a view to preventing illnesses, improving the quality of life and reducing the costs related to the hospital admission of this population group.²⁸

As for the results with regard to the titration of the researchers, it was found the distribution of 19 (41,3%) physicians, 13 (28,3%) are PhD, six (13%) specialists and four (8,7%) masters. It was also found that four (8,7%) authors have notified only graduation. The expressive number of researchers with the titration of PhD demonstrates the growth and consolidation of post-graduate programs, whilst emphasizes the increased Brazilian scientific productivity arising from transformations performed in the systems for fostering and classifying post-graduate programs.²⁹

By analyzing the geographic origin of the above mentioned researchers, one should mention that the state of São Paulo concentrates the greatest number of produced studies by contributing with 12 (26,1%) studies disclosed about the investigated issue, followed by the state of Rio de Janeiro, with four (8,7%). It is worth highlighting that Minas Gerais,

Paraíba and Federal District presented only one (2,2%) author originating from their territories, respectively. In the international domain, there was emphasis on students from the United States, with ten authors of papers (21,8%); and from the United Kingdom, with six (10%); followed by Canada, with two (4,3%). One should highlight that the Netherlands, Colombia, Peru, Sweden, Australia, Deutschland, South Korea, New Zealand and Spain showed only one (2,2%) of the researchers, each (Chart 3).

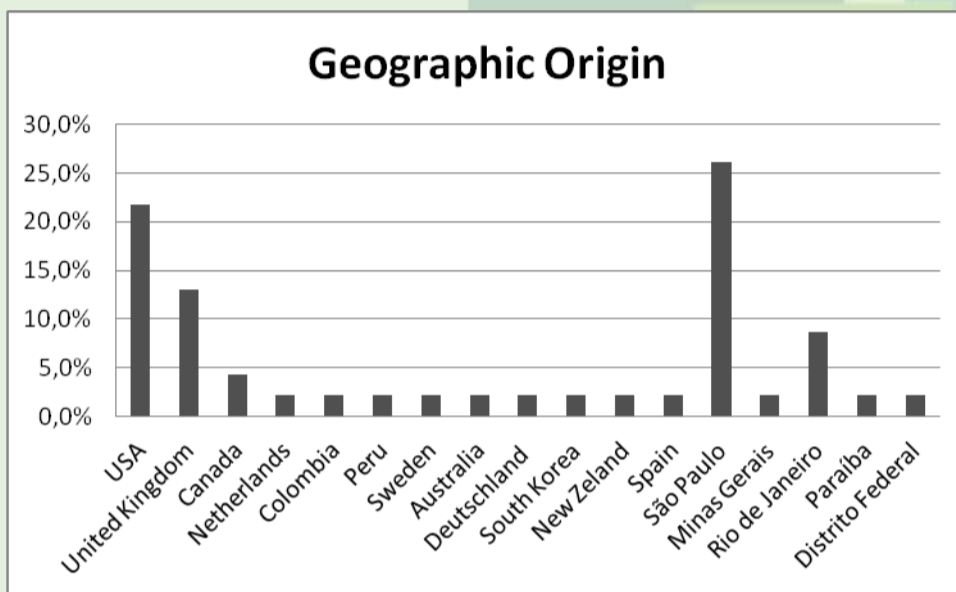


Chart 3 - Distribution of studies on the elderly people undergoing palliative care in line with the geographic origin (n = 46).

It is possible to associate this larger proportion of studies on palliative care directed to the elderly person with incurable disease without possibilities of cure in the dissemination of national studies with the demographic transition that the country is going through and that has resulted in the accelerated aging of the population in different regions, as well as in the increased vulnerability to chronic non-communicable diseases.³⁰

According to the demographic indicator relating to the proportion of elderly people in the Brazilian population, published by the Fiocruz Observatory on Health Iniquities, based on the National Household Sample Survey (PNAD, as per its acronym in Portuguese), the macro-regions with greatest proportion of people aged 60 or over are the Southeast (58,8%) and South regions (55,9%), respectively, which justifies the concentration of research about the issue at stake in the state of São Paulo.³¹

Given this new demographic reality and when considering that the Southeast is the region of Brazil that gathers the highest number of research groups, one should observe a greater dedication of the researchers of these Brazilian territory in the production of knowledge related to the study on the elderly person with incurable disease under palliative care. Accordingly, one should observe that the production of knowledge about the human aging establishes a process recently influenced by the academic population.³¹

Concerning the number of authors per study, one should observe the predominance of publications with two authors (39,1%) of the works; followed by publications with four authors, representing (13%) of the studies; (10,9%) indicated three or six authors, each; research with five authors constitute a total of (8,7%) of the sample; with seven authors or with a single authorship make up a total of (6,5%) of the sample, each. Lastly, it is worth

emphasizing that papers with eight or twelve researchers have covered 2,2% of the surveyed scientific productions.

The results described above show signs that the current trend of the authors, in periodical publications, is to work and publish in co-authorship, especially due to the fact that researchers need to meet the requirements of funding agencies for the development of research projects that require them an increasingly expressive number of publications. This is an effective mechanism from which each author can increase its apparent productivity from the same contributions of the underlying research.³²

Coupled to this reality, the improvement of scientific media has become indispensable, thus incorporating new formats and mechanisms of assessment that made the publishing process more expensive and have required the involvement of two or more authors.

Data relating to the publications

Regarding the data relating to the papers, there was prevalence of studies in English, with 24 (52,2%) works; followed by those written in Portuguese, with 18 (39,1%); and only four works (8,7%) of the sample were in the Spanish language. This data is related to the worldwide steep increase of people aged 65 years or over, which is more prevalent among the developed countries, where they the United States are inserted.

Moreover, one could observe a predominance of papers available in English (originating from the United States), given that, in the above mentioned country, the practice of palliative care is already standardized and that, among the elderly people, the end of life is usually related to a continuous disease, with no response to curative treatments, due to a general failure of all organs, when the elderly person becomes increasingly weakened, which requires a treatment in the sense of relieving symptoms by ensuring, as far as possible, welfare and comfort in line with the philosophy of the practice of palliative care.

As for the focus related to the type of disease that prevailed in the studies, the cancer emerged by representing 90% of the investigated sample. This data emphatically unveils the interest of researchers in producing works on palliative care with a special focus on the elderly person with cancer.

This interest is justified because cancer is considered a public health problem at national and global levels, and of great importance in the Epidemiology field, with regard to incidence and morbidity-mortality. According to data of the National Cancer Institute (INCA, as per its acronym in Portuguese, 2014), cancer is currently considered the second leading cause of death by disease.³³ Furthermore, the above mentioned pathology is a illness in which, from its diagnosis, the patient is already considered eligible to receive palliative care.

It was also found that the majority of the scientific productions is constituted of original papers, 25 (41,4%), with 13 (28,3%) descriptive works, two (4,3%) transverse; and observational-prospective, retrospective, grounded theory, and ethnographic had one publication (2,2%), each. One should highlight that 18 (39%) of the investigations are bibliographic reviews; update studies and opinion papers were found in two (4.3%) scientific

productions, each. It is worth emphasizing that five (10,9%) documents did not mention the type of study.

The expressive number of research papers is due to the fact that, from original studies, it is possible to obtain a new, expressive and structured knowledge about the palliative care for the elderly person through the use of a scientific method that enables the researcher to obtain data and information on the event or phenomena under investigation.

Nevertheless, we should not disregard the importance of bibliographic works that, besides being part of every scientific investigation, allow unveil, collect and analyze information and prior knowledge about a particular matter, thus constituting an important instrument in the continuing education of health professionals, mainly with the dissemination of evidence-based medicine.³⁴

Of the original studies, 19 (9,6%) had the hospital institution as study scenario, eight (17,4%) were performed in households; three (6,5%) were developed in long-stay institutions for elderly people; two (4,3%) in reference centers for elderly people and teaching institutions, each. It is worth emphasizing that only one study, totaling 2,2% of the sample, was conducted in an palliative care outpatient unit (Chart 4).

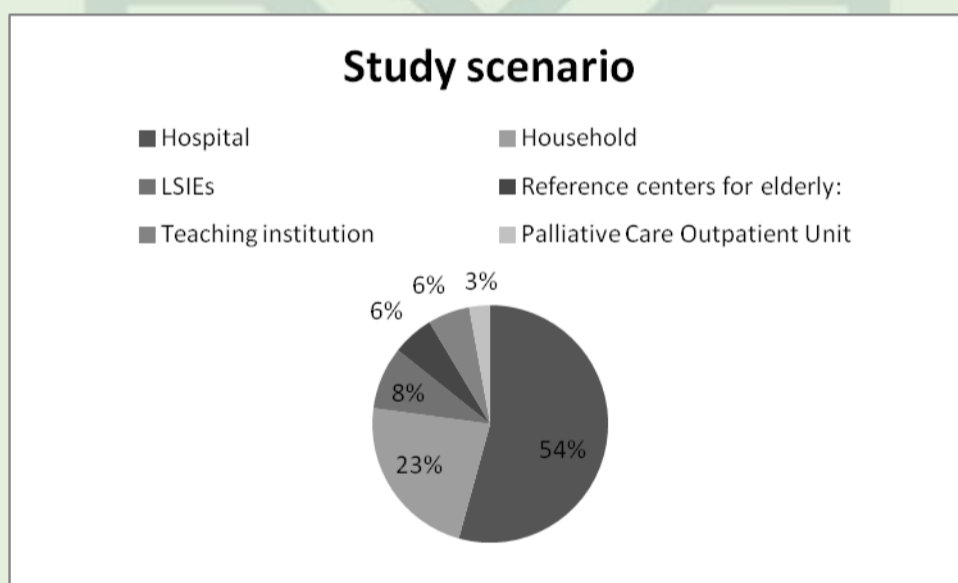


Chart 4 - Distribution of studies on the elderly people undergoing palliative care in line with the place of study (n = 46).

With this data, it is possible to observe that, although palliative care have started to spread in Brazil, since the 1980s, this is a practice still incipient and restricted to some Brazilian regions so that, before a serious condition, there is a trend to hospitalize the elderly person with chronic disease without possibilities of cure in order to make it able to receive the care shares required at the end of life.

This result reiterates the need for inserting palliative care programs in the Brazilian health system for patients with advanced and terminal diseases, with a view to overcoming the curative biomedical model.

As for the approach, qualitative studies deserve to be highlighted, with 30 (65,2%) occurrences, followed by quantitative studies, with 13 (28,3%); and only three (6,5%) of quanti-qualitative nature. The predominant participant group was the one of elderly people, with 31 (67,4%); followed by studies with health professionals, with five (10,7%); with family caregivers and with elderly people and caregivers, simultaneously, three (6,5%)

each. It is worth highlighting that only one study (2,2%) was developed with elderly caretakers.

Concerning the prevalence of the qualitative method among the studies elected for the accomplishment of this research, it is noteworthy to emphasize that this method provides an opportunity to understand the meaning of the human action and, therefore, is appropriate to investigate the reality of the practice of palliative care directed to the elderly person.

By addressing the predominant participant group, it is noteworthy to emphasize that the elderly person is the one who better defines the situation of terminality in which it is inserted, which justifies the predominance of studies that opt to elect the elderly people without possibilities of therapeutic cure as research subjects.

However, from this study, one should observe that other studies involving the caretakers of elderly people affected by an advanced and terminal chronic disease are still a minority, although they have many risk factors for tiredness and stress before the process of finiteness. This reveals the need for expanding scientific works that include the caretaker as a participant of studies, with the purpose of understanding it in its singularity by reinforcing the idea that, in addition to being a partner, it should be a target of care shares.³⁵

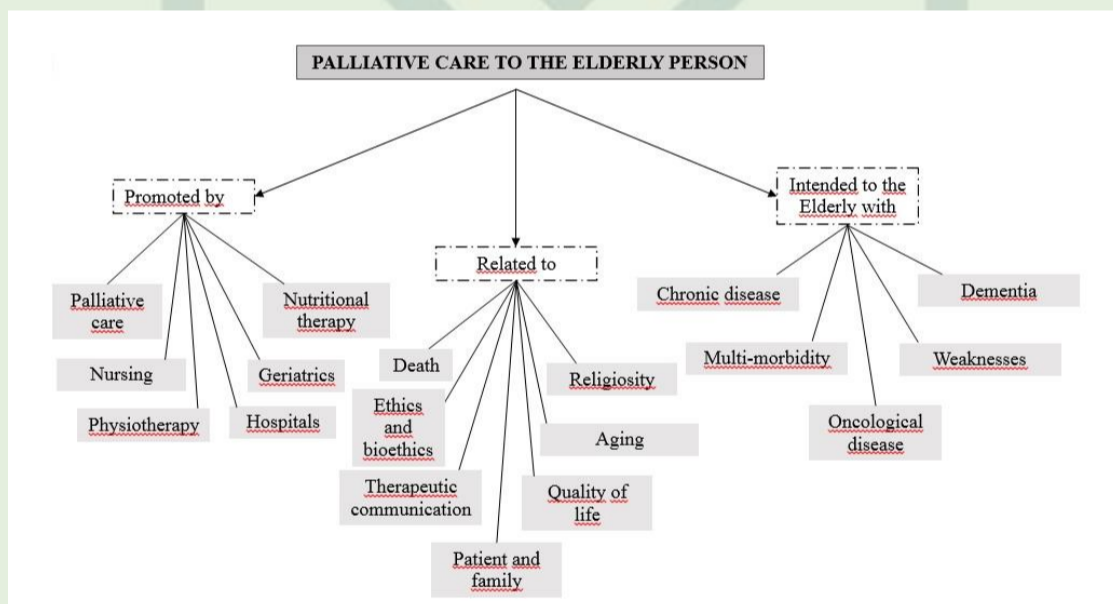


Figure 1 - Conceptual map elaborated from the descriptors of the selected publications and the thematic classes of the studies on the elderly people undergoing palliative care (n = 46).

With regard to the keywords of the selected works, the most prevalent in the publications were: palliative care and elderly. Figure 1 illustrates a conceptual map that shows the relationships among concepts and seeks to reflect about the issue at stake or part of it. With the conceptual map, it was possible to identify three thematic groups of directed words: to promoters of palliation, to factors involved in palliative care and to the elderly person under palliative care and co-morbidities.

The first group of terms highlights the promoters of palliation; similarly, the professions of the health area have been highlighted, among them: Nursing, Nutrition and Physiotherapy, applied to Geriatrics. One can understand its use as a term since the investigations had the focus directed to the health professionals of specific a field of

knowledge by observing their experience in relation to palliative care for the elderly patient with chronic disease without possibilities of cure.

Under this viewpoint, the palliative care is applicable in the initial stage of the disease and includes investigations needed to better understand the complications coming from incurable diseases and manage them. This modality of care aims at relieving the symptoms that undermine the quality of life by integrating medical, nursing, psychological, nutritional, social, spiritual and rehabilitative actions, all working together with the purpose of providing a dignified death to the elderly patient in finiteness of life.³⁷

These care shares start to be regarded as a philosophy, which demands a multidisciplinary approach with specialized health professionals, with the purpose of assisting the patient and its family before the physical, psychological, social and spiritual needs, but integrating them into cultural and religious values, as well as into beliefs.³⁸

Another mentioned descriptor was “hospitals”, where the papers have addressed the need for hospitalization of elderly people with diseases in advanced and terminal stages, as these harms turn the curative premise into palliative care. The hospital admissions of elderly people offer the opportunity to reassess the general condition of the patient, its prognosis, plans and therapeutic objectives, in order to ensure a better quality of life.³

The second group of keywords refers to bioethical issues, death, religion, therapeutic communication, quality of life, elderly patients and family. Such issues meet the principles of palliative care, described as: relieving pain and other symptoms; having spiritual and emotional support; family support; taking time to say goodbye; and passing away when it is time. These principles reaffirm the autonomy of the patient as one of the core aspects in the quest for the excellence in the nursing care to be provided; and are inserted in one of the main foundations of Bioethics, the respect for the person.³⁹

A study⁴⁰ has observed that it is common that elderly people, in the last year of life, suffer from various symptoms. The research also indicates that the majority of the deceased elderly people experienced symptoms as pain, fatigue and dyspnea in the medium or long term. Several symptoms were not identified and treated, such as, for example, depression, urinary incontinence and anxiety, despite have had a relatively high frequency of visits to health services in the last year of life. This undermines the quality of life of elderly people in finiteness of life.

Once the decision to suspend the devices to maintain the lives of elderly patients with fatal illness has been taken, the care provided by the team must be conducted to relieve the suffering and distress of their family members. One should mention that, even in the final stage of a terminal disease, the quality of life can be maintained at satisfactory levels because the palliative therapies are available, and they consist in offering the best possible quality of life to those patients with very advanced diseases, without any possibility of cure or reversion of their health condition, through measures that promote comfort and welfare.⁴¹

The third group of words refers to studies related to palliative care intended for elderly with diseases without prospect of cure, such as dementia, oncological illnesses, besides multi-morbidities that, if they are not treated with necessary preventive measures, may worsen the quality of life. With the intention of promoting appropriate care,

professionals should realize the elderly patient with chronic disease without possibilities of cure in its peculiarities as advocated by the palliative care, given that, through communication, human beings interact and express their feelings and desires.

One should also highlight a study⁴² that considers the use of communication in the final moment of life as a fundamental therapeutic tool for professionals to assist the elderly patients. Furthermore, communication enables us to listen to and try to soothe anxieties and respect opinions of the elderly people and of their relatives, mainly with regard to the therapeutic decisions.

Hence, the importance of communication for the practice of palliative care directed to the elderly person is undeniable. To that end, the multidisciplinary team needs to recognize that it has limitations imposed by terminal disease and understand that each person will react to the situation in a different way, based on its perspectives and beliefs in relation to finiteness, thus requiring support and specific communication to deal with this difficult phase of its life.

CONCLUSION

By analyzing the findings resulting from this study from the use of bibliometric research, it was possible to verify that the publications on the elderly person undergoing palliative care have shown a little expressive amount, taking into account the investigated period.

Nonetheless, one should observe the interest of researchers in disseminating their studies related to the elderly undergoing palliative care, with an emphasis on oncological diseases from papers stemming from original research in journals with nationwide and worldwide circulation.

From the findings of this study, one should consider that the bibliometric research is a method of paramount importance because it has enabled us to evidence pertinent characteristics about the publications of the study, with an emphasis on data related to journals, authors and investigated works. Nevertheless, this research has a limitation, namely: the fact that the majority of studies have been conducted with elderly people with cancer, which hinders the generalization of the investigated data and the comparison of the results with other research that were not conducted within this background.

In light of the foregoing, it is suggested to perform new studies using bibliometric research as investigation method, so that other indicators can emerge in such a way as to stimulate the expansion of knowledge about the practice of palliative care directed to the elderly person.

REFERENCES

1. Veras R. Envelhecimento populacional contemporâneo: demandas, desafios e inovações. *Rev Saúde Pública*. 2009;43(3):548-54.
2. Oliveira-Campos M, Cerqueira MBR, Rodrigues Neto JF. Dinâmica populacional e o perfil de mortalidade no município de Montes Claros. *Ciênc saúde coletiva* 2011; 16(1): 1303-10.
3. Fratezi FR, Gutierrez BAO. Cuidador familiar do idoso em cuidados paliativos: o processo de morrer no domicílio. *Ciênc saúde coletiva* . 2011; 16(7): 3241-8.
4. Visentin A, Lenardt MH. O itinerário terapêutico: história oral de idosos com câncer. *Acta paul enferm*. 2010; 23(4): 486-92.
5. Hermes H, Lamarca ICA. Cuidados paliativos: uma abordagem a partir das categorias profissionais de saúde. *Ciênc saúde coletiva [periódico na Internet]*. 2013 Sep [acesso em 2014 Set 11]; 18(9): 2577-88.
6. Correia FR, Carlo MMRP. Avaliação de qualidade de vida no contexto dos cuidados paliativos: revisão integrativa de literatura. *Rev Lat Am Enfermagem* 2012;20(2):401-10.
7. Nogueira FL, Sakata RK. Sedação Paliativa do Paciente Terminal. *Rev Bras Anestesiol*.2012; 62(4):580-92.
8. Sanches MVP, Nascimento LC, Lima RAG. Crianças e adolescentes com câncer em cuidados paliativos: experiência de familiares. *Rev bras. enferm. [periódico na Internet]*. 2014 Feb [acesso em 2014 Sep 11]; 67(1): 28-35. Disponível em: http://www.scielo.br/scielo.php?pid=S0034-71672014000100028&script=sci_arttext
9. Fernandes MA, Evangelista CB, Platel ICS, Agra G, Lopes MS, Rodrigues FA. Percepção dos enfermeiros sobre o significado dos cuidados paliativos em pacientes com câncer terminal. *Ciênc saúde coletiva [periódico na Internet]*. 2013 Sep [acesso em 2014 Sep 11]; 18(9): 2589-96. Disponível em: http://www.scielo.br/scielo.php?pid=S1413-81232013000900013&script=sci_abstract&tlng=pt
10. Bertachini L, Pessini L. A importância da dimensão espiritual na prática dos cuidados paliativos. *Rev Centro Universitário São Camilo* 2010; 4(3):315-23.
11. Andrade CG, Costa ICP, Costa SFG, Santos KFO, Lopes MEL, Costa KC. Cuidados paliativos e dor: produção científica em periódicos online no âmbito da Saúde. *Rev Temas em Saúde*. 2010; 10(1):18-25.
12. Oleto AF, Lopes COM, Lopes ALM. Análise bibliométrica da produção sobre prazer e sofrimento no trabalho nos encontros da Associação Nacional de Pós-Graduação em Administração (2000-2010) *Psicologia: ciência e profissão*. 2013; 33 (1):60-73.
13. Pinheiro T, Blasco P, Benedetto MA, Levites M, Del Giglio A, Mônaco C. Teaching palliative care in a free clinic: a Brazilian experience [periódico na Internet]. 2012 [acesso em 12 dez 2012]. 19-21. Disponível em: http://cdn.intechopen.com/pdfs/27611/InTech-Teaching_palliative_care_in_a_free_clinic_a_brazilian_experience.pdf.
14. Baggio MA, Alves RM, Lorenzini EA, Céu ABFM, Silva VMM. Produções de teses e dissertações da enfermagem em Portugal de 2000-2010: estudo bibliométrico. *Texto contexto - enferm. [periódico na Internet]*. 2014 Fev [acesso em 2015 Fev 5]; 23 (2):250-60.

15. Reibnitz KS, Prado ML, Lima MM, Kloh D. Pesquisa convergente-assistencial: estudo bibliométrico de dissertações e teses. *Texto contexto - enferm.* [periódico na Internet]. 2012 Sep [acesso em 2014 Sep 15]; 21(3): 702-7.
16. Vanz SAS, Stumpf IRC. Colaboração científica: revisão teórico-conceitual. *Perspectivas em Ciência da Informação.* 2010; 15(2):42.
17. Bireme [Internet]. São Paulo: Centro Latino-Americano e do Caribe de Informação em Ciências da Saúde; 2013 [citado 2014 Jan 07]. MeSH Browser; (cerca de 2 telas). Disponível em: <http://decs.bvs.br/>.
18. Bittencourt GKGD, Schaurich D, Marini M, Crossetti MGO. Aplicação de mapa conceitual para identificação de diagnósticos de enfermagem. *Rev bras enferm.* [periódico na Internet]. 2011 Oct [acesso em 2014 Sep 15]; 64(5): 963-967.
19. Tseng HC, Chou FH, Wang HH, Ko H, Jian S, Weng W. The effectiveness of problem-based learning and concept mapping among Taiwanese registered nursing students. *Nurse Educ Today.* 2011;31(8):41-6.
20. Bona FMC, Lourenço LM, Brum CRS. Violência doméstica: um estudo bibliométrico. *Arq. bras. psicol.* [periódico na Internet]. 2011 [citado em 2014 Set 12]; 63(1): 87-100.
21. Pinheiro RC, Pizani L, Martinez CM, Hayashi MCPI. Produção científica sobre avaliação da visão em crianças: um estudo bibliométrico na base de dados LILACS. *Rev Educ Espec.* 2012; 25(42):143-16.
22. Scielo [Internet]. São Paulo: Scientific Electronic Library Online; 2014 [citado em 2015 Jan 07]. Disponível em: <http://www.scielo.org/php/index.php>.
23. Rego TC. Produtivismo, pesquisa e comunicação científica: entre o veneno e o remédio *Educ Pesqui.* 2014; 40(2):325-36.
24. Cochrane [Internet]. São Paulo: The Cochrane Library; 2014 [citado em 2015 Jan 15]. Disponível em: <http://cochrane.bireme.br/cochrane/main.php?lang=pt&lib=COC>
25. Ibecs [Internet]. Cantabria: Índice Bibliográfico Español de Ciencias de la Salud. 2014 [citado 2015 Jan 15]. Disponível em: <http://www.buc.unican.es/content/ibecs-indice-bibliografico-espanol-de-ciencias-de-la-salud>.
26. Rocha-e-Silva M. O novo Qualis, ou a tragédia anunciada. *Clinics* [periódico na Internet]. 2009 Jan [acesso em 2014 May 14]; 64(1): 1-4. Disponível em: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1807-59322009000100001&lng=en.
27. Sampaio-Jorge F. Respondendo às perguntas... Afinal como funciona o Qualis CAPES? O que é Área 21? Onde está o BrJB nisso tudo? *Brazilian Journal of Biomotricity.* 2010; 4(1):1-2.
28. Perez M. A população idosa e o uso de serviços de saúde. *Rev do Hospital Universitário Pedro Ernesto, UERJ, Rio de Janeiro.* [periódico na Internet]. 2008 [acesso em 2014 May 14]; 7(1):30-37. Disponível em: http://revista.hupe.uerj.br/detalhe_artigo.asp?id=188. 2015.
29. Rodrigues LOC. Publicar mais, ou melhor? O tamanduá olímpico. *Psicol USP.* [periódico na Internet]. 2011 [acesso em 2014 May 14]; 22(2). Disponível em: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0103-65642011000200011&lng=en&nrm=iso.
30. Vasconcelos AMN, Gomes MMF. Transição demográfica: a experiência brasileira. *Epidemiol. Serv. Saúde, Brasília.* [periódico na Internet]. 2012 [acesso em 2014 May 14]; 21(4) dez. . Disponível em: http://scielo.iec.pa.gov.br/scielo.php?script=sci_arttext&pid=S1679-49742012000400003&lng=pt&nrm=iso.

31. Pedroso AA. A pesquisa sobre envelhecimento humano: grupos de pesquisa no estado de São Paulo. *Rev Brasileira de Ciências do Envelhecimento Humano*. [periódico na Internet]. 2013 [acesso em 2014 May 14]; 10(1):92-103, jan./abr. Disponível em: <<http://www.upf.br/seer/index.php/rbceh/article/view/2806/pdf>>.
32. Plume A, Van Weijen D. Publicar ou perecer? O crescimento do autor fracionado... - Publicado originalmente na newsletter Elsevier "Research Trends Issue 38". *SciELO em Perspectiva*. [acesso em 2014 May 14]; Disponível em: <http://blog.scielo.org/blog/2014/10/02/publicar-ou-perecer-o-crescimento-do-autor-fracionado-publicado-originalmente-na-newsletter-elsevier-research-trends-issue-38/>
33. Ministério da Saúde. Instituto Nacional de Câncer. Estimativa 2014: incidência de câncer no Brasil. Rio de Janeiro: INCA; 2014 [acesso 2015 Fev 20]. Disponível em: <http://www.inca.gov.br/estimativa/2014/estimativa20142111.pdf> -
34. Guerra RAT et al. *Cadernos Cb Virtual 2*. João Pessoa (PB): Ed. Universitária; 2011.
35. Peres GM, Lopes AMP. Acompanhamento de pacientes internados e processos de humanização em hospitais gerais. *Psicol hosp*. [periódico na Internet]. 2012 [acesso em 2014 May 14]; 10(1). Disponível em: <http://pepsic.bvsalud.org/scielo.php?script=sci_arttext&pid=S1677-74092012000100003&lng=pt&nrm=iso>.
36. Moreira MA. O mapa conceitual como instrumento de avaliação da aprendizagem. *Educação e Seleção*. 2013; 10: 17-34.
37. Silveira MH, Ciampone MHT, Gutierrez BAO. Percepção da equipe multiprofissional sobre cuidados paliativos. *Rev bras geriatr Gerontol*. 2014;17(1): 7-16.
38. Melo AGC, Caponero R. O futuro em cuidados paliativos. In: Santos FS. *Cuidados paliativos: diretrizes, humanização e alívio de sintomas*. São Paulo: Atheneu; 2011.
39. Araújo MMT, Silva MJP. Estratégias de comunicação utilizadas por profissionais de saúde na atenção às pacientes sob cuidados paliativos. *Rev Esc Enferm USP*. 2012;46(3):626-32.
40. Solano JPC, Scazufca MM. Frequência de sintomas no último ano de vida de idosos de baixa renda em São Paulo: estudo transversal com cuidadores informais. *Rev Bras Epidemiol*. 2011; 14(1): 75-85.
41. Machado FS et al. Qualidade de vida de idosos submetidos à hemodiálise: uma revisão sistemática. *Kairós. Rev da Faculdade de Ciências Humanas e Saúde*. 2014; 17(3):149-63.
42. Terra NL. Cuidados paliativos e envelhecimento humano: aspectos clínicos e bioéticos. *Revista da SORBI*. 2013; 1(1): 12-4.

Received on: 03/08/2014
Required for review: No
Approved on: 11/05/2015
Published on: 01/07/2015

Contact of the corresponding author:
Marcella Costa Souto Duarte
Universidade Federal da Paraíba. João Pessoa, Paraíba, Brasil.
E-mail: marcellasouto@hotmail.com