

## Living with chronic disease, the meaning for the dyad

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### 1 Abstract/Introduction

The chronic non-communicable diseases (NCDs) are those of noninfectious and noncommunicable character presenting themselves in people. (Kim & Oh, 2013) it has been considered that the increase in the population and the life expectancy cause an increase in the number of adults and the older people which are susceptible to suffer from NCDs that leads to incapacitating sequels. (World Health Organization, 2012) Tabaquism and alcoholism, overweight, physical inactivity, the increase in blood pressure and cholesterol are important risk factors that carry to the appearance of these diseases. (Kim & Oh, 2013). The NCDs have increase exponentially in the last few years, the people suffering from them present dependency leading them to require a caregiver, in this relationship cares are given and received which affect the dyad due to the loss of their autonomy.

### 2 Objective

Analyze the meaning perceived by the dyad of care in the experience in the Non-communicable disease.

### 3 Method

Qualitative study, with phenomenological hermeneutic approach, using the theory concerning of Van Manen, (Van Manen, 2014) it start off from the postulate that comprehension and the actions are intersubjective and arise from a particular world shared with others, (Heidegger, 1974) the goal in the phenomenology hermeneutic investigation is the comprehension of the meaning of the participants experience (Heinonen, 2015). The analysis was realized through the proposal of Van Manen. Approved by the ethics committee of the Surcolombiana University.

### 4 Results

Six dyads were interviewed. The following topics emerged: feeling gratitude for the family support, care and care feet in dependence, chronicity, deal with the roughness of disease, sharing care without becoming a burden and spirituality as strength to continue.

### 5 Conclusions

The caregivers are women, housewife's, that fulfill the care labor, with no social recognition, only the personal satisfaction for giving support to the loved one, with no previous training or capacitation, only what they can see and receive from the health institutions where their loved ones had been hospitalized. The dyad lives in a constant way the fact of caring and being cared. The caregiver cares like a mechanism of compensating the benefits receive by the loved onen meanwhile the person cared fights for not becoming a burden, these relationship is constituted in a meaningful experience that reconstruct the life of both.



The especial bond of care theory purposed for Chaparro (2011) is important for understand the relation in the dyads and propose interventions of nurse oriented to the needs of the binomial. This study shows interesting aspects for the understanding of the experience of dyad with the chronic non-communicable diseases

## 6 Study Limitations

Its limitation is related to the difficulty to generalize its results, although they may shed light on aspects that can be configured as similar in the dyad in the chronic non-communicable diseases.

**Descriptors:** Family, caregivers, Chronic Disease, hermeneutics, qualitative research (Bireme DeCS, Mesh)

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