

Capiro Fundación Jiménez Díaz

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SPECIAL ANNIVERSARY ISSUE

73

53

**Instituto de Investigaciones
Clínicas y Médicas**

Clínica de la Concepción

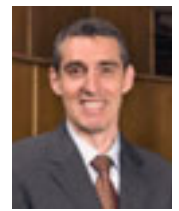


■ 3rd International Meeting on Translational Research and Individualized Medicine

■ 3rd Biomedical Seminar Cycle

■ The Pharmacy Service Undergoes Renovations

■ The FJD Facilities Plan Moves Forward



FROM THE HOSPITAL MANAGER

We continue writing our own history

Many years ago, on February 13th, Dr. Carlos Jiménez Díaz, in one of his conversations with Dr. Jiménez Casado, said, "This is a highly significant, even groundbreaking, day for me and for those around me. This is our day: now we come together—not just in presence but also in our hopes and convictions—celebrating this milestone as we gather our strengths and plan for the future...and look back..."

Celebrating the 73rd and 53rd anniversaries of the FJD brings me great personal satisfaction and pride, for this date marks the end of another 12

months of working together day in and day out with the professionals of this institution. Their reward can be seen in the fine results posted in the 2007 FJD Annual Report.

Here, we see the extent to which we have made good on our commitment to health care: our volume, quality of care, and wait-time numbers are all remarkable. Results like these allow us to guarantee health care to all the citizens assigned to our center as well as those within our area of influence.

February 13th symbolizes a renewed sense of hope that comes around once a year, driving us to succeed. Because we

stand on such solid ground, together we can write our own history.

This future that remains to be written is one of commitment to the Madrid Health Service to reach the goals set for us. In this future, we will work hard to make each day better for all our patients. Our future also includes a continued partnership with the Universidad Autónoma to train excellent professionals in medicine and nursing. In times to come, research will remain a fundamental pillar for progress and development.

Now we must continue looking forward with hope and optimism in our

project, for each day it becomes more and more solid thanks to our new facilities and to all of us who work here.

In closing, on behalf of the Fundación management, I would like to thank all the different groups who make up our community for your effort. Together, we will continue writing our own history.



Juan Antonio Álvaro de la Parra
FJD Manager

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SPECIAL ANNIVERSARY ISSUE

The FJD celebrates its 73rd Anniversary



Left: The FJD's Managing Director during his speech. Right: Dr. Pedro Almeida Vergara, the Assistant Head of the Cardiology Service, who spoke on behalf of those receiving honor certificates.

On February 13th, the Fundación Jiménez Díaz celebrated its 73rd anniversary. The event got under way with a religious service in the chapel. Participants then went to the main lecture hall for a clinical-pathological conference entitled "56-Year-Old Woman with Low-Grade Fever and Pain in Right Lumbar Fossa of Ten Days' Duration" and which was presented by Dr. Emma Raquel Alegre Montaner (Nephrology Service) and Dr. Carlos Santonja Garriga.

Following the conference, a great many of the institution's professionals gathered in the main lecture hall for the most emotionally meaningful part of the celebration, the awarding of the Certificates of Honor given to FJD personnel who this year have completed twenty-five years of work with the organization. Jorge Tapia,

the delegate from the Autonomous Community of Madrid for the Fundación, presided over the ceremony.

During his speech, the Managing Director of the center, Juan Antonio Álvarez de la Parra, expressed his gratitude to all the center's professionals for yet another successful year, and encouraged them to continue building the institution's future. Mr. Álvaro gave a brief overview of the hospital's work in 2007 in the three areas of care, teaching, and investiga-

tion, drawing special attention to the FJD's fulfillment of its commitments to the public health system.

Next, Dr. Pedro Almeida Vergara, the Assistant Head of the Cardiology Service, spoke on behalf of the recipients of the Certificates of Honor, thanking the Fundación for its gesture.

Following this, the Deputy Councillor of Health for the Autonomous Community of Madrid, Ms. Belén Prado, alongside the Deputy Director-General of

Research Assessment and Development at the Instituto de Salud Carlos III, Joaquín Arenas, handed out the fourth FJD Clinical and Biomedical Research Awards (information on p. 5).

Professor Julio R. Villanueva, the President of the Fundación Jiménez Díaz Governing Council, had words of recognition and encouragement for the institution's professionals.

The proceedings in the main lecture hall came to a close with a speech by Ms. Prado on the solid relationship between the public health system and our organization.

That evening, a gala dinner was held in the Casino on Calle de Alcalá. This provided the icing on the cake for the 73rd-anniversary celebration of the Instituto de Investigación Clínicas y Médicas as well as the 53rd anniversary of the Clínica de la Concepción.



Dr. Pérez Zorrilla, Assistant Head of the Rehabilitation Service, was one of the professionals recognized for twenty-five years of dedication.

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GALA DINNER.— In keeping with tradition, the anniversary celebration was drawn to a close with the gala dinner held in the Casino on Calle Alcalá. Presiding over the event was the Deputy Councillor of Health of the Autonomous Community of Madrid, Belén Prado, who addressed those in attendance (see photo, right).

Certificates of Honor Awarded

This year 34 FJD employees received Certificates of Honor in recognition of their having been a part of the hospital team for 25 years. The recipients were the following:

Pedro Almeida Vergara, Pablo Andrés Yañez, Luís Arroba Martín, Saturio R. Balandín Díaz, Julia Barragán Polo, Clemencio Barreira Brasero, Silvia Caballero Sánchez, Carlos Castilla Reparaz, Benjamín Coronado Pascual, Clemente Fernández García, José F. Franco Ramírez, Eugenio

Franco Cabeza, M^a Carmen Gely Torio, José Luís Gil Pérez, José Gil Sánchez, José Luís González Arias, Ángela González Hernández, Nicolás González Mangado, Alberto González Pérez, Miguel A. Manzano Robles, Concepción Martín Acebes, Araceli Martín Rodríguez, Juan A. Martínez Murillo, Manuel Molinero García, Begoña Movilla López, Dolores Muñoz Batista, Rafael Pérez González, Gloria Pérez Tejerizo, Eloisa Pérez Zorrilla, Francisco Ramos Sánchez, Yolanda Salcedo Gutiérrez,

Martín Sánchez Merino, José Emilio Tellez Mellado, Heliodoro Sánchez Núñez, José Torres Torijano, José Ramón Soria Serrano, Torvisco Pascual.



SPECIAL ANNIVERSARY ISSUE

4th FJD Doctoral Thesis Awards

The awarding committee of the 4th FJD Doctoral Thesis Awards unanimously gave the distinction to the following professionals:

• **Outstanding thesis in experimental medicine:** Esther López Cernada

Thesis directors: Dr. Carlos Lahoz Navarro and Dr. Victoria del Pozo

Cash prize of 1,800 euros

• **Outstanding thesis in clinical medicine:** Santos Castañeda Sanz

Thesis directors: Dr. Gabriel Herrero-Beaumont

and Dr. Emilio Calvo

Cash prize of 1,800 euros

The committee noted the remarkable quality of the projects presented, and expressed its gratitude for the high level of impartiality with which the awards were given out. This year 9 dissertations were received in total: 6 in experimental biomedicine and 3 in clinical biomedicine.

Belén Prado (Deputy Councillor of Health) and Joaquín Arenas (Deputy Director-General of Research Assessment and De-



Ms. Prado and Mr. Arenas, presiding over the awards ceremony.

velopment at the Instituto de Salud Carlos III) led the proceedings. Non-winning

theses were also recognized with a certificate of participation.

IN BRIEF

7 FJD RESIDENTS RECEIVE AWARDS FROM THE MADRID MEDICAL ASSOCIATION

Seven Residents training in the FJD took home awards for best publication in the "Residentes Madrid 2007" awards program. Prizes are given out as a part of the initiation ceremony held by the Medical Association of Madrid. Residents receiving prizes were: Diana Maritza Avila, Leticia Lopez Martin, José Luis Gracia Martí-

nez, Javier Higuera Nafria, José Alberto Torres Hernández, Noelia Cubero de Frutos, and María José Romero Valle.

AGREEMENT REACHED BETWEEN RTVE AND THE FJD

The FJD and the medical-benefits arm of the Spanish state media organization, Radiotelevisión Española, recently came to an agreement under which 15,000 insured RTVE employees will be able to access all of the FJD's services. Included un-

der the plan are all medical, surgical, and diagnostic services we offer.

2007 FJD ANNUAL REPORT

The FJD Annual Report was presented during the center's anniversary celebration. Contained in the document is a summary of care-related, educational, and research activity carried out in 2007. When examining the report, readers will

find the center's care-related activity to be especially outstanding: 24,972 discharges; a total of 300,718 consultations; 91,329 emergency cases; and an average hospital stay of 6.19 days.

THE FJD WEB SITE WAS VIEWED 315,435 TIMES IN 2007

During all of 2007, the FJD Web site was visited 315,435 times, resulting in 451,009 pages viewed. This is three times the number for 2006, when the site received 103,841 visits.



2nd Marathon of Interdisciplinary Clinical Case



The 2nd Marathon of Interdisciplinary Orthodontics Clinical Case Studies was recently held in the main lecture hall. The event was organized by Dr. Margarita Varela, the Head of the Orthodontics Unit and also the Director of the FJD Graduate Program in Orthodontics. The marathon, which lasted for 12 hours, provided the setting for presentations on 30 interdisciplinary clinical case studies. There, expert orthodontists and other professionals in both the field of orthodontics and other disciplines (e.g., prosthodontics, periodontics, oral and maxillofacial surgeons, etc.) had the opportunity to take in and discuss a wide range of topics in their fields.

FJD PROFESSIONALS

RECENT APPOINTMENTS

■ **DRA. CARMEN AYUSO,** MEMBER OF THE **BIOETHICS COMMITTEE**

The Spanish Council of Ministers recently approved a new 12-member Bioethics Committee. Among those on the committee is Dr. Carmen Ayuso, Assistant Chief of the Genetics Service and Deputy Director of Research at the Fundación Jiménez Díaz.

Dr. Ayuso earned her medical degree from the Universidad Autónoma de Madrid. Her primary lines of research focus on prenatal diagnosis and hereditary ocular diseases, rare genetic diseases, and genetic counselling. Her work is applied in the three different realms of the FJD's work: care, research, and teaching.

NEW ADDITIONS

■ **DR. ROJO, ANATOMICAL** **PATHOLOGY SERVICE**

Dr. Rojo studied to be a pathologist at the Hospital Vall d'Hebron in Barcelona, later rounding out his training in proteomic techniques at MD Anderson Center in Houston (U.S.A.). From 1999 to 2006, he performed research in the Oncology and Pathology Program at the Hospital Vall d'Hebron. Later, Dr. Rojo went on to the Hospital del Mar-IMIM, also in Barcelona, where he headed the Biomarkers Laboratory, part

of the Unit for Experimental Cancer Therapy.

RETIRING

■ **DR. CAJIGAL, "THE** **DOCTOR WHO FEARED** **NOTHING"**

"If one thing makes us afraid it is seeing fear on the face of whomever is beside us...and this fear deepens if the person we are going to visit is ill, has been operated on, or is about to." In all the years I have been working in this hospital, I have never been afraid while with Dr. Cajigal. And now that he has moved on, I would like to offer this tribute of gratitude and affection.

I will not only remember him as a magnificent surgeon, a highly demanding specialist, or a professional beyond reproach; he will remain with me for other reasons also. While with us, he was affable, easy-going, unique, and a highly human individual... He was adored by patients and family alike. We would always marvel at how, each day, people would light up when he paid them a visit.

Dr. Cajigal knew how to be there for people going through pain. With a few precise words, his characteristic calm and a self-assurance that belied his own shyness, he made others' pain his own, reducing its intensity. The way he looked at people came from the heart and took people in. Forever

respectful and approachable with nurses, he trusted people and merited their trust. He brought the best out of those he worked with, building quality teams and instilling in others a spirit of teamwork (something quite rare nowadays).

Dr. Cajigal made the most complex issues simple, and the most difficult things easy. It was a pleasure to work beside him. And if all this were not enough, he was a constant presence for my family, helping us whenever he could, seemingly without effort though always to our great benefit.

It is hard to say goodbye to such a person and professional as is Dr. Cajigal. I would rather leave it at "farewell." This hospital won't be the same without you. Your human and professional qualities cast a long shadow are difficult to match. No doubt many of us will miss them.

Many thanks, Dr. Cajigal, and farewell...

Mayte Medina de Toro

IN MEMORIAM

■ **DR. CARLOS CAMELO**

We are grieved at the passing of Dr. Carlos Camelo, who for many years was an exemplary member of our team. A man committed to his colleagues, he was cherished by all.

We all remember him affectionately.



Plan of Action for FJD Professionals in Handling Instances of Verbal or Physical Attack

The Occupational Health and Hazard Prevention Service, in partnership with the Improvement Committee and the Quality Unit, has created internal procedure guidelines for handling workplace attacks within the FJD.

Violent attacks suffered by health professionals at the hands of patients of the health system and those who accompany them are on the rise. This situation has become cause for worry by the different organizations and agents involved. In response to this, Capiro Sanidad has proposed a prevention plan.

Once we reach an agreement on this procedure, we would like for it to be made known to all. This is why we wish to remind you that it is readily available both on the Intranet page entitled "Workplace Health and Prevention" and also under "Quality."

Safety-Improvement Group

The FJD Renovation Plan: Moving Forward

In recent years, the FJD has worked under a facilities renovation plan aimed at improving quality of care and providing patients with the greatest possible comfort. It has been a difficult period for FJD professionals, with construction and care-giving carried out simultaneously. All efforts possible have been made to minimize inconveniences for patients.

Some of the improvements set forth by the Master Plan are the total renovation of the Inpatient Unit 36, upgrades in the Gynecology and Pharmacy Services, the relocating of the Emergency Room Waiting Area and the Admissions Waiting Area, and the installation and renovation of the Blood Bank. On this page one can see images of some of these renovations.



Blood bank



Emergency Room waiting area



Rehabilitation Service



Unit 36



Gynecology consultation area



Admissions area



Left: The place where intravenous mixtures and cytostatics are prepared. Also, a space for inpatient drug dispensation.

THE NEW SERVICE HAS AN AREA OF 587 m²

New Pharmacy Service

The Fundación Jiménez Díaz Pharmacy Service has a new home. Occupying a space of 587 m² on basement level 1, the service can be accessed by way of the ground floor either by going down the staircase near Radiology or by coming in through the Cristo Rey entrance.

This modern central service showcases some of the latest in technology, thanks to a sizable investment geared toward providing patients with quality health care.

All of the different areas that make up the department have their own space. This is a fundamental move in guaranteeing the fulfillment of our primary mission, which is to further the rational use of medicine within the FJD's area of influence.

Thanks to these new facilities, the service now provides superior patient care and improved functionality

for the professionals that make up the Pharmacy team.

The new Pharmacy Service will strengthen the following lines of activity:

- **Electronic validation of prescriptions:** The Fundación Jiménez Díaz is the first hospital in Madrid to have in place a complete IT system with the capacity to manage electronic medical records and computerized prescriptions. Electronic prescriptions are checked daily by the Pharmacy Service in the effort to fully integrate pharmacists' work with that of care-related professionals.

- **Inpatient drug dispensation:** The Pharmacy Service dispenses necessary medication for all patients and is in charge of re-stocking the medical supply rooms in each of the hospital's units. A unit-dose drug distribution system has been progressively implemented throughout the hospital.

- **Pharmaceutical services for outpatients:** Outpatients actively obtaining drugs receive verbal and written indications for use. The service has its own entrance and a small waiting area, allowing each patient to receive individualized attention.

- **Clinical trials:** The Pharmacy Service participates in clinical research, monitoring drugs used in research initiatives.

- **Drug Information Center:** Offers consultations services on drugs, technical reports supporting the process of selecting medicinal products for the hospital, and other literature regarding the authorization of drugs for compassionate uses.

- **Pharmacovigilance and drug safety:** Working together with the official bodies managing health-care risk management and pharmacovigilance within the Autonomous Community of Madrid.

- **Pharmacotechnology:**

Creation of magistral formulae (non-sterile) and drug repackaging.

Unit for the creation of intravenous mixtures and cytostatic products: Here, a pharmacist supervises pharmaceutical products requiring sterile environments, such as cytostatics, parenteral solutions, collyriums, and other intravenous mixtures.

- **Storeroom:** Directly accessible from the outside.

- **Management:** Calculates needs for pharmaceutical products and carries out their purchase. Drafts management procedures to follow-up on drug consumption.

The FJD Pharmacy Service is a team of outstanding professionals who work day in and day out to offer the finest quality work. The new facilities have brought them a wealth of material resources, so that their dedication and desire to excel all but guarantee success.

Dr. Javier Becares
Chief of the Pharmacy Service

THORACIC SURGEONS AND NURSING PERSONNEL PARTICIPATED TOGETHER IN THE EVENT

The seminar on new developments in chest drainage, a total success



As can be seen in the photo, attendance far surpassed the organizers' expectations.

On November 5th, over one hundred specialists in thoracic surgery and a great many nursing personnel participated in a seminar held in the Fundación Jiménez Díaz on the latest advances in chest drainage. The event owed its success primarily to the personal effort shown by nursing personnel (nurses and nurse's aides), who provided a wealth of information on this complex process whose difficulty is compounded by a lack of current knowledge.

The experience was especially interesting because of both the subject matter and the approach adopted: surgeons and nurses drafted their presentations together. The following professionals took part in the seminar: Jose Luis Bravo Bravo

(chest surgeon), Francisco Hernández Salinero (ICU nurse), Eulalia García Pérez (nurse in the operating theater) and Teresa Castro Cabado (nurse in Inpatient Unit 55).

Arantxa Díaz Testillano, an ICU supervisor, and Olga Martín Velasco, the Inpatient Unit 55 supervisor, were both coordinators and participants.

Dr. José Luis Bravo and Olga Martín, a nursing professional, had these answers for ImPULSO on the seminar and the functioning of the FJD Chest Surgery Unit.

–What was the seminar's objective?

–The seminar was set up to train professionals on chest surgery by educating them on new treatment tools. In recent years,

drainage techniques have been going through a gradual shift. Now, they are simpler and more easily performed.

CHEST SURGERY UNIT
–How does the FJD Chest Surgery Unit function?

–We operate on patients who need treatment because of the pathologies they suffer in the

chest region. There is a direct line of communication between doctors and nurses so as to give patients total care right through the end of their treatment. The new physical space created in the FJD in recent years and the development of new care units made clear the need for more training in chest drainage techniques. Our personnel are more and more committed to this project, which is why we focused primarily on increasing our professionals' knowledge in thoracic physiopathology and the use of drainage procedures.

–How many people work in the unit? What is their daily collaboration like?

A part of Unit 55, the Unit has three medical staff and a number of nurses who make up the care team.

As in the rest of the services, there is constant coordination, which makes individual treatment of patients a reality. The Chest Surgery Unit gives utmost importance to the spreading of information and know-how to all the other services in the hospital. The important thing is not the case load but rather on-demand need for drain procedures that certain cases present. This is why the Unit has so much experience helping other parts of the hospital in treating patients.

MANAGING PATIENTS WHO RECEIVE CHEST DRAINAGE

–Can there be a multidisciplinary vision for handling chest-drainage cases?

–The Chest Surgery Unit is not alone in caring for these patients. Many services need to be involved in these procedures, such as oncology, internal medicine, pneumology, the ER, or the ICU. We came to the conclusion that there existed a common set of problems between the different units in that they needed more information and know-how to apply new techniques.

–What do you think are the latest advances in post-drainage treatment care?

–Drainages are now easier to handle and lead to fewer complications, thus making them a more practical alternative for patients. This increases patient comfort, reduces hospital stays, leads to greater mobility in the post-operative stage, and makes patients more able to lead normal lives starting the day after their operation.

“TO RESEARCH IS TO FEEL DRAWN TO THE UNKNOWN”

Qualitative research and nursing

Nursing, just like any other profession, must enrich itself scientifically so that it may become a useful practice for society.

The discipline of nursing has evolved alongside the events and schools of thought that have been swept in by the tide of history. During the 20th century, the discipline and profession assumed the objective of developing its own body of scientific knowledge upon which it based its methods. Because of this dependence on know-how, research is an essential instrument for creating, validating, and redefining the accepted knowledge within the area. Beginning in the 1960's, nursing researchers became aware of the lack of solid theoretical systems offering valid conceptual links with actual practice. This need gave way to an effort to provide professionals with better training and to integrate research within the discipline. We have come to identify this as the research-based phase in the history of nursing. This stage was ushered in at the same time that many nurses began to have access to high-level training, leading to a collective embrace of the

precepts of the scientific age: “Research is the path toward the acquisition of knowledge.” Research and theory combined make up the basis of nursing science (1).



Nursing research seeks to understand the phenomena that influence the interaction that goes on in the care process, and thus foster practices that are most beneficial for people's lives. Its goal is to create a

body of knowledge on humans' response to real or potential health problems. Because the problems found in health-care research are so complex, they require a diversity of approaches. It is therefore crucial that we learn which is the most appropriate method for making decisions. Nowadays, one of the most intense debates going on in the field of nursing research is focused on the differences and strong points that can be found in quantitative and qualitative research (2).

AVOIDING QUANTIFICATION

Qualitative research differs from quantitative methods in that it is an approach that eschews measurement. Rather than weighing variables, qualitative research collects narratives that can shed light on certain phenomena. Once these are collected, they are studied by using techniques such as participant observations, non-structured interviews, and in-depth interviews. This data can be registered directly by text, transformed into code, or recorded using audio or video, etc. This information is later analyzed for its content.

Qualitative research gives nurses the opportunity to find answers that can explain people's experiences, how these are created, and how human life gains meaning.

Qualitative research was created as an effort to learn things that are inaccessible through other means. In

the 1960's and 1970's, the qualitative method was consolidated and put to greater use in the field of social sciences. As an approach, it came as an alternative to the positivist paradigm of quantitative research, in that social and human sciences grapple with problems and phenomena that cannot be entirely interpreted through quantitative methods. This type of research struggles to attain a personal understanding of the motives and beliefs that are at work behind human actions.

DEFINING CHARACTERISTICS

Bogdan and Taylor (3) offer the following defining characteristics of qualitative research:

- Methodological inductive reasoning
- Researcher as a participant in the field
- A holistic view on cohorts and scenario

Holistic view of stakeholders within a socio-historical context

- Researcher sheds his or her prejudices, preconceived notions, and beliefs
- Recognition and acceptance of multiple epistemological and methodological perspectives
- Recognized humanistic content

• Emphasis on the validity of procedures and findings

• The artistic and handmade nature of qualitative research processes

• The researcher as creator who is called upon to create his or her own models

- Methods that follow the researcher, rather than the researcher as their slave

KEY CONCEPTS

Key concepts in qualitative research

- Complementarity and triangulation: Research techniques that are not exclusive, but rather, complementary

- Theoretical and intentional sampling—the opposite of random sampling—lending importance not to the number of cases studied, but rather the potential that each case holds in helping the researcher develop a theoretical understanding of the area being studied

- Constant feedback: in qualitative research, each stage in the process produces feedback: design, data gathering, analysis, interpretation, and publication. Inductive, rather than deductive, procedures

- Negotiation of significance: data are always subject to interpretation, and they must be contrasted with those that possess established significance

- Criteria for compensating for a lack of reliability (criteria of excellence): credibility (triangulation of data) and transferability

- Weaknesses: rigor and quality of information

We can clearly see a space for qualitative approaches due to the com-

prehensiveness of examining not just the physical, but rather the socio-historical and, even, the spiritual. While the physical realm is potentially controllable, this is not the case with socio-historical and spiritual issues, which, at best, are much more difficult to manage.

If we base our work on the cultural diversity of our patients, then each day we must look for new ways of delivering care. This *modus operandi* is most clearly explained by Madeleine Leninger in her theory on cultural care diversity and universality (1).

A. González Hernández, E. Vélez Vélez
Nursing Research Committee

More information can be found on the Web site containing the Index on qualitative research

BIBLIOGRAPHY

- 1.- Marrier-Toney, A. (1999). *Nursing models and theory* (3rd edition). Madrid: Harcourt Brace, Mosby.
- 2.- Cabrero García, J. and Richart Martínez, M. (1996). The debate: Qualitative vs. quantitative research. *Enfermería clínica*, 6 (5), 212-7.
- 3.- Taylor, S.J. and Bogdan, R. (1990). *Introduction to qualitative research methods*. Buenos Aires: Paidós.



Presenters in the nursing session held on December 13th.

New FJD Nursing Rounds

Another year of Nursing Rounds is under way. For this edition, organizers have come up with another format for the events, providing a theoretical-practical multidisciplinary design. The new structure has been met with widespread approval.

The first session in the cycle, entitled “**New Advances in Chest Drainage,**” was held on November 5th. Some one hundred nurses, nurses’ assistants, orderlies, physicians, and residents were in attendance. Those presenting were: **Francisco Fernández Salinero** (Lung anatomy and physiology); **Eulalia García Pérez** (Surgical care for thoracic patients); **Teresa Castro Cabado** (management of Patients with Postoperative Chest Tube); **Dr. José Luis Bravo** (Where, when, and why of chest drains); and **Francisc Cuxart** (Operation methods of a chest drainage unit).

The session set out to provide an overall vision of chest-drain patient management and use of the system.

The following monthly session on nursing was held on December 13th in the FJD.

Thanks to the organization of **Yolanda López** (Unit 35 supervisor) and **María José Checha** (Unit 33 supervisor), the event marked yet another success in terms of attendance and professional involvement.

Aiding in the event were two physicians from the Plastic Surgery Service, **Dr. Caballero** and **Dr. Cár-camo**. Several nurses from digestive surgery, cardiovascular surgery, vascular surgery, and orthopedics/traumatology also pitched in.

Following a brief presentation, those on hand talked about the **basic principles in VAC therapy and clinical experience with the technique**. The session then looked at managing VAC therapies, studying a series of clinical cases in which the procedure was applied. At the session’s end, participants engaged in a small workshop which clearly explained how to apply the therapy.

RECENT ADVANCES IN CLINICAL PRACTICE AND COMPLEX LINES OF RESEARCH WERE PRESENTED

The 3rd International Meeting Translational Research and Individualized Medicine

The 3rd International Meeting on Translational Research and Individualized Medicine was held on February 21st in the Fundación Jiménez Díaz. Many experts in science and medicine from a range of specialties were on hand for the event. The meeting highlighted advances in clinical care that have come out of complex areas of investigation. These innovations represent a substantial contribution to personalized medicine, which seeks to provide each patient with a custom-made solution to his or her health problems.

Real-life application of new and revolutionary knowledge in clinical practice should be understood as a new form of investigation, called “translational investigation.” This forward-thinking discipline aims to bring scientific discovery from the laboratory to actual practice.

SYMPOSIA AND A LECTURE

The meeting, organized by Dr. Carmen Ayuso and the FJD Research Area, sponsored eight symposia: “Pharmacogenetics and Current Medical Applications,” “Immunotherapy and Cell Therapy: New Approaches to Treating Common Diseases,” “Phenotypes in Psychiatry,” “Current Therapies for Ge-



Opening statements. From left to right: Juan Antonio Álvaro de la Parra, Carmen Ayuso, Flora de Pablo, Cristina Avendaño, and Javier Urzay. Below: Photos taken in the main lecture hall

netic Diseases,” “Non-invasive Prenatal Diagnosis,” “Cardiovascular Risk and Arteriosclerosis,” “Breast Cancer and New Therapies,” and “New Strategies for Diagnosis and Treatment of Obesity.” During the meeting, Dr. Jaume Bertranpetit offered a lecture entitled “Anthropology, Genetics, and Disease.”

Coupling aspects of basic science with clinical investigation, translational research cannot be carried

out exclusively in traditional university departments or in other types of centers without hospital access. The Fundación Jiménez Díaz performs both types at the same time that it provides excellent care.

During the recent meeting, a great number of professionals from a variety of fields got the opportunity to update and share advances in treatment and also trade views on public health problems.

Doctoral Courses

ETHICAL AND LEGAL ASPECTS IN PEDIATRICS – On February 7th and 8th, in the Grande Covián room, the FJD held the doctoral course entitled “Ethical and Legal Aspects in Pediatrics.” Pr. M. Ruiz Moreno and Dr. A. Leal, of the FJD Pediatrics Service, led the proceedings.



The course covered the ethical aspects of pediatric care and pediatric research.

BONE METABOLISM DISEASES: CALCIUM DISORDERS – Organized by the FJD and the Sponsored Professorship in Bone Metabolism Diseases of the U.A.M. Medical School, a doctoral course was held from February 21st-23rd as a part of the 28th Program on Bone Metabolism Disease. This year’s focus was on calcium disorders.

Thanks to the coordination of Pr. Manuel Díaz Curiel, participants in the course tackled



such subjects as: magnesium and phosphorus homeostasis, especially its relationship with calcium; nutrition and calcium; and calcium and arterial hypertension.

ANOTHER EVENT HELD IN THE MAIN LECTURE HALL OF THE FJD

3rd FJD Seminar Cycle on Biomedicine



The 3rd Biomedicine Seminar Cycle will be held from January to June in the FJD main lecture hall.

Put together by Dr. Marina Sánchez of the FJD Research Area, this second presentation in the cycle was given by Pr. Federico Mayor Menéndez, holder of the Distinguished Chair in Biomedicine and a researcher at the Severo Ochoa

Center for Molecular Biology (CSIC/UAM) in Madrid.

Professor Mayor spoke on “Cell signaling: from interactome to the physiopathological implications on cardiovascular condition and tumors.”

CELL SIGNALING

GRK levels/functioning are altered in several noteworthy instances of pathology, such as congestive heart failure, inflammation, or certain types of tumors. This makes them potential targets for diagnosis and/or therapy.

According to Mayor Menéndez, “the group's primary objective is to better understand the complex network of functional interactions (interactome) of the GRK proteins, as well as the physiopathological implications that might exist. What we are after is to comprehend why their expression or activity is changed in pathological circumstances and how these changes participate in the chain reaction or in the development of a series of cardiovascular, inflammatory, or tumor conditions.”

Coming seminars

❖ April 2nd

Javier Díaz Nido, Professor of Molecular Biology at the Severo Ochoa Center for Molecular Biology, CSIC/UAM (Madrid). “Neurodegeneration and gene therapy in Friedreich ataxia”

❖ May 7th

Jesús Egido, Chief of the Nephrology Service. Fundación Jiménez Díaz Madrid. “Identifying new biomarkers for renal and vascular damage.”

❖ June 18th

Joan J. Guinovart, Institute for Research in Biomedicine and the Universidad de Barcelona. “Glycogen synthase: A Trojan horse for neurons.”



■ Controversies in Orthopaedic Surgery

On February 7th and 9th, 2008, the main lecture hall of the Fundación Jiménez Díaz provided the setting for the Conference on Controversies in Orthopaedic Surgery.

The event was led by Dr. L. Álvarez Galovich, Dr. F. Girardi, and Dr. E. Fernández-Paredes, the Chief of the Orthopedics and Traumatology Service.

■ FJD Nurses Receive a Research Grant from the Spanish Society of Nephrological Nursing

The grant, received from the Spanish Society of Nephrological Nursing, was presented during the 32nd Conference of the Spanish Society of Nephrological Nursing, in Cádiz.

The group of nurses receiving the grant are part of the FJD Dialysis Unit. They are as follows: María Dolores López García, Esperanza Vélez Vélez, María Pilar Manrique Gimeno, Pablo González Prados, Juan Carlos Sánchez González, and María del Carmen Olague Iraizoz. Jandry Lorenzo received the grant in recognition of the research initiative entitled “Can the number of autologous arteriovenous fistulas be increased through an exercise program while preserving the peripheral veins?”

PART OF THE PNEUMOLOGY SERVICE

Respiratory Immediate Care Unit

The FJD Pneumology Service has created a Respiratory Immediate Care Unit, or RICU. This service manages patients with acute respiratory failure and acute chronic respiratory failure. Prior to this year, the service had a monitored unit, which was renovated in 2006. With the arrival of specialized personnel and the addition of new non-invasive ventilation, the creation of the RICU became a possibility.

Demand for RICUs is growing both domestically and internationally because of their ability to treat conditions which formerly re-

quired intensive care, though without a need for such a resource-heavy setting. The only other RICU in Madrid is located in the Hospital Gregorio Marañón Emergency Room.

RICUs avoid situations in which patients who are not admitted to the General ICU are forced to receive care for their respiratory conditions in conventional beds. The fundamental technique used in these improved units is non-invasive mechanical ventilation, or NIMV.

TREATMENT

The RICU can handle cases of:

Acute or acute chronic respiratory failure or severe partial or global failure not requiring ICU admission

Difficult weaning from mechanical ventilation and/or tracheotomy decannulation requiring NIMV

Postoperative respiratory failure following cardiothoracic or upper digestive surgery requiring a high-tech respirator

High-risk bronchoscopy with NIMV in patients not suitable for orotraqueal intubation

Congestive heart failure requiring bi-level NIMV when not indicated in the

admission documents for entry into the Coronary Unit

Patients at risk for sleep apnea syndrome needing monitoring and initial adaptation to a respirator

While not exclusive to the unit, the nursing personnel working in the service are mainly permanent employees who have put forth a sizable effort to train themselves in managing these types of patients.

The unit is supported by two technicians who specialize in NIMV who staff the area from 8 a.m. to 10 p.m.

Dr. Germán Peces-Barba

Chief of the RICU

Dr. Sara B. Heili

Associate Physician (RICU)

CHEST SURGERY UNIT

Treatment for hyperhidrosis

Hyperhidrosis, or excessive sweating, is a condition that primarily affects the hands, underarms, and feet. Patients with this problem experience extremely high levels of sweating, especially in times of nervousness or even when engaging in something as simple as a handshake or interview.

Though its origin is unknown, hyperhidrosis is thought to be slightly linked to genetics. On the whole, the condition is

more prevalent in women than in men. Experts believe that the root lies in an excessive of activity in the sympathetic nervous system, which affects sweat glands by making them produce too much moisture in the hands. People with hyperhidrosis often say that their professional and social lives are conditioned or even made more difficult because of their situation.

While conservative measures such as medication, local drying products,

psychotherapy, sedatives, botulinum toxin, etc. have been applied, experience has it that the only highly successful treatment is surgery.

This type of surgery has been performed for over twenty years. The best results have been achieved through the procedure known as endoscopic thoracic sympathectomy. The technique irreversibly dissects the nerve by using either an electrosurgical unit or by clamping the area around the nerve.

The Fundación Jiménez Díaz Chest Surgery Service has many years of clinical experience with these techniques. Over time, Dr. José Luis Bravo Bravo has put together a surgical unit that is specially designed to treat these patients.

In recent years, these surgical techniques have all been based around the process of video-assisted thoracoscopy. Thanks to these advancements, over 99% of the procedures carried out for hyperhidrosis of the hands or underarms are a success.

Dr. José Luis Bravo

Associate Chest Surgery Service



Capio Sanidad Gets a New Web Site

In February, Capio Sanidad launched its new Web site featuring added content, greater functionality, and a brand new design.

In 2007, the site was visited 420,000 times with 1.4 million page views, clearly demonstrating its usefulness as a medium for transmitting and receiving knowledge about the company, its centers, and the work done by the company's professionals.

New look, design, and functionality. The Capio Sanidad Web has added new sections such as: physician- and specialty-searches, more ease of access to content, new locations for areas of interest, multimedia elements (videos and downloadable features), moveable banners, and a subscription service for the Capio Sanidad Newsletter.

Scientific Awards Given Out

This initiative of the Research Committee is one of the ways in which Capio Sanidad recognizes medical achievement, awarding doctors, nurses, and administrative personnel with 2,500 euros each for winning projects.

The prize for care in nursing went to Anna Quirantes and Margarita Rosas of the ENT Service for their work entitled "Child OSAS: A study on

the relationship between clinical polysomnography and its resolution with adenotonsillar surgery."

The award for outstanding prize in the medical field went to Dr. Eduard Esteller Moner of the ENT Service for the submission entitled "Discovering undiagnosed cases of obstructive sleep apnea syndrome."

"A study on the effect of active carbon in irinotecan

and SN-38 on advanced cancer patients" was the project that earned the Research Award. It was presented by Dr. Vicente Valentí, Dr. Beñona Bara, and Dr. Josep Ramon Germà.

Dr. Javier Mate, the Capio Hospital General de Catalunya Managing Director, highlighted the need to make our professionals' working philosophy known to all, since it demonstrates the extent to which these employees constantly go beyond what is asked of them, thus improving the care we provide.

2006 Capio Sanidad Annual Report

The 2006 Capio Sanidad Annual Report is a presentation of the most important information on the company for the year. The first of its kind, the report is di-

vided into six sections corresponding to all the pillars on which the

company rests. Inside, readers can learn of the company's milestones, its activity statistics, care data, and the services offered at our centers.



CAPIO HOSPITAL SUR

Open Session on Combating Pain

The New Medical Check-up Unit in the Capio Clideba Clinic in Badajoz was founded to improve patients' quality of life and lay down the basic pillars necessary for healthy living

while adapting to the physical, professional, and family-related needs of all individuals. The Unit is made up of a multidisciplinary group of professionals under the leadership of Dr. del Águila de los Ríos.

New Medical Check-up Unit



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Partnership between the Volunteer Organization “Desarrollo y Asistencia” and the FJD

On February 28th, an agreement was reached to form a partnership between the non-profit organization “Desarrollo y Asistencia” (Development and Care) and the Fundación Jiménez Díaz.

Those who offer their time help by accompanying patients and their families while in the Emergency Room.

The FJD has a special area designed for these support services on the ground floor next to the room for patients and their families in the ER.

The volunteer service is open from 12 noon to 2 p.m. and then from 6:30 to 9 p.m. Monday to Friday. Each turn will have a staff of two volunteers.

Those interested in the service should call 91 550 48 00 from outside the hospital or by dialing extension 2328 from within the center.

Volunteer coordinators have periodic meetings with leaders from the Patient Help Center and the Emergency Room. Some of the responsibilities of these coordinators is to properly schedule volunteer shifts so as to guarantee total coverage.

The work done by these individuals is very professional and essential to the organization, since their contributions help family members feel informed on what is going on, thus leading to a decrease in the number of complaints related to the availability of information.

III Ciclo SEMINARIOS DE BIOMEDICINA

Enero - Junio 2008



AULA MAGNA 12 h.
Fundación Jiménez Díaz

más información:
www.capiosanidad.es

Sector Investigación



Capio Sanidad
De salud en los mejores marcos

16 de enero

José M. Serratosa

Jefe Asociado del Servicio de Neurología, Fundación Jiménez Díaz, Madrid
"Genética de las epilepsias: una ventana abierta al cerebro"

27 de febrero

Federico Mayor Menéndez

Catedrático de Bioquímica, Centro de Biología Molecular Severo Ochoa, CSICUAM, Madrid
"Señalización celular: del interactoma a las implicaciones fisiopatológicas cardiovasculares y tumorales"

2 de abril

Javier Díaz Nido

Profesor Titular de Biología Molecular, Centro de Biología Molecular Severo Ochoa, CSICUAM, Madrid
"Neurodegeneración y terapia génica en ataxia de Friedreich"

7 de mayo

Jesús Egido

Jefe del Servicio de Nefrología, Fundación Jiménez Díaz, Madrid
"Identificación de nuevos biomarcadores de daño renal y vascular"

18 de junio

Joan J. Guinovart

Institute for Research in Biomedicine y Universidad de Barcelona
"La Glucógeno sintasa: Un caballo de Troya para las neuronas"

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