

SURGERY PATIENS' FEARS, WORRIES, ANXIETY AND HOSPITAL MANAGEMENT: A PRACTICAL APPROACH

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ABSTRACT

Anxiety and worries are not diseases. Under the circumstances, it may natural. For surgery patient, fear, worries, anxiety is obvious but they can create adverse effect on outcome or result of surgery and may create complications during the surgery. To avoid such situations, patient need special care from first instant of his/her visits to hospital.

Hospital management and Doctor must play important role to minimize patient's fears, worries, anxiety. For that patient should observe closely and carefully. This is very difficult in India, where number of patients is very high. Also patients are of various groups. Poor or low income group who can not pay for special treatments or additional facility.

Major problems are discussed. Recommendations and suggestions are communicated. How hospital management can work on this issue for their own benefit? And patient's benefit? Materials : we selected several research paper, newspaper reports, blogs, books, website report government official portal, lectures and talks for reviewing subject. Method, selected articles have been studied and scrutinized.

Key words: Anxiety–hospital management–special treatment–special care–surgery complications.

1 INTRODUCTION

For many people, being hospitalized is one of greater fears and hospitalized for surgery is the greatest fear. An admission to hospital has much greater impact on a person's life. (Some of them have phobia of medical instruments and operation theatre)

For surgical patient, preoperative anxiety continuous increases from word "operation." A strong correlation between preoperative anxiety, worries, fears, concern, depression and socio psychological environment around the patient.

A patient comes to hospital, he/ she has a present image of the hospital as per the reputation of the hospital. Different patient has different expectation from hospital but main is getting cured. High expectation from medical organization is positive indicator and that gives patient, not to worry condition.

Approximately 234 million surgical million surgical procedures are performed each year worldwide. Service quality is important important for any organization, especially in health care system. If it satisfied patients and their relative, According to WOM model they recommend to their friends and relatives and neighbours for hospital.

Research shows that only 8% of the things we worry about are likely to happy in real life. Various factors can influence the anxiety levels during surgery. Surgery under anaesthesia can induce significant anxiety in patients. The effect of gender, length of hospital stay, age, previous surgery economic condition, out station support, education, types of surgery, previous experience of surgery, and family support.

There are two types of anxiety (1) common anxiety and (2) specific anxiety. To find out specific anxiety, A physician must has long communication with patients. For common anxiety, hospital management must have common program.

Excess anxiety causes deleterious effects. May results in higher post operative pain and long hospital stay. The

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strangeness of the hospital environment can act as a potential source of stress.

2 DISCUSSION

In latin “anxietas” encompasses behavioural and cognitive responses to the perception of danger. For patient, surgery is stressful, challenging and may be issue of life or death. The concepts of fear, worry, anxiety and concern are difficult to study due to their imprecise meanings. Even though, three different method (APAIS, State- Trait Anxiety Inventory, Anxiety and Depression scale)

It is expected by the patient that entire procedure and its consequences must be explain by the doctor, not by other medical staff.

In past, Indian doctors were enjoying the highest level of respect in society next to God. Patient has great faith in her/his doctor or it sometimes any unwanted condition a roused then patient accept it as god’s will. There big change in modern-day. In the cases of unwanted results of treatment of doctor, finally doctor’s intention are questioned. Doctors are considered as a traitor corrupt and money minded. This mistrust results in such condition, this is very difficult to reduce or remove patient’s anxiety and fear.

To diagnose level and types of anxiety, listening to patients is the best way, with keeping in mind, the patient’s region, religion, cultural beliefs. That is the best way to advice. In India, there is strong link between shame and anxiety. Patient’s faith and belief are may be in following therapy.

About all, massages,acupuncture, aromatherapy, hypnosis and acupressure are popular among the Indian public. Considering patient’s faith and belief. a physician can talk parallel to his/her trust.

The healthcare services at hospital very from one to another in India. Healthcare is big concern in India, on other-hand variety of groups of patient, hospitals, doctors and other medical services causes complex picture. On a average, hospital should provide good services at reasonable cost. For better services and image building following schematic is suggested.

3 RECOMMEDATIONS

1. Let patient, herself/himself selects the date of surgery and hospital can give a reminder of his/her appointment.
2. Hospital app is useful to connect, not only patients with hospital but their relative, family and friend too.
3. Preoperative multimedia information about the procedure can also low the anxiety immediately before the surgery.
4. Many Indian patients have faith in herbal or natural tonic or medicine. Though it labled “harb” or “Natural’, may not be “hurb” or “Natural”. It may create reaction or adverse effect with prescribed medicine.

Table 1. Major therapies systems are popular in India.

No.	Therapy system	Method	Medicine	Remark
1	Ayurveda (Charak and samhitasuvanjay-chikity [Psychotherapy] Yoga [Physiotherapy])	Meditation and	Sankhapuspi (congolutus- paricaulis) Brahmi (Bacopa- monnieri) more than 20 herbs.	Many people have strong faith in this traditional therapy system. Traditional belief God and Goddess
2	Yunani		Snakhaholi (Evolvulusalsinodideslinn) I badat	So many people have strong faith.
3	Homeopathy	Treating mind with count	Argestumnitricum (for worry personal health) Aconite (Acute anxiety attacks)	Many people following this thera.

5. Hospital can establish a charitable trust to help the poor patient and also get tax benefit and other facility associated with charitable trust.
6. Food quality of the food for patient is very important. Must be monitor by the higher authority of the hospital.
7. Canteen facility for relatives, friend and family of the patient should be enough good and reasonable.
8. For a doctor, do not take selfe with patients or do now allow patients to take selfe with you.
9. While gathering information about your surgery, advice patient do not dive to deep into internet.
10. Allow patient to carry his/her Ipod, mobile phone, that gives more reparation.
11. Many patients love tattoos. If is not disturbing surgery function than allow tattoos. It may “ relax state of mind” for the patient.
12. “Fear of medical errors” is always in Indian patient’s mind. Ensure patient, it won’t be the case.
13. When conflict orrurs between patient and his/her family and friends, give preference to patient’s will.
14. “cleanness of toilets” gives lot of confidence and good impression.
15. Behaviour of orderlies and sanitary attendant must be co-operative and punctual.

Schematic of Hospital management and hospital image

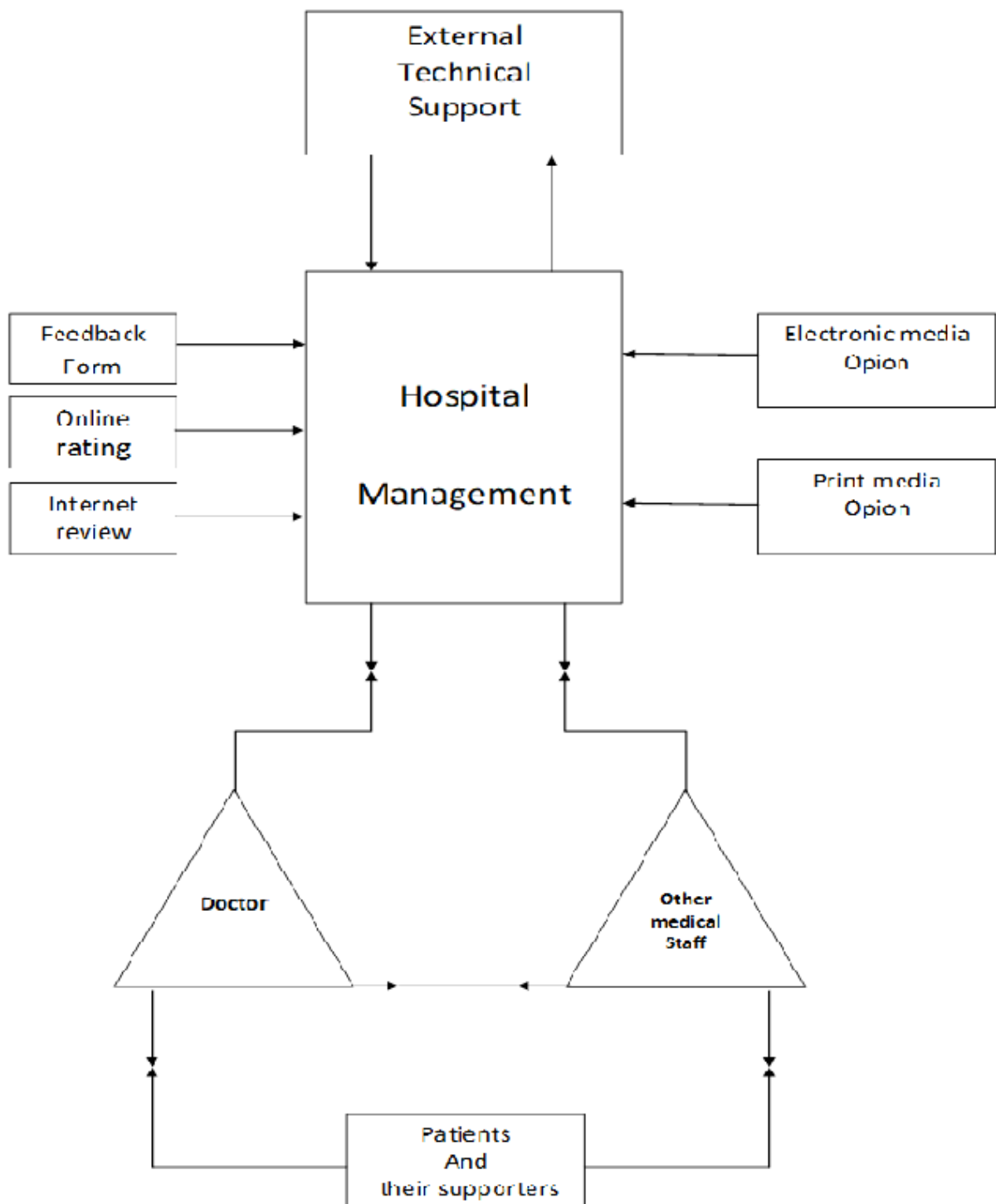


Figure 1.

4 SUGGESTIONS

1. It is quite advisable to admit the patient at least one night before surgery to allow him/her to settle down in hospital environment.
2. For most of the patients, financial worries create the tear about how to pay medical bill will it cost more than what is estimated? How long to remain off work. Cost effective treatment can reduce anxiety.
3. "fear of pain" increases the anxiety. A doctor should explain and minimize anxiety.
4. Patients must inform for individualized preparation before the hospital admission by medical staff politely, "Not to worry state" is important.
5. Main anxiety of patient's is "Lost of control" over life. For hospitalized patient, this is quite obvious. Operating doctor could convince patient, "It will be for few hours than he/she will has more control over life."
6. According several studies, Elderly patient are more anxious. They need special care.
7. Preoperative patients are usually anxious about success of surgery, anaesthesia, drugs and post-operative stay. Explanation and conversation is the best way to minimize the anxiety.
8. Hospital must take feedback form Patient should study and analyse these feedback. It can be discuss at common room meeting.
9. Pharmacy can play important role, by providing quality drugs at reasonable cost and quick supply. Unused drug should take back by pharmacy.
10. Waiting time should keep as short as possible because long period increases anxiety.
11. India is only country where sustained release preparation of Alprazolam is commercially available. A doctor should keep this in mind while treating patients of high anxiety.
12. The job of a doctor is not only to examine, diagnose or to prescribe the drug but to convince the patient. This needs special skill.
13. "Fear of disability" after the surgery may be in patients mind. A physician should clarify and give full confidence to patient "No chance of disability."
14. Separate highly sensitive patient. They badly need special treatments.
15. Behaviour of the patient is another factor which affect hospital services. If anything abnormal, hospital staff must inform a doctor.
16. Any serious illness (like cancer) can impact mental health. Sometime side effects from treatment cause depression in many patients. This need special treatment and counselling from experts.

5 CONCLUSIONS

1. Among those patients, with no previous psychiatric history, admission to hospital is associated with risk of mental disorders leads to adverse effect on treatment, recovery and hospital stay and finally quality of life.
2. The time of anxiety assessment is also important. In India, patient anxiety is often neglected during surgery and it's the effects are dipterous.
3. Preoperative counselling by nursing staff and proper counselling by treating physician or by operating surgeon will help in reducing the preoperative worries and anxieties leads to good outcome and quality care.
4. Development of trust in Doctor and medical team can lower the anxiety.
5. Patient of surgery's feeling is "going under the knife." This should be understand and feel by the doctor.
6. First find, what is causing anxiety? In high anxiety patient. Than take support from appropriate professional.
7. Teach patient, "Allow yourself to help your self." Advise patient, "Distract yourself from any thing about surgery, it is doctors job, not patient's job".

Limitation of the review :

Although this article has provided cream of the valuable information regarding prevalence of preoperative worries, anxiety and fears and associated factors among the surgical patient. There were some limitation arises because of current situation due to COVID-19 pandemic. We cannot access library book, experience doctor's views and patient's interview. [1-17] ‘

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