

Original Research Paper

SURVEY ON PATIENT SATISFACTION AND KNOWLEDGE ON REGIONAL ANAESTHESIA.

Sravanthi GNS

Ravi

Madhusudhana

ABSTRACT

Background: Health care quality assurance was gained importance since the 18th century and patient's satisfaction about the surgery and anaesthesia plays an important role in this. And hence proper assessment of the patient satisfaction for the anaesthesia is essential to alter and deliver the needed service.

Objective: Toevaluate the patient's satisfaction including pre-op visit, intra-op awareness, post-op pain management and impression on anaesthetic team.

Methodology: This was a cross sectional study conducted among 214 patient receiving regional anaesthesia in a tertiary care hospital, Pondicherry.

Results: The overall satisfaction about the information about the anaesthesia was seen among 61.7% of the participants. 67.3% and 89.7% of the study participants had overall satisfaction about the pain and post-operative nausea and vomiting therapy. 72% of the study participants were satisfied with the department and 64.9% would recommend anaesthesia service to others. Conclusion: The satisfaction of the patient plays a pivotal role in the overall quality of health care. The perception of anaesthesia has shown to be poor in studies and hence steps to alleviate such fears should be addressed properly.

KEYWORDS: Awareness; Pain; Regional anaesthesia; Satisfaction.

INTRODUCTION:

Regional anaesthesia has grown popularity as it offers many benefits to the patients. In anaesthetic point of view, respiratory and cardiovascular stability, increased postoperative recovery and protective airway reflexes are the important advantages of regional anaesthesia. Regional anaesthesia is a rapidly growing arena which has revolutionised the way of patient management during the perioperative period.

Literatures have reported varied benefits ascribed to regional anaesthesia when compared to general anaesthesia. Some of the reported benefits were reduced acute postoperative pain, reduced postoperative vomiting and nausea; raised functional outcome and decreased pulmonary complications^{2,3,4}. Additionally, regional anaesthesia had varied other probable advantages over general anaesthesia5which include preserving the airway patency with maintenance of self ventilation which in turn reduce the risk of ventilatory failure⁶; improved postoperative pain management⁷, early normal diet resumption and which in turn reduces the transition time to pre-operative normality and lessening of the stress response to surgery.8

Pascoe defined patient satisfaction as "the patient's reaction consisting of an "emotional response" and "cognitive evaluation" to the care they receive."Tracking of patient satisfaction, and the quality of anaesthesia, can help further improve the benefits of the anaesthesia, and thereby warranting a standardisation level. 10 With this background, the present study was done with an objective to evaluate the patient's satisfaction including pre-op visit, intra-op awareness, post-op pain management and impression on anaesthetic team.

METHODOLOGY:

Study Type And Setting

The study was a cross sectional study conducted among the patients aged above 18 years who is receiving regional anaesthesia for surgery in a tertiary care hospital, Kolar.

Study Duration

The duration of the study was 1 month after the ethical committee approval.

Sample Size Determination

With the prevalence of 84.09% and allowable error of 5%, the

sample size calculated was calculated using the formula $4pq/L^2$. The sample size arrived was 214.

Sampling Method

The Universal sampling method was used to derive the samples.

Study Instrument And Data Collection

A standardized pretested validated semi structured questionnaire was administered as the study instrument. The patients were given a face-to-face interview was conducted before and within a day after surgery.

Statistical Analysis

After checking the completeness of the collected data, it was entered in the Microsoft excel spreadsheet. Data analysis was performed using Statistical Package for Social Sciences (SPSS IBM) 21. The descriptive data were expressed in frequency and percentage.

Ethical Consideration And Confidentiality

All participants were informed regarding the purpose of study, benefits, procedure, and confidentiality of the research study. The study was undertaken after getting informed consent from the participants using the pretested, validated semi structured questionnaire.

RESULTS:

The overall satisfaction about the information about the anaesthesia was seen among 61.7% of the participants and 56.6% had satisfaction of feeling relaxed and reassured during the anaesthesia service. (Table 1)

Table 1: Satisfaction About The Information And Service Of Anaesthesia

S no	Variable	Frequency	Percentage
1	Information		
	Very dissatisfied	0	0
	Dissatisfied	49	22.9
	Slightly dissatisfied	33	15.4
	Slightly Satisfied	44	20.6
	Satisfied	31	14.5
	Very Satisfied	57	26.6
2	Feeling of relaxed and reassured		
	Very dissatisfied	24	11.2

Dissatisfied	32	15
Slightly dissatisfied	37	17.3
Slightly Satisfied	37	17.3
Satisfied	34	15.9
Very Satisfied	50	23.4

The overall satisfaction about intraoperative awareness was seen among 46.8% (Table 2).

Table 2: Intra Operative Awareness

S no	Intra-operative awareness	Frequency	Percentage
1	Very dissatisfied	49	22.9
2	Dissatisfied	29	13.6
3	Slightly Dissatisfied	36	16.8
4	Slightly Satisfied	31	14.5
5	Satisfied	31	14.5
6	Very satisfied	38	17.8

While 53.7% of the study participants had pain, satisfaction about the pain therapy was seen among 67.3% of the study participants. (Table 3)

Table 3: Pain And Pain Therapy

S no	Variable	Frequency	Percentage
1	Pain		
	Yes	115	53.7
	No	99	46.3
2	Pain therapy		
	Very dissatisfied	0	0
	Dissatisfied	5	2.3
	Slightly dissatisfied	65	30.4
	Slightly Satisfied	53	24.8
	Satisfied	37	17.3
	Very Satisfied	54	25.2

43.9% of the study participants had post-operative nausea and vomiting and the satisfaction about the therapy for the same was seen among 89.7% (Table 4)

Table4: Post-operative Nausea And Vomiting And Its Therapy.

S no	Variable	Frequency	Percentage
1	PONV		
	Yes	94	43.9
	No	120	56.1
2	PONV Therapy		
	Very dissatisfied	0	0
	Dissatisfied	9	4.2
	Slightly dissatisfied	13	6.1
	Slightly Satisfied	72	33.6
	Satisfied	64	29.9
	Very Satisfied	56	26.2

Nearly 72% of the study participants were satisfied with the department and 64.9% would recommend anaesthesia service to others. (Table 5)

Table 5: Satisfaction About The Department And Anaesthesia Recommendation To Others

S no	Variable	Frequency	Percentage
1	Department		
	Slightly Satisfied	60	28
	Satisfied	81	37.9
	Very Satisfied	73	34.1
2	Recommendation to others		
	Slightly Satisfied	75	35
	Satisfied	70	32.7
	Very Satisfied	69	32.2

The questionnaire that was used in the survey (Table 6).

Table 6- Survey On Patient Satisfaction And Knowledge On Regional Anaesthesia

Would you like to participate in the study: Yes/NO 0 1 2 3 4 5

1. To what degree were you satisfied with the amount of information given from the anesthetists?

- 2. To what degree were you satisfied with the anesthesia service that you felt relaxed and reassured?
- 3. Intra operative awareness
- 4. Pain during Regional anaesthesia
- 5. Postoperative nausea and/or vomiting : Yes/No
- 6. Satisfaction with nausea/vomiting therapy after surgery
- 7. Satisfaction with pain therapy after surgery.
- 8. Satisfaction with care given by department of anesthesia
- 9. Recommending anesthesia team to others in my family.
 - 0-Very Dissatisfied
 - 1-Dissatisfied
 - 2-Slightly Dissatisfied
 - 3-Slightly Satisfied
 - 4-Satisfied
 - 5-Very satisfied

DISCUSSION:

The balance between the expectation and perception of receive of health care is the patient satisfaction.¹² Hence a dissatisfied patient wont benefit from the health care services available. All the dissatisfaction should be properly looked into. The present study has shown that the overall satisfaction about the information about the anaesthesia was seen among 61.7% of the participants and 56.6% had satisfaction of feeling relaxed and reassured during the anaesthesia service. However, a study done in Saudi Arabia has shown higher satisfaction about the information.¹²

Satisfaction about the awareness was seen among 46.8% of the study participants in the present study. Literature have shown that post-operative pain; nausea and vomiting therapy plays a pivotal role in the patient satisfaction. ^{13,14}In that view, the present study reported that 67.3% and 89.7% of the study participants had overall satisfaction about the pain and post-operative nausea and vomiting therapy. A study done by Alsaif A et al showed that the satisfaction about the pain therapy and post-operative nausea and vomiting was seen among 86.3% and 37.5% of their study participants.

Nearly 72% were satisfied with the department and 64.9% would recommend the service to others, which coincides with a previous study which showed 75.6% of the participants receiving regional anaesthesia were satisfied about the care given by the department and 78% would recommend the same to others. ¹²

The major limitation of the study is that the patient satisfaction with likert scale is highly subjectable and the justification/reasoning for dissatisfaction were not taken into account. Furthermore, the type of surgery can also have an overall influence on the satisfaction level and hence can be taken into account in the future research.

CONCLUSION:

Anaesthesia Quality assurance is of paramount importance for the patient undergoing surgery. Providing Proper information, reassurance by the anaesthetist before the surgery, frequent post-operative visit and alleviation of the post-operative symptoms can pave the way for patient satisfaction.

REFERENCES:

- Asehnoune K, Albaladejo P, Smail N, Heriche C, Sitbon P, Gueneron JP, et al. Information and anesthesia: what does the patient desire?. Ann Fr Anesth Reanim2000; 19: 577-81.
- 2. Andreae MH, Andreae DA. Regional anaesthesia to prevent chronic pain after surgery: a Cochrane systematic review and meta-analysis. Br J Anaesth. 2013;111:711-20.
- 3. De Rojas JO, Syre P, Welch WC. Regional anesthesia versus general anesthesia for surgery on the lumbar spine: a review of the modern literature. Clin Neurol Neurosurg. 2014;119:39-43.
- Weinstein EJ, Levene JL, Cohen MS, Andreae DA, Chao JY, Johnson M, Hall CB, Andreae MH. Local anaesthetics and regional anaesthesia versus conventional analgesia for preventing persistent postoperative pain in adults and children. Cochrane Database Syst Rev. 2018; 4:CD007105
 - Hopkins PM. Does regional anaesthesia improve outcome?. Br J Anaesth.

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- 2015;115:26-33.
- Pöpping DM, Elia N, Marret E, Remy C, Tramer MR. Protective effects of epidural analgesia on pulmonary complications after abdominal and thoracic surgery: a meta-analysis. Arch Surg. 2008; 143:990-9.
- Joshi G, Gandhi K, Shah N, Gadsden J, Corman SL. Peripheral nerve blocks in the management of postoperative pain: challenges and opportunities. J Clin Anesth 2016;35:524-9.
- Xu YJ, Chen WK, Zhu Y, Wang SL, Miao CH. Effect of thoracic epidural anaesthesia on serum vascular endothelial growth factor ${\tt C}$ and cytokines in patients undergoing anaesthesia and surgery for colon cancer. Br J Anaesth.
- Pascoe GC. Patient satisfaction in primary health care: a literature review and
- analysis. Eval Program Plann. 1983;6:185-210.

 10. Hamilton GM, MacMillan Y, Benson P, Memtsoudis S, McCartney CJ. Regional anaesthesia quality indicators for adult patients undergoing non-cardiac surgery: a systematic review. Anaesth. 2021;76:89-99.
- Savant P, Patwardhan K, Patil V. Study To Determine Overall Experience Of Women Undergoing Regional Anaesthesia For Caesarean Section.J. Evol. Med. Dent. Sci. 2018:7:41.
- Alsaif A, Alqahtani S, Alanazi F, Alrashed F, Almutairi A. Patient satisfaction and experience with anesthesia: A multicenter survey in Saudi population. Saudi J. Anaesth. 2018;12:304.
- 13. Jenkins K, Grady D, Wong J, Correa R, Armanious S, Chung F. Post-operative
- recovery: day surgery patients' preferences. Br J Anaesth. 2001;86:272-4.

 14. Gan TJ, Sloan F, de L Dear G, El-Moalem HE, Lubarsky DA. How much are patients willing to pay to avoid postoperative nausea and vomiting? Anesth Analg . 2001;92:393-400.