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Research Article

**ANALYSIS OF EFFICACY OF INTERVENTIONS ON PAIN
AND SATISFACTION LEVEL OF PATIENTS UNDERGOING
ABDOMINAL SURGERY****¹Dr Muhammad AbuBakar, ²Dr Nasir Azam, ³Dr Usman Tahir**

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Abstract:

Introduction: Despite technical advances in pain physiology, pharmacology, surgical techniques and pre-peri and post-surgical care, several studies still report that pain management following surgical procedures is inadequate, and 50-90% of patients still experience moderate to severe pain.

Objectives of the study: The main focus of the study is to find the efficacy of interventions on pain and satisfaction level of patients undergoing abdominal surgery.

Material and methods: This cross-sectional study was conducted at Tehsil Head Quarter Hospital, Sadiqabad, Rahim Yar Khan during October 2018 to December 2018. The study population consisted of patients undergoing abdominal surgery (benign prostate hypertrophy, appendicitis, acute cholecystitis, inguinal hernia, acute abdomen, uterine myoma, ovarian cyst, uterine bleeding, polyp etc.) in the surgical department.

Results: The data was collected from 124 patients with mean age 18 to 40 years. The data was collected from both genders. Of a total of 124 abdominal-surgery patient subjects, 58.1% were male, 94.3% were married, 61.3% had undergone surgery, and 41.1% had undergone total gastrectomy. Among the 124 participants, 47 were included in the control group, 36 in experimental group. Regarding their general characteristics, no significant differences in any aspects were observed.

Conclusion: It is concluded that preoperative nursing intervention for pain has positive effects for patients undergoing abdominal surgery. The intervention used in this study could serve as a guide for patients to improve the pain care of these patients.

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INTRODUCTION:

Despite technical advances in pain physiology, pharmacology, surgical techniques and pre-peri and post-surgical care, several studies still report that pain management following surgical procedures is inadequate, and 50-90% of patients still experience moderate to severe pain. In recent years, an increase in the number of patients with gastrointestinal problems and remarkable technological progress in abdominal surgery have led to an increase in the numbers of patients undergoing abdominal surgery [1].

Post-operative care is the process of providing care to patient after surgery. Post-operative care is necessary to reduce the occurrence of complications like shock, hemorrhage, pneumonia, respiratory depression, deep vein thrombosis, urinary tract infection, pressure sores, incisional hernia, bowel obstruction, infection and to enhance recovery of the surgical wound, and bring back patient to normal level of health and functioning [2]. Post-operative care must be provided to patient for immediate recovery and prognosis of the patient after surgery. Post operative nursing care include ,providing interventions such as continuous observation and monitoring of vital signs, maintenance of personal hygiene , early ambulation ,steam inhalation, care of surgical wound and incentive spirometry [3]. Post-operative care is an essential aspect in post-operative period as it provides opportunities for nurses to care for patients in a comprehensive and holistic manner so as to achieve early recovery of patient health status [4-5].

Theoretical background

Anxiety is an individual experience and it is a concept that is difficult to describe with words. No matter how major or minor an operation is, it tends to raise a certain level of anxiety in every patient. Hospitalization for surgical procedure can be experienced as a threat or stressor and may produce anxiety in patients⁶. Anxiety occurs in the preoperative phase as the patients anticipate an unknown event with potential pain and changes in body image, as well as increased dependency on family and other life changes [7].

Objectives of the study

The main focus of the study is to find the efficacy of interventions on pain and satisfaction level of patients undergoing abdominal surgery.

MATERIAL AND METHODS:

This cross sectional study was conducted at Tehsil Head Quarter Hospital, Sadiqabad, Rahim Yar Khan during October 2018 to December 2018. The study population consisted of patients undergoing abdominal surgery (benign prostate hypertrophy, appendicitis, acute cholecystitis, inguinal hernia, acute abdomen, uterine myoma, ovarian cyst, uterine bleeding, polyp etc.) in the surgical department. The study was performed with 124 patients undergoing abdominal surgery under general anesthesia aged 18-65, with no diagnosis of cancer, no chronic pain, hospitalized for at least 24 hour following the surgical procedure, undergoing elective surgery and agreeing to participate.

Data collection

A questionnaire was prepared for collecting the data of patients. The questionnaire include demographic characteristics, health history and pain-related characteristics of patients.

Ethical Considerations

This study was approved by the ethical committee of hospital.

Statistical analysis

The data obtained were transferred to computer for analysis using SPSS version 15.00 (SPSS, Inc., Chicago, IL, USA) software. A p value <0.05 was considered significant. Numbers, percentages, and mean plus standard deviation were used at analysis.

RESULTS:

The data was collected from 124 patients with mean age 18 to 40 years. The data was collected from both genders. Of a total of 124 abdominal-surgery patient subjects, 58.1% were male, 94.3% were married, 61.3% had undergone surgery, and 41.1% had undergone total gastrectomy. Among the 124 participants, 47 were included in the control group, 36 in experimental group. Regarding their general characteristics, no significant differences in any aspects were observed.

Table 01: Demographics characteristics of Patients

Variables	Classification	CG n (%)	EG n (%)	χ^2 , Fisher's exact, or F	p
Sex	Male	32 (68.1)	16 (44.4)	4.69	.096
	Female	15 (31.9)	20 (55.6)		
Age (yr)		56.55 (12.5)	54.46 (12.5)	1.39	.254
Marital status	Married	44 (93.6)	34 (94.4)		.594 ^a
	Single	3 (6.4)	2 (5.6)		
Religion	Yes	34 (62.3)	30 (69.4)	3.52	.897
	No	13 (27.7)	11 (30.6)		
Past history of operation	Yes	27 (57.4)	22 (61.1)	5.45	.244
	No	20 (42.6)	14 (38.9)		
Type of operation	Total gastrectomy	19 (40.4)	23 (63.9)	4.69	.096
	Subtotal gastrectomy	28 (59.6)	13 (36.1)		

Table 02: Differences in patients Knowledge regarding Pain Management

Variable	Pre	Post		F	p
		2 weeks	4 week		
	<i>M ± SD</i>	<i>M ± SD</i>	<i>M ± SD</i>		
Pain management	31.96 ± 3.62	32.50 ± 3.50	37.93 ± 2.36***	14.46	<.001

*** $p < .001$.

DISCUSSION:

Despite progress in reducing pain, a universal experience, individuals still report experiencing it at various levels. For most patients, admission to hospital for surgery can be very stressful. Studies in this area support that requirements of patients to be informed in the preoperative period are not met, and anxiety can arise from lack of information [7]. In this study, all the patients who did not have adequate information about their disease and operation (51.7% in the study group -before they were instructed- and 45% in the control group) stated that they wished to get information from the healthcare personnel [8]. Emotional and psychological surgical preparation plays an important role in many areas of nursing [9]. The powerful social factors affecting the reactions of women after hysterectomy are indicated as the educational status, income level, cultural structure, age at hysterectomy, short decision period before the operation, little support from the spouse and existence of a mental disorder preoperatively. In our study, no relationship was found between age groups and the level of anxiety ($p > .05$) [10]. While Gunaydin and Oflaz (1998) state that age does not affect the level of anxiety, which is a finding similar to ours, it was found in other studies that anxiety was experienced most profoundly in younger age groups. A significant obstacle to the expression of pain is the

healthcare personnel's disbelieving in patient's report of pain. In that context, this research revealed that nurses believed almost all patients' reports of pain [11].

CONCLUSION:

It is concluded that preoperative nursing intervention for pain has positive effects for patients undergoing abdominal surgery. The intervention used in this study could serve as a guide for patients to improve the pain care of these patients.

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