ATTITUDE OF GENERAL PUBLIC TO RISKS ASSOCIATED WITH ANAESTHESIA

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Abstract

Objective: To identify specific fears being entertained about general anaesthesia.

Methods: People who do work in any medical facility were targeted in this prospective questionnaire-based study. All respondents were literate. The questionnaire was divided into two sections; (a) The baseline information, which included age, sex, marital status, occupation, previous exposure to anaesthesia and patient preference for anaesthesia technique. (b) Fear about risks associated with general anaesthesia; respondents were expected to pick one of four options (very concerned, somewhat concerned, not concerned and not sure), to indicate how they feel about each of the eight risks listed in the questionnaire. The data obtained was analyzed using SSPS version 10 for Windows.

Results: In a bivariate analysis, marital status, occupation and previous exposure to anaesthesia are not associated with the expressed fear by the respondents. Respondents had the highest concern for the fear of death (82%), followed by fear of postoperative pain (75.4%). Least concern was for awareness during anaesthesia (37.7%). The mean age of those who expressed concern about being aware during operation is 37.0± 8.6years while those not concerned is 31.8± 8.5years(p=0.034). More of those who are concerned with nakedness preferred general anaesthesia (p=0.023). Also, more females (95.7%) than males (70.6%) expressed fear about pain during general anaesthesia (p= 0.019).

Conclusion: Fear of death is a great concern for our patients coming for general anaesthesia and it is followed closely by fear of postoperative pain, the later was of greater concern to females. Finally, more of those who were concerned about nakedness preferred general anaesthesia.

Keywords: General anaesthesia, risks

Introduction

Some previous studies have surveyed patient fears concerning general anaesthesia, usually on the preoperative night. We are of the opinion that responses of patients on the night before surgery might not be totally reflective of their true fears; this is because of the general anxiety patients experience around this time. In-line with this thought, is the study by Matthey et al they assessed public opinion on fears associated with risks of general anaesthesia in a non-threatening environment. In Nigeria, the knowledge of an average citizen is still poor with regards to anaesthesia. Personal experience have shown that some actually believe the surgeons are responsible for putting patients to sleep, especially, since most patients come in contact with the anaesthetists in the peri-operative period. We intend to be involved in a public health campaign about anaesthesia as a speciality and especially general anaesthesia, hence the need to identify specific fears people nurse towards general anaesthesia.

Methods

The study targeted members of the public who does not work in any medical facility. A structured questionnaire was administered. All respondents were literate. The questionnaire was divided into two sections; (a) The baseline information, which included age, sex, marital status, occupation, previous exposure to anaesthesia and patient preference for anaesthesia technique. (b) Fear about risks associated with general anaesthesia; respondents were expected to pick one of four options (very concerned, somewhat concerned, not concerned and not sure), to indicate how they feel about each of the eight risks listed in the questionnaire. The data obtained was analyzed using SSPS version 10 for Windows.

Results

There were 36 (59 %) males and 25 (41%) females. Twenty-two (36.1%) were singles while the rest 39 (63.9%) were married. There were 15 (24.6%) students, 17 (27.9%) civil servants, 7 (11.5%) petty traders, 8 (13.1%) corporate workers while 12 (19.7%) were self employed and 1 each were unemployed and retired.

General and regional anaesthesia had been administered to 8(13.1) and 3 (4.9%) of the respondents respectively. Forty-nine had not had any experience of anaesthesia and 1 had experienced both. General and regional anaesthesia was preferred by 26 (42.6%) each of the respondents while 9 (4.8%) prefers none of the two techniques. Table 1 shows the fears and concerns expressed by each the respondents as regards general anaesthesia. Respondents had the highest concern for the fear of death (82%), closely followed by fear of postoperative pain (75.4%). Least concern was for awareness during anaesthesia (37.7%).

In a bivariate analysis, marital status, occupation and previous exposure to anaesthesia are not associated with the expressed fear by the respondents. However, age of the respondents is associated with the expression of fear of being aware during anaesthesia. The mean age of those who expressed concern about being aware during operation is 37.0± 8.6years while those not concerned is 31.8± 8.5years. This is statistically significant (p=0.034).
Concerned

Table 3. Comparison of respondent’s attitude in the present study

Concerns and fears | Very concerned | Somewhat concerned | Not at all concerned | Don’t know |
--- | --- | --- | --- | --- |
Death | 35(57.4) | 15(24.6) | 10(16.4) | 1(1.6) |
Brain damage | 24(39.3) | 18(29.5) | 9(14.8) | 10(16.4) |
Post operative pain | 23(37.7) | 23(37.7) | 11(18) | 4(6.6) |
Nausea and vomiting | 10(16.4) | 15(24.6) | 25(41.0) | 11(18) |
Awareness during anaesthesia | 12(19.7) | 11(18) | 28(45.9) | 10(16.4) |
Nakedness | 15(24.6) | 11(18) | 25(41.0) | 10(16.4) |
Memory loss | 28(45.9) | 14(23) | 9(14.8) | 10(16.4) |
Fear of needles | 15(24.6) | 16(26.2) | 22(36.1) | 8(13.1) |

Table 1: Respondent’s attitude to perceived fears of risk associated with GA

The two groups ‘very concerned’ and ‘somewhat concerned’ were merged as ‘concerned’, and the ‘don’t know’ group excluded.

Concerned

Table 3: Comparison of respondent’s attitude in the present study

The fear of death was associated with the patients preferred mode of anaesthesia as shown in Table 2. More of those who are concerned with nakedness preferred general anaesthesia (p=0.023). Also, more females (95.7%) than males (70.6%) expressed fear about pain during general anaesthesia (p=0.019). Table 3 compares result of present study with that of a similar Canadian study 1. The two groups ‘very concerned’ and ‘somewhat concerned’ were merged as ‘concerned’, and the ‘don’t know’ group excluded.

Table 3. Comparison of respondent’s attitude in the present study with a similar Canadian study.

Table 2: Association between concerns and the preferred mode of anaesthesia

<table>
<thead>
<tr>
<th>Fears/ concerns</th>
<th>General anaesthesia</th>
<th>Regional anaesthesia</th>
<th>Don’t know</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death</td>
<td>23</td>
<td>20</td>
<td>7</td>
<td>0.523</td>
</tr>
<tr>
<td>Brain damage</td>
<td>20</td>
<td>7</td>
<td>5</td>
<td>0.432</td>
</tr>
<tr>
<td>Nausea and vomiting</td>
<td>19</td>
<td>19</td>
<td>8</td>
<td>0.596</td>
</tr>
<tr>
<td>Awareness during anaesthesia</td>
<td>13</td>
<td>7</td>
<td>5</td>
<td>0.150</td>
</tr>
<tr>
<td>Nakedness</td>
<td>13</td>
<td>9</td>
<td>1</td>
<td>0.106</td>
</tr>
<tr>
<td>Memory loss</td>
<td>16</td>
<td>6</td>
<td>4</td>
<td>0.023</td>
</tr>
<tr>
<td>Fear of needles</td>
<td>19</td>
<td>16</td>
<td>4</td>
<td>0.618</td>
</tr>
</tbody>
</table>

The risk of awareness seems to be a major concern among members of the general public. Nearly 40% of the respondents stated that they would have some degree of concern about this. This clearly represents a failure on the part of anaesthetists to adequately educate the public, as large clinical surveys indicate an incidence of explicit awareness of less than 0.3% during general anaesthesia 7,8. One of the revelations of this study is that most of the patients that preferred general anaesthesia expressed concern about revealing their nakedness. The males or females equally expressed this concern. Though, one may be tempted to regard this as unimportant, it could be an indication of lack of respect for patient dignity during peri-operative care.

Discussion

We conducted a randomized study on sixty-one members of the public who are not health workers. We found that fear of death was associated with the greatest concern amongst the respondents, followed in decreasing order by fear of postoperative pain, memory loss, brain damage, needle prick, nudity, nausea and vomiting and lastly, awareness under anaesthesia.

This result of this study is similar to that done by Klafta et al 1, they studied the attitude of the general public towards preoperative assessment and risks associated with general anesthesia. In their study, the fear of death was the greatest concern of respondents (47.5%) when the ‘very concerned’ and ‘somewhat concerned’ groups were merged; this was closely followed by the fear of pain (47.0%). However, we obtained considerably higher values of 82.0% and 75.4% for fear of death and pain respectively in our study. Since, most of our respondents (82%) have not been previously exposed to any form of anaesthetics, they may not be speaking from personal experiences. Though we are not aware of any data in our environment about the incidence of death related to general anaesthesia, anecdotal evidence has shown that with the introduction of modern anaesthetics and monitors, general anaesthesia has remained largely a safe procedure. Unfortunately, this fact has not been well communicated to an average person in our environment. This may be responsible for the greater concern for fear of death in our study. The same might not be said about the fear of pain. Our finding revealed that females expressed greater concern about pain than males; this may not be necessarily related to the assertion that females are weaker. A school of thought have observed this might be because females are more sincere with their feeling than men. However, in a similar study by Shevde et al 5, they reported that more men were concerned about experiencing intraoperative and postoperative pain. Amanor-Boadu et al 6, in their study on postoperative pain documented that pain is inadequately treated in our environment and moderate to severe pain seen in 46 to 87% of postoperative patients before analgesic dose was due.

In view of these reasons, the fear about postoperative pain might be justified. Hence, it is important that anaesthetists take up the challenge to provide effective pain management plan for patients perioperatively. Patients easily complain about pain to relations, this may be to seek attention. This impression about improperly treated pain in a relation may be the responsible for the fear expressed by respondents about postoperative pain.

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Conclusion

We conclude that in our environment, fear of death is a great concern for the patients coming for general anaesthesia and it is followed closely by fear of postoperative pain, which was of greater concern to females.

Finally, we observed that more of those who were concerned about nakedness preferred general anaesthesia. We are of the opinion that this data will be a useful tool for us to undertake an effective public enlightenment about general anaesthesia in our community, and it will also be a useful guide for anaesthetist in our environment during pre-operative assessment.

References


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