

Identification of signs and symptoms of the Nursing Diagnoses Fear and Anxiety in preoperative patients scheduled for gynecological surgeries

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PURPOSE: Patients undergoing surgical procedures involving sex and reproductive organs may present different emotions: conflicting, traumatic, of insecurity, of fear and anxiety, causing meaningful physiological and psychological changes. A study previously validated has identified the “Preoperative anxiety syndrome” in patients undergoing elective surgical interventions, evidencing need of further research to identify the syndrome. The scientific methodology of nursing practice leads nurses to clinical thinking to determine whether the defining characteristics of the diagnoses “Fear” and “Anxiety” are present or not. Nursing preoperative assessment aims to identify problems, elaborate the care plan and minimize perioperative risks, providing individual, documented and holistic care. **OBJECTIVES:** Identify the presence of clinical manifestations of the nursing diagnoses “Fear” and “Anxiety” in the immediate preoperative period of patients undergoing gynecological surgery; verify the presence of signs and symptoms of the “Preoperative anxiety syndrome” in this group of patients. **METHODS:** Cohort, cross-sectional study performed in the Gynecological care unit, in the Sao Paulo Hospital, city of Sao Paulo/Brazil. Fifty patients undergoing elective gynecological surgery in May, 2007 comprised the study sample. Data collection was performed using a research tool, which has been created and validated in a previous study, and contained the defining characteristics of the nursing diagnoses “Fear” and “Anxiety”. The definitions, defining characteristics and related factors of the “Preoperative anxiety syndrome” were added to the data collection tool. **RESULTS:** In the 50 women’s sample, 48 (96,0%) presented the nursing diagnoses “Fear” and “Anxiety”. For both diagnoses, the following related factors were the most evident: anesthesia (93,7%), disease (79,1%), surgery (62,5%), postoperative period (58,3%), hospitalization (35,4%), unfamiliarity with the experience (12,5%) and environment (2,0%). The “Preoperative anxiety syndrome” was identified in 48 (96,0%) women, and presented the following characteristics: apprehension and verbal report of anxiety 95,8%; verbalization and anguish 93,7%; excitement and fidgeting 91,6%; dry mouth 87,5%; nervousness and fear of death 70%. Interview and physical examination were

performed, and contributed to identify the clinical manifestations of both diagnoses under analyses and the presence of the “Preoperative anxiety syndrome”.

CONCLUSION: The research proved the presence of the nursing diagnoses “Fear” and “Anxiety” in patients undergoing gynecological surgeries, evidenced by the diagnoses’ clinical manifestations, which have also collaborated to the identification of the “Preoperative anxiety syndrome”.

Key-words: nursing diagnosis, fear and anxiety, preoperative care, gynecological surgery.

Introduction

Surgery has been an unknown procedure in the individual’s life, and since it is an unexpected event sensations like fear and anxiety can be aroused.

The study by Suriano, Barros, and Michel (2006) which had the clinical validation of the defining characteristics for the nursing diagnoses Fear and Anxiety as one of its aims, showed that 19 characteristics of anxiety and 15 characteristics of fear were validated, including the suggestion of a new characteristic not in NANDA’s list so far for the diagnosis of Fear: Bowel motility, disturbed.

Defining characteristics for Fear and Anxiety validated by Suriano (2006):

FEAR	ANXIETY
Verbalization (identifies the object of fear)	Verbalization (stated concerns)
Aprehension	Aprehension
Nervousness	Nervousness
Stress	Stress
Agitation	Restlessness
	Distress
	Anxiety
	Insomnia
Dry mouth	Dry mouth
Increased pulse	Increased pulse
Increased respiratory rate	Increased respiratory rate
Increased sweat	Increased sweat
Fear of death (reports of)	
Fatigue	Fatigue
Crying	Crying
	Voice tremors (extremities)
	Precordial/abdominal pain
	Urinary urge
Nausea	Nausea
Vômit	Vômit
Disturbed bowel motility*	

In this study it was noticed that either fear and anxiety were more often present in patients who underwent urogynecologic surgeries.

A strong correlation between the defining characteristics for both diagnoses (Anxiety and Fear) was also seen in patients who underwent elective surgeries; therefore, the presence of a syndrome was suggested, called the Perioperative Anxiety Syndrome by the authors.

This syndrome was defined by Suriano, Barros, and Michel (2006) as: “An emotional state, with psychological and physiological components, with feelings of diffuse apprehension, uncertainty, powerlessness, vague and unspecified unpleasant and uncomfortable sensation; feelings of isolation, dissociation and unsafety can also occur.”

And the defining characteristics suggested for this syndrome were as follows: apprehension, nervousness, verbalization, increased stress, agitation, restlessness, dry mouth, fear of death, increased diaphoresis, distress, voice tremors, verbalization of anxiety.

A study previously validated has identified the “Preoperative anxiety syndrome” in patients undergoing elective surgical interventions, evidencing need of further research to identify the syndrome. The scientific methodology of nursing practice leads nurses to clinical thinking to determine whether the defining characteristics of the diagnoses “Fear” and “Anxiety” are present or not. Nursing preoperative assessment aims to identify problems, elaborate the care plan and minimize perioperative risks, providing individual, documented and holistic care.

By facing this context the guiding questions in this study were the following:

- Are the defining characteristics validated in the study by Suriano, Barros, and Michel (2006) found in patients who will undergo gynecological surgeries?
- Are the defining characteristics suggested by these authors for Perioperative Anxiety Syndrome identified in these patients?

Objectives

- Identify the presence of the validated defining characteristics for the nursing diagnoses Fear and Anxiety in patients at the preoperative phase immediately before elective gynecological surgeries.
- Acknowledge the presence of the defining characteristics of the Perioperative Anxiety Syndrome in these patients.

Methods

- Cross-sectional and observational study
- Submitted and Approved by the Ethics Committee
- Setting: Gynecology Unit of a teaching hospital in the city of São Paulo/ Brazil
- Population: 50 female patients who underwent elective gynecological surgeries.
- Inclusion criteria:
 - Patients older than 18 years old;
 - Patients who underwent elective gynecological surgeries;
 - Conscious and oriented patients not under the influence of preanesthetic drugs;

- Patients who spontaneously agreed in taking part in the study after signing an Informed Free Consent Form.

Data Collection: : The defining characteristics validated for both nursing diagnoses and the Syndrome were identified by two nursing students previously trained by Suriano.

Through an informal interview, with questions such as “How are you feeling regarding the surgery?,” besides clinical assessments and vital signs measurements, it was possible to identify the defining characteristics for these diagnoses in these patients..

To identify the validated defining characteristics the students used a tool with the conceptual and operational definitions used in the study by Suriano, Barros, and Michel (2006).

Results

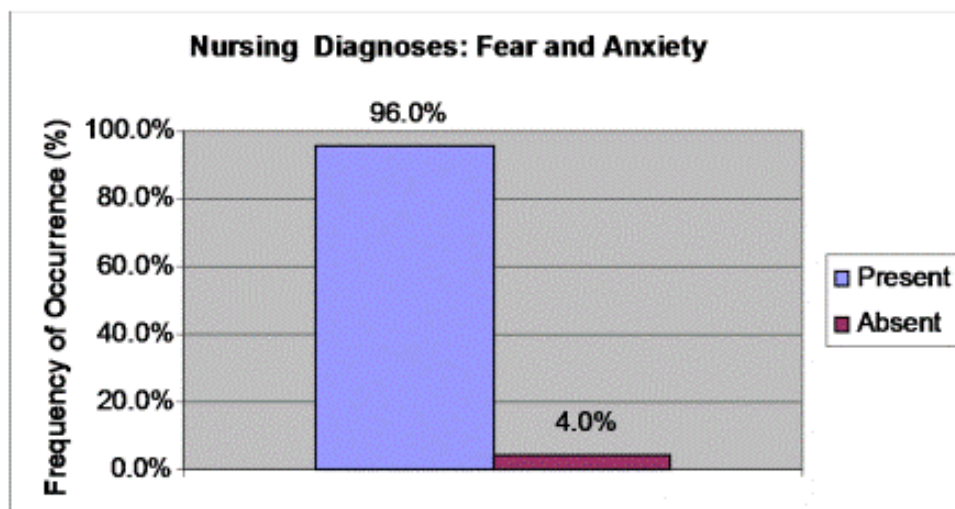
Descriptive analysis

- Race: 84.0% Caucasians, 10.0% black individuals, 6.0% yellow individuals
- Marital status: 52.0 % married women, 18.0 % widows, 16.0 % single, and 14.0 % divorced women.
- Educational level: 66.0% finished Elementary School; 18.0 % had unfinished High School; 14.0 % Undergraduated, and only 2.0% illiterate individuals.
- Religion: 80.0% were Catholic, and 20.0% were either protestants, spiritist and buddhist.
- 65.5% of patients had previous surgeries

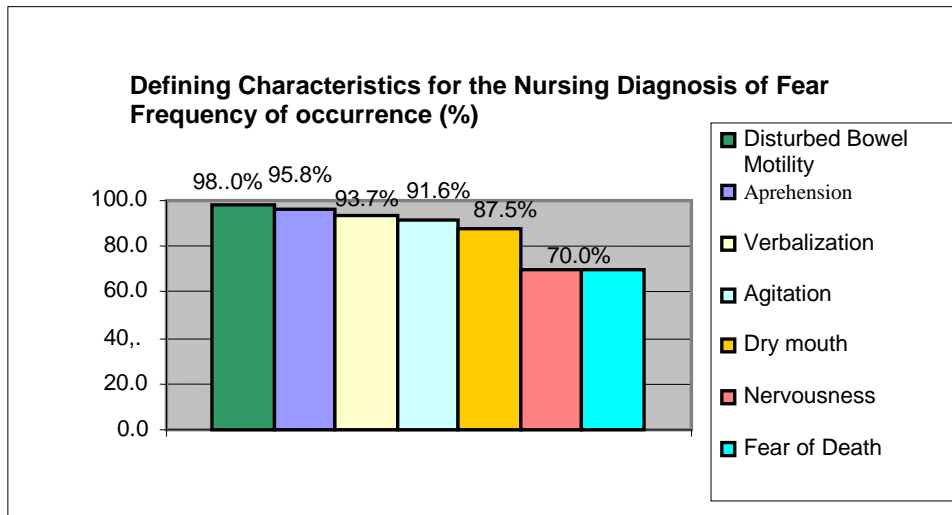
Among the most frequent surgical specialties it follows:

- 25.0% total abdominal hysterectomy,
- 21.0% vaginal hysterectomy,
- 16.7% surgical videolaparoscopy and hysteroscopy,
- 12.5% investigative laparotomy,
- 4.2% surgical cone and salpingooforectomy,

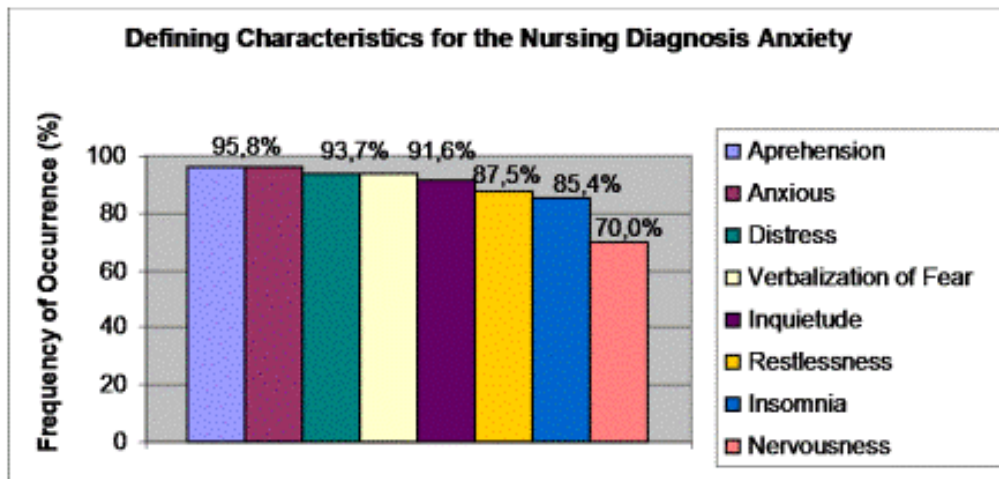
Graphic1 - Presence or absence of the nursing diagnoses Fear and Anxiety in patients in the Gynecology Unit. São Paulo, 2007.



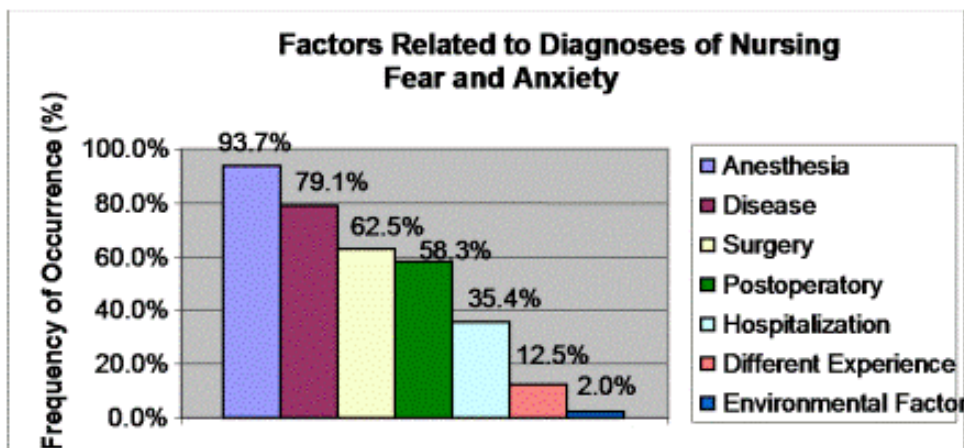
Graphic 2- Frequency of occurrence of the defining characteristics which showed more incidence of the nursing diagnosis of Fear, in the Gynecology Unit. São Paulo, 2007.



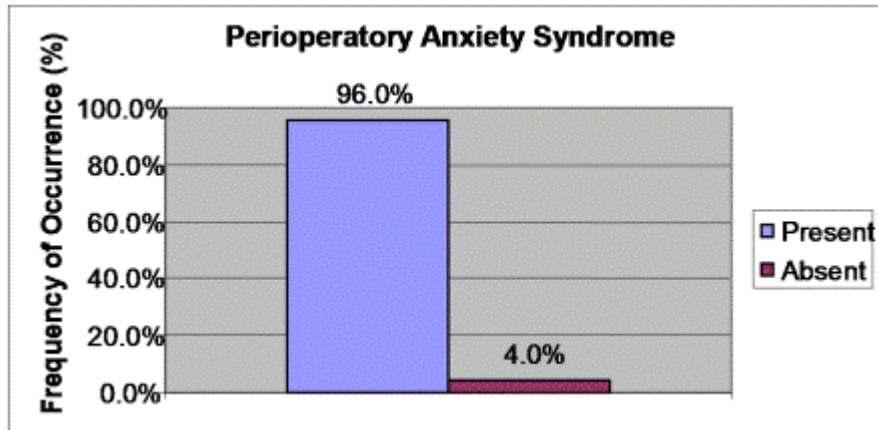
Graphic 3- Frequency of occurrence of the defining characteristics which showed the highest incidence of the nursing diagnosis Anxiety in the Gynecology Unit. . São Paulo, 2007.



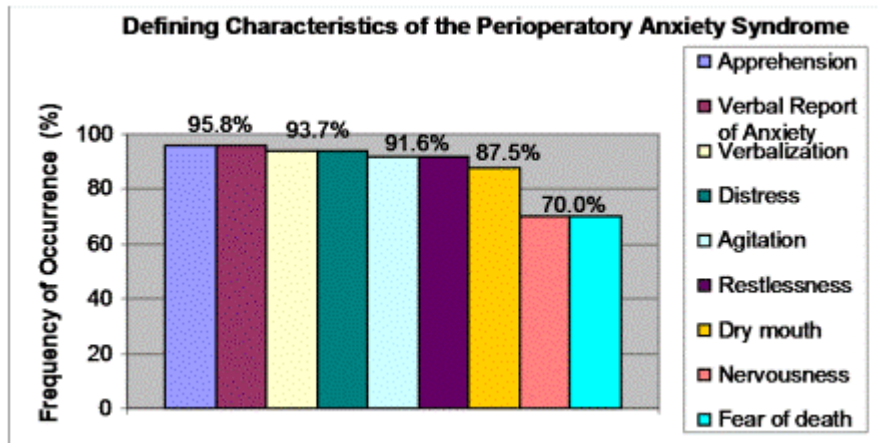
Graphic 4 - Frequency of occurrence of the factors related to nursing diagnoses of Fear and Anxiety, in the Gynecology Unit. São Paulo, 2007.



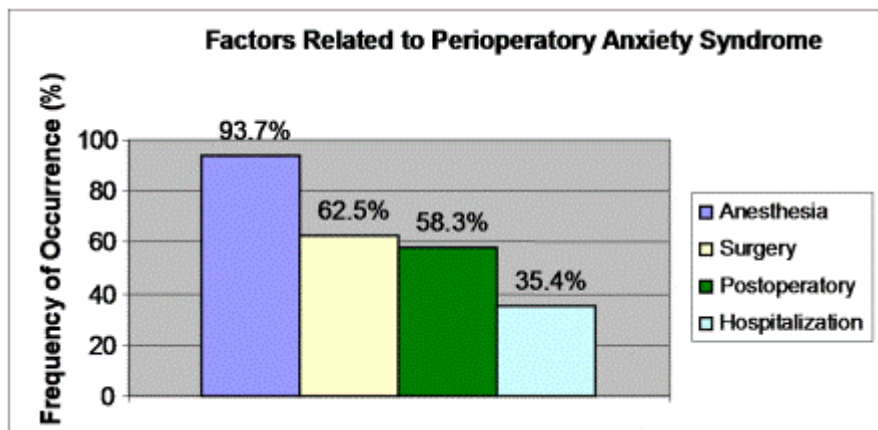
Graphic 5 - Presence or absence of the Perioperative Anxiety Syndrome in patients in the Gynecology Unit. São Paulo, 2007.



Graphic 6 - Frequency of occurrence of the defining characteristics of the Perioperative Anxiety Syndrome, in the Gynecology Unit. São Paulo, 2007.



Graphic 7 - Frequency of occurrence of the factors related to the Perioperative Anxiety Syndrome, in the Gynecology Unit. São Paulo, 2007.



Discussion

It was observed the presence of a high incidence of the diagnoses fear and anxiety for those patients.

The defining characteristics pointed out in this study with the highest incidence were also acknowledged in the study by Suriano, Barros, and Michel (2006).

As to the defining characteristic “disturbed bowel motility,” it was seen a high frequency rate among the interviewed patients (98.0%). This characteristic does not belong to the defining characteristics for the diagnosis Fear from NANDA’s Taxonomy, but it has been referred by some authors as a strong indication to determine this diagnosis (Guyton & Hall, 2006; Brandão, 1991)

It can also be noticed a strong correlation between both diagnoses, which supports the findings in the study by Suriano, Barros, and Michel (2006).

And due to this strong correlation we can suggest once more the presence of a syndrome referred by Suriano (2006) as the Perioperative Anxiety Syndrome.

The presence of a possible anxiety syndrome was also referred by other authors, such as Adams et.al (1997), Whitley (1994), and Campos (1993).

Since this syndrome has been clearly pointed out there is a need of further investigation for its validation regarding its definition, defining characteristics, and related factors.

Conclusions

- The validated defining characteristics for the Nursing Diagnoses of Fear and Anxiety were present in the immediate preoperative of the patients going through elective gynecological surgeries.
- The defining characteristics which are part of the Perioperative Anxiety Syndrome were observed in these patients.

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