Background

- Anxiety, fear and pain are known to weaken and delay patients’ recovery from surgery.

- In a previous pilot study, a new perioperative practice model was tested where the one and same anesthesia nurse took care of the patient during the entire perioperative process and visited the patient the next day after surgery (Pulkkinen et al., 2016).

- This poster will focus only on the effect of a new perioperative practice model on patient outcomes.

Objectives

- To explore the effect of a new perioperative practice model on patient outcomes: surgery-related anxiety, and health-related quality of life.

Methods

- A longitudinal untreated control group design with pre- and post-tests. The randomized patient sampling (n=490) included voluntary adults undergoing total hip (THA) or total knee (TKA) arthroplasty.

- The data were collected by:
  1. 15D; a generic, 15-dimensional, self-administered instrument for measuring health-related quality of life among adults (Sintonen, 2001), and
  2. STAI, State-Trait Anxiety Inventory; a definitive instrument for measuring anxiety in adults (Spielberger, 2010).

Results

- Both groups had a statistically significant mean improvement on the 15D dimensions of moving, usual activities, discomfort and symptoms, distress and vitality (Figure).

  ![Figure](image)

  The dimensions of 15D that improved in all patients are marked with an asterisk

- There were no differences in the improvement in HRQoL (15D) in moving, usual activities, discomfort and symptoms, distress and vitality in either of the groups.

- In both groups, the surgery-related anxiety diminished significantly. The change was bigger but not statistically significant in the intervention group.

- In THA patients, the improvement in State anxiety scores was statistically significant both in female intervention group and control group patients.

- Female patients gained more from the intervention than male patients did.

Conclusions

- The effect of the intervention could not be proved although the differences were somewhat larger in the intervention group patients.

References