The Effect of Aromatherapy on Post-operative Nausea in Women Undergoing Surgical Procedures

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Abstract

Postoperative nausea is a common source of patient discomfort and increased length of stay in the Post Anesthesia Care Unit (PACU). Peppermint oil aromatherapy has been suggested as an effective therapy for nausea. The cost of peppermint oil is $6.00 per bottle as compared 4 mg of Zofran, which is $16.75 per dose. The purpose of this prospective study is to assess the effect of aromatherapy on the severity of postoperative nausea and/or vomiting (PONV) in women undergoing any surgical procedures in the PACU.

Women were placed into one of three groups: those receiving traditional antiemetics, those given aromatherapy with peppermint oil, and those inhaling saline vapor. Inhalation type (peppermint or saline) was randomly selected by the nurses from sealed zip lock bags. Over 600 women were consented with an n of 71. A visual analog scale was used to rate nausea at first complaint, at five minutes post-intervention, and if nausea persisted, at ten minutes post-intervention. The comparison of mean change was analyzed using a One-Way ANOVA. At five minutes, there was no difference between intervention and nausea rating (p = 0.989). For those still nauseated after ten minutes (n = 46), there was evidence of a significant decrease in nausea, between the five and ten minute readings, in the peppermint group versus the saline group (p = 0.059). However, there was no significant difference between the peppermint group and the antiemetic group (p = 0.489). There was also no significant difference between intervention and nausea rating when looking at the total change in nausea rating (p = 0.466).

Generalizability is limited due to sample size. Obtaining a large n was challenging; although large numbers of women consented, most received intraoperative antiemetics and did not report nausea postoperatively.