Efficacy of Aromatherapy in the Treatment of Post-Discharge Nausea in Patients Undergoing Outpatient Abdominal Surgery

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Introduction/Problem
Post-discharge nausea (PDN) is a common complication after surgery with reported incidence rates as high as 35-50%. When nausea occurs post-discharge, patients attempt remedies that are ineffective or take prescribed antiemetics that can have detrimental side effects.

Purpose
To explore the efficacy of Quease/EASE (QE), an aromatherapy compound which combines the essential oils of peppermint, spearmint, lavender, and ginger, in decreasing PDN in patients undergoing outpatient abdominal surgery.

Methodology
Informed consent was obtained preoperatively from a convenience sample of adult patients scheduled for outpatient abdominal surgery procedures. Prior to discharge, subjects were instructed in the use of QE and given instructions on how to rate their nausea on a 0-10 scale. They recorded nausea scales > 0 any time they occurred for the next 24 hours, used the QE, and recorded their nausea scales 3 minutes later. A study nurse called subjects the next day to collect the information.

Results
Data was collected on 70 outpatients with 25 (36%) reporting PDN and the use of QE. There was a significant difference in mean age of those reporting PDN (37) vs those without nausea (48, p=.004) as well as a significant difference in mean IV fluid intake during hospitalization of those reporting PDN (1310mL) vs those without nausea (1511mL, p=.04). The PDN group was 72% female vs 42% female in the no nausea group. The 25 subjects reported 47 episodes of PDN in which they used QE. 100% of the PDN episodes reported a decrease in nausea scale after QE; 47% of the PDN episodes reported a nausea scale of 0 after QE. The mean decrease in nausea scale for all 25 subjects was 4.78 after using QE.

Conclusions/Discussion
This study demonstrated that QE can be an effective, safe, and easy to use remedy for PDN in patients undergoing outpatient abdominal surgery. The 36% incidence of PDN that occurred primarily in young females is consistent with known risk factors.

Implications for Practice and Research
Aromatherapy is an effective and practical treatment for PDN. Research should focus on the effectiveness of aromatherapy in Phase I and II recovery.