

## **POSTOPERATIVE SYMPTOM DISTRESS OF LAPAROSCOPIC CHOLECYSTECTOMY AMBULATORY SURGERY PATIENTS**

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**Introduction:** Patients who undergo same-day laparoscopic cholecystectomy (LC) have reported high levels of symptom distress during recovery at home.

**Identification of the problem:** Little research has explored symptom experience from the viewpoint of postoperative patients and their caregivers.

**Purpose of the Study:** The aims of this qualitative descriptive research study were to identify: 1) symptoms that cause postoperative distress after LC ambulatory surgery; 2) symptom management techniques that effectively reduce the distress of postoperative symptoms at home after ambulatory surgery; and 3) facilitators and barriers to self-management of postoperative symptoms.

**Methodology:** Two focus groups were held to elicit participants' (N = 13) post-op experiences. Patients and their caregivers were recruited from a university general surgery office. Audio-recorded discussions lasted approximately two hours. Flip chart notes were posted during the meeting to serve as visual cues and as member checks. The PI conducted a descriptive thematic content analysis using the audio recordings and summarized notes.

**Results:** Themes identified were Symptoms that Caused Distress; Symptom Management; and Self-Management Facilitators and Barriers. Distressing symptoms identified by patients and caregivers included: pain after surgery, nausea, digestive dysfunction, mobility impairment, inability to sleep and time commitment of the caregiver. Symptom management techniques identified included pain medication, ice, use of pillow to cough, use of recliner, lowering the bed, not eating, and use of stool softeners. Self-management facilitators included medication, ice, light diet and stool softeners. Self-Management barriers identified included use of medical terminology versus lay terms, poor access to effective pain medication, high expectations for fast recovery, and lack of preparation for home care. Caregiver frustrations included inability to manage pain and assist with comfortable positioning.

**Discussion and Conclusion:** Laparoscopic patients experience symptom distress at home and have limited communication with healthcare providers. These data will be used to develop an mHealth intervention for patients to assist with more effective symptom management. Many have unrelieved pain and are unprepared for recovery at home. Caregivers miss more work than expected and experience stress and anxiety when unable to assist the patient.

**Implications for perianesthesia nurses and future research:** Nurses involved in the care of these patients should focus not only on the short-term recovery, but prepare the patients for the more sustained issues of recovery at home.

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