

EFFECTIVENESS OF PRE-SURGERY VIDEO IN REDUCING ANXIETY IN DAYSTAY SURGICAL PATIENTS

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Introduction: Preoperative anxiety is a common psychological issue affecting many patients who are faced with the prospect of undergoing surgery. The need for a robust preoperative teaching plan is central to patient comfort, decreasing patient anxiety and better patient outcomes.

Identification of the problem: Research suggests that anxiety levels are greatest when the individual is least informed. The growing emphasis on daystay surgical procedures has limited the amount of time the preadmission nurse has to psychologically prepare and educate the patient for surgery.

Purpose of the Study: The purpose of this study is to determine if adding an on-line educational video to the standard preoperative teaching phone call will decrease patient anxiety in first-time daystay surgical patients.

Methodology: This study is a randomized clinical trial. Eligible patients were first-time daystay surgery patients (non-cancer diagnosis). Patients were randomly assigned to one of two groups: *Control Group*: pre-operative education via a pre-surgery phone call; *Video Group*: addition of a BMC-produced on-line video describing what they would experience during daystay surgery. Patients were administered a Visual Analog Scale (VAS) to measure their level of anxiety at (1) baseline, (2) after video viewing & phone call, or standard (phone call) education, and (3) immediately prior to surgery.

Results: 126 subjects were randomized. One patient assigned to the video group was later deemed ineligible because of prior surgery. Eight subjects (all assigned to the video group) dropped out. The remaining 118 patients (55 video subjects and 63 controls) were analyzed. Anxiety VAS scores for the Video Group remained relatively stable throughout the three time periods, while those in the Control Group significantly increased anxiety from baseline to pre-surgery ($p=0.02$). Changes in anxiety VAS scores were more pronounced in males than females, with transgender patients falling in between.

Discussion: Patients have anxiety when faced with the prospect of surgery. By implementing enhanced teaching using an educational video, our patients came to surgery more informed and less anxious.

Conclusion: Providing an on-line educational video was found to be an effective adjunct for patient education helping to decrease pre-surgery anxiety.

Implications for future research: This enhanced teaching methodology may be implemented in other surgical areas to achieve similar success.