

Aromatherapy to The Rescue for Postoperative Nausea and Vomiting

Primary Investigator: Ursula Mellinger BSN RN CPAN CAPA

UPMC Shadyside, Pittsburgh, Pennsylvania

Co-Investigator: Linda Lakdawala DNP RN CPAN

Introduction: Post-operative nausea and vomiting (PONV) occurs in approximately 30 to 37 % of patients. It is one of the most common complaints after surgery. A modality of pre-and post-operative antiemetics are routinely used, however PONV persists. The literature indicates that patients have reported significantly lower levels of PONV with aromatherapy. Inhaled aromatherapy that consists of a blend of essential oils such as spearmint, peppermint, lavender and ginger have been shown to decrease and eliminate PONV. Aromatherapy can be initiated as a nursing measure immediately upon patient complaint of symptoms. The patients can be instructed to self-administer the product upon discharge.

Identification of the problem: PONV can lead to delays in discharge, increased healthcare cost, undue stress, pain and discomfort at the surgical site, and electrolyte imbalance. All these lead to patient dissatisfaction with the surgical experience.

EBP Question/Purpose: For the adult ambulatory surgery patient, is the use of an inhaled aromatherapy product effective for the relief of PONV in the Phase I and Phase II PACU setting prior to discharge? Data bases utilized for the project include, PubMed, Ovid and CINAHL.

Methods/Evidence: Patients were assessed for risk factors of PONV in the pre-operative area and received preliminary education regarding use of the product. The aromatherapy was used as a first line defense against PONV. Patients were not denied refusal or use of standard antiemetics. Nurses assessed the effectiveness of the product prior to patient discharge by completing the data collection sheet. Follow up phone calls inquired about the use of the product at home as well as overall satisfaction.

Significance of Findings/Outcomes: 38 patients used the product, with 81% reporting improved or total relief of PONV. A total of 47.4% had total relief. Only 7.89% stated they had minor or no relief. Nurses expressed 100% satisfaction with ease and use.

Implications for perianesthesia nurses and future research: Use of aromatherapy provides the perianesthesia nurse with greater autonomy and satisfaction. The use of aromatherapy can only increase the patient's overall satisfaction. Further research can be done by comparing actual length of stays for patients with and without the use of aromatherapy.