

Feasibility of Auricular Acupressure in Post-Surgery Bariatric Patients to Reduce Food Cravings, Anxiety and Increase Autonomy and Implications for Perianesthesia Nurses

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Introduction: Obesity contributes to developing heart disease and diabetes these increase mortality and morbidity. Surgical interventions reduce obesity have positive health outcomes but don't address residual food cravings which are attributed to failed weight-loss surgeries. The World Health Organization calls for utilization of integrative medicine into healthcare. Ample evidence exists of auricular acupressure (pressure placed meridians on the ear) is therapeutic for reducing nicotine and opioid cravings and anxiety.

Identification of the Problem: There is a dearth of therapies for food cravings in bariatric surgical patients. Nonpharmacologic reduction of anxiety has less side effects and costs.

Purpose of the Study: Feasibility of auricular acupressure in post-surgery bariatric patients to reduce food cravings, anxiety and increase autonomy and implications for perianesthesia nurses.

Methodology: A prospective pre/post-test repeated measures pilot study with administration of: food craving questionnaire-state (FCQ-s, current food cravings) and Visual Analog Scale for Anxiety, higher scores indicate higher presence of cravings or anxiety completed before application of auricular acupressure then repeated 3 times over the next 3 weeks with open ended questions explore perceptions of autonomy at study end and patches removed.

Results: 9 subjects completed participation with FCQ-s scores dropped from a mean score 49 to 33.6 (p-.002). Anxiety reduced from a mean of 5 to 2 (p-.002). A single question for autonomy "Did using auricular acupressure increase your perception of control over your health?" 80% agreeing and subjects successfully locating auricular acupressure points empowering them to use this therapy independently. All subjects reported enjoying use of this therapy with 90% retention meeting our assessment for feasibility and ease of use.

Discussion: These patients were open to integrative therapies, benefited and enjoyed the experience. Cost of patches is .09 cents each and no side effects experienced.

Conclusion: Auricular acupressure is feasible to use in the ambulatory setting and can reduce food cravings and anxiety in post-surgical bariatric patients and increase perceptions of autonomy.

Implications for perianesthesia nurses and future research: Perianesthesia nurses who complete auricular acupressure education and certification could expand use of this therapy, additional research is needed.