

A SURVEY OF PATIENTS' AWARENESS ABOUT THE PERI-OPERATIVE ROLE OF ANAESTHETISTS

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Anaesthesia is of vital importance for all surgical and allied specialties and anaesthetist is also required in intensive care departments especially involving the use of ventilators. Despite his skill and sensitive nature of job, not only patients but also even many fellow colleagues have false perceptions about this specialty. The aim of this study was to assess the knowledge of our patients about the peri-operative role of anaesthetist, so that awareness programme may be arranged to educate the public, accordingly in a developing country. Prospective study consisting of pre-anaesthetic interview and 15 items questionnaire survey in 600 patients, carried out at the Anaesthesia Department, Pakistan Naval Hospital Shifa Karachi, Pakistan, from Jan 2003 to Feb 2004. Their response was recorded as yes, no or not sure. The results were prepared in percentage. Eighty two percent knew that anaesthetist is a qualified doctor but only 40% could anticipate that he is in-charge of operation theatre. Sixty six percent believed that anaesthetist was responsible for peri-operative care but only 34% knew that he also worked in pain clinic. Sixty four percent wanted to know their anaesthetist but only 24% showed personal preference for anaesthetist. Forty percent were afraid of surgery and 60% were afraid of anaesthesia. Sixty percent were afraid of post-operative pain. Sixty percent liked general anaesthesia, if given choice to choose; whereas the remaining 40% liked spinal anaesthesia as first choice. One third of the patients had previous experience of anaesthesia. Majority of our patients knew that anaesthesia is given by qualified doctors and they wanted to know their anaesthetist but very little knew that anaesthetist also had other jobs to do, out side the operation theatre. Although the results have improved as compared to the previous study but still there is need to educate the public regarding anaesthesia.

INTRODUCTION

Anaesthesia has been revolutionized over the past 50 years by the development of new anaesthetic agents, techniques and new development in monitoring system. However even now our patients are not well aware of the role of anaesthetist and especially their knowledge was very poor regarding anaesthetist's commitments out side the operation theatre¹. Public awareness programmes are being arranged in many developed countries and on 25 May 2000 National Anaesthesia Day was observed to inform the public about the role and training of anaesthetists. One survey was carried out at Derriford Hospital, Plymouth, one month prior to National Anaesthesia Day, which showed very discouraging

results that 35% of the literate patients of a developed country, were unaware that anaesthetists are qualified doctors². Unluckily the results of second survey held immediately after National Anaesthesia Day, did not alter the results, despite a local information campaign. If these statistics are to change in the coming years new methods of public education need to be found².

Similarly the results of previous studies carried out in Hong Kong, United Kingdom, United States, Singapore and one local study done at Aga Khan Hospital Karachi, Pakistan, are almost the same³⁻⁷, except two surveys showed that more than 95% patients believed that anaesthetist was a doctor^{8,9}.

A good anaesthetist-patient relationship established during the preoperative visit may help to reduce patient's anxiety (10). This can be achieved by informing patients about their disease, the intended surgery and the anaesthetic management. Reliable information helps the patient to prepare for the intended surgery and anaesthesia, and may help to assist with the postoperative recovery and care. Anaesthetists take particular care to inform patients about the operation and the anaesthesia, but sometimes may not realize the extent to which patients may misunderstand medical terms¹¹⁻¹³.

All these surveys and studies recommended to arrange public awareness programme about anaesthesia and further studies should be performed in coming years to know the results of anaesthesia campaign at each country level³⁻⁷.

In continuation to that programme we conducted a survey in patients belonging to Pakistan Armed Forces and their families. Aims and objects of this study were to assess patients' knowledge about anaesthetists and anaesthetic management, as well as their specific concerns about the process of anaesthesia. The information thus obtained should help anaesthetists to communicate more effectively with patients and thus help towards building an effective doctor-patient relationship⁶. In addition, this data could be helpful when designing literature for patients about anaesthesia and peri-operative care. Information that increases public awareness about the role of the anaesthetist will contribute towards improving the image of the specialty.

PATIENTS AND METHODS

After approval from the Hospital Scientific Committee, a survey was conducted at the Pre-anaesthesia Clinic, Department of Anaesthesia Pakistan Naval Hospital Shifa, Karachi, Pakistan, from Jan 2003 to Feb. 2004. Six hundred patients above 15 years, belonging to Army, Navy, Air Force, Rangers (paramilitary force) and their families, were asked to answer a questionnaire after translating into their own local language, so that they could understand it in a better way. Sixty four percent patients were matriculates where as 36% were under-matric. Male to female ratio was 3:2. Only those patients were included who could be operated under spinal/ general anaesthesia.

Patients were asked to answer a 15 items questionnaire (appendix)¹. The response of the patient was recorded as yes, no or not sure. The bio-data of each patient was also recorded. The answers were recorded on an answer sheet by nursing assistant at the time of pre-anaesthetic visit in out patient pre-anaesthesia clinic. The results were prepared in percentage.

RESULTS

As shown in Fig-1 and Appendix-1, 82% patients knew that anaesthetist is a qualified doctor, 10% were not sure, whereas only 8% were of the opinion that anaesthesia is not given by qualified doctors. Only 40% could anticipate that the anaesthetist is incharge of operation theatre, 42% were not sure and 18% confidently said that anaesthetist was not the incharge, rather surgeon was the incharge. Sixty six percent believed that anaesthetist was responsible for peri-operative care and he looked after the patients during operation. Twenty six percent were not sure and only 8% were of the opinion that surgeon himself took care of the patient.

Only 18% knew that anaesthetist also worked out side the operation theatre, he was incharge of intensive care unit and also run pain clinic, 46% were not sure and 34% said that anaesthetists had no job to do outside the operation theatre. Sixty four percent wanted to know their anaesthetist, 8% were not sure and 28% said that they did not want to know their anaesthetist. Only 24% liked to choose an anaesthetist who should administer anaesthesia, 64% did not give any personal preference and 12% were not sure.

Forty percent were afraid of surgery where as 60% were afraid of anaesthesia, that they would not come out of anaesthesia. Sixty percent were afraid of post-operative pain and 40% were of the opinion that one had to bear the post-operative pain. Sixty percent liked general anaesthesia, if given choice to choose, where as the remaining 40% liked to be operated under spinal anaesthesia as the first choice. One third of the patients had previous experience of anaesthesia.

DISCUSSION

This survey was carried out to know the insight of the patients about the doctors who look

APPENDIX-1

Questionnaire

1.	Is anaesthetist a qualified doctor?
2.	Is he in-charge of operation theatre?
3.	Is he responsible for peri-operative care of the patients?
4.	Does he also work out side the operation theatre?
5.	Is he in-charge of intensive care unit?
6.	Has he a role in pain management?
7.	Do you want to know your anaesthetist?
8.	Do you want to choose your own anaesthetist?
9.	Are you afraid of operation?
10.	Are you afraid of anaesthesia?
11.	Are you afraid that you will not come out of anaesthesia?
12.	Are you afraid of post-operative pain?
13.	Do you like general anaesthesia?
14.	Do you like spinal anaesthesia?
15.	Have you been anaesthetized before?

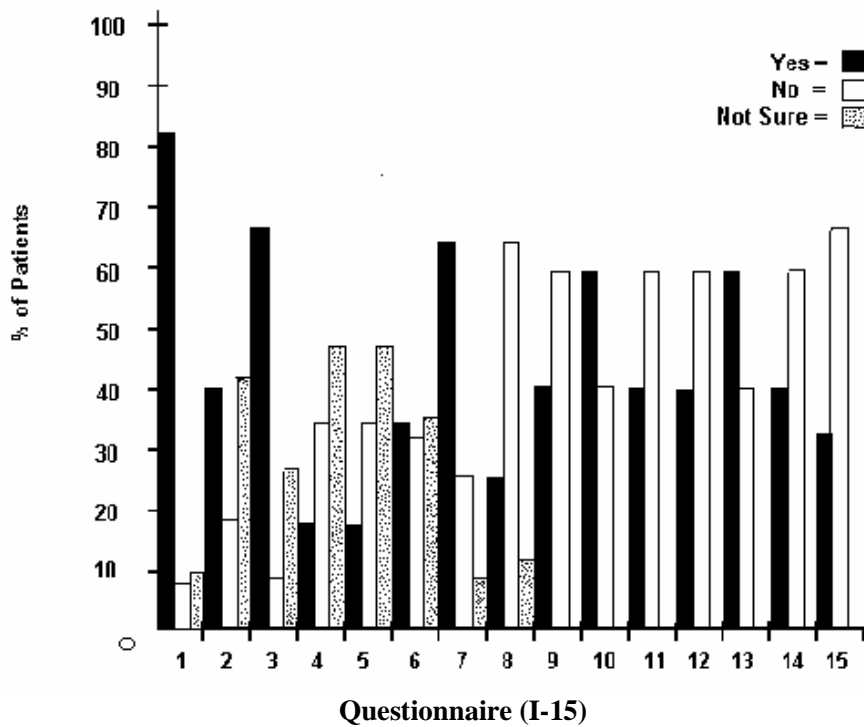


Fig-1: Patient's response to the questionnaire.

after them peri-operatively. As previous studies showed that most of the patient thought that surgeon looked after the patient peri-operatively and was incharge of the operation theatre, only 30 to 35% knew that anaesthetist was responsible for peri-operative care and was a qualified doctor³⁻⁷. These studies were carried out in developed countries like UK, USA, Singapore and Hong Kong but our results were encouraging where 82% patients knew that anaesthesia was given by qualified doctors. In Pakistan public awareness about anaesthesiology has improved during the last 4 years if we compare our results with a previous study carried out at Agha Khan, Hospital Pakistan in 1999, which showed that only 35% knew, at that time that anaesthetist was a qualified doctor⁶. But our results are not up to the mark if we compare it with two other surveys carried out in developed countries, where more than 95% patients knew that anaesthetists were qualified doctors^{8,9}.

As for the knowledge of the patients regarding job of the anaesthetists out-side the operation theatre is concerned, still the results are not encouraging and our patients had almost the same opinion as shown in the previous studies³⁻⁷. Most of the Intensive care units in Pakistan are being looked after by anaesthetists but still our public is not well aware of this fact. This may be due to lack of public awareness programme in our country which is necessary for future development in anaesthesia⁶. As regards the job in Pain Clinic, the anaesthetists are taking much interest and now these clinics are established in almost every tertiary care hospital in Pakistan, where the anaesthetist can do independent job and he is recognized as independent treating physician¹⁴. However still our public is not well aware of these clinics as the result of our study showed that only 34% knew that anaesthetists also worked in Pain clinics.

Now patients are well aware of pre-anaesthesia out patient clinics and most of the patients want to meet their anaesthetist before under-going surgery, this also relieves their anxiety as documented in a previous study¹⁵. Our study showed that 64% of the patients wanted to meet their anaesthetist in the pre-anaesthesia out patient clinic. When they were asked to choose their own anaesthetist, majority (64%) did not

have any personal preference for any particular anaesthetist by name. This may show their confidence in the specialists or still they are not well aware of individual anaesthetist by name.

Fear of surgery, anaesthesia and post-operative pain is a well-known entity in surgical patients. An earlier survey carried out in Singapore reported that patient's fear of surgery was that he might not come out of anaesthesia but most of the patients were more afraid of post-operative pain⁵. Our survey showed 40% patients were afraid of surgery and 60% were afraid of anaesthesia. Sixty percent were afraid of post-operative pain and 40% did not have any fear. When given choice to choose the type of anaesthesia, majority of the patients (60%) liked general anaesthesia as compared to spinal anaesthesia. Later on patients were told about the merits and demerits of both types of anaesthesia, then almost all the patients agreed to spinal anaesthesia. Patient's satisfaction after general versus spinal anaesthesia was not included in this survey. It needs further study and evaluation but randomly we found that patients had more satisfaction after spinal anaesthesia, rather than general anaesthesia as stated in a previous study¹⁶.

The people have little knowledge of anaesthesia and particularly patients do not know the anaesthetist by name as they know the other specialists like surgeons and physicians. Therefore there is a dire need to run the awareness programmes like lectures, demonstrations, advertisements, discussions and plays on television, so that people can gain knowledge about the anaesthesia specialty. This will be a further step to create good patient-doctor relationship, thereby reducing the fear of surgery and anaesthesia and will also allay the pre-operative anxiety^{10,11,15}.

CONCLUSION

Majority of our patients knew that anaesthesia is given by qualified doctors and they wanted to know their anaesthetist but very little knew that anaesthetist also had other jobs to do, out side the operation theatre. Although the results have improved as compared to previous study, still there is need to educate the public regarding anaesthesia as a specialty.

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