

The medical relevance of the spiritual dimension during the pre-surgical period

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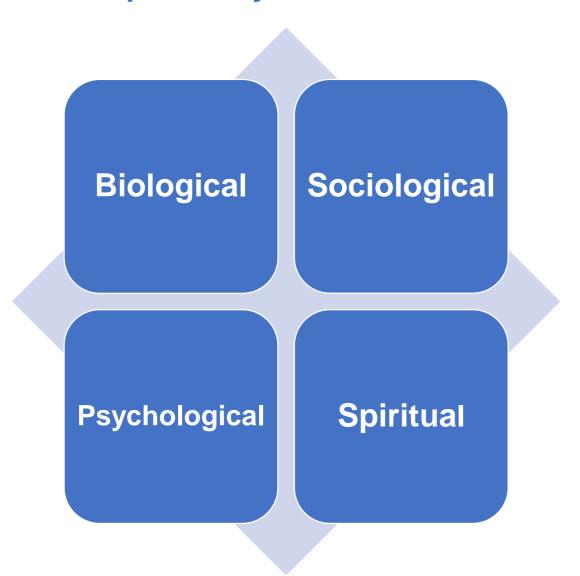


Background

- Some patients experience the day of surgery as «most threatening day of their life» Nigussi S et al (2014)(1): Significant preoperative anxiety was seen in 70.3% of patients. Fumasoli et al (2012)(2): Indication for surgery is experienced as «critical life-situation»
- Spirituality and religion (S/R) play an important role in medicine, particularly in times of crisis Puchalski C₍₃₎: A spiritual issue becomes a diagnosis if it leads to distress or suffering, it is the cause of psychological or physical diagnosis or it is a secondary cause or affects the presenting psychological or physical diagnosis.
- There is hardly any information and very few studies about the spiritual dimension of the pre-surgical period (pp).

Beiranvand S et al (2014)₍₄₎: The study shows that spiritual elements play an important role in the recovery process with regard to acute postoperative pain. Prayer meditation tapes helped. Hosseini M et al (2013)₍₅₎: The study demonstrates that preoperative spiritual/religious training can reduce anxiety in Muslim patients undergoing coronary artery bypass graft surgery.

WHO Concept of Health includes Spirituality as fourth dimension



Study Purpose

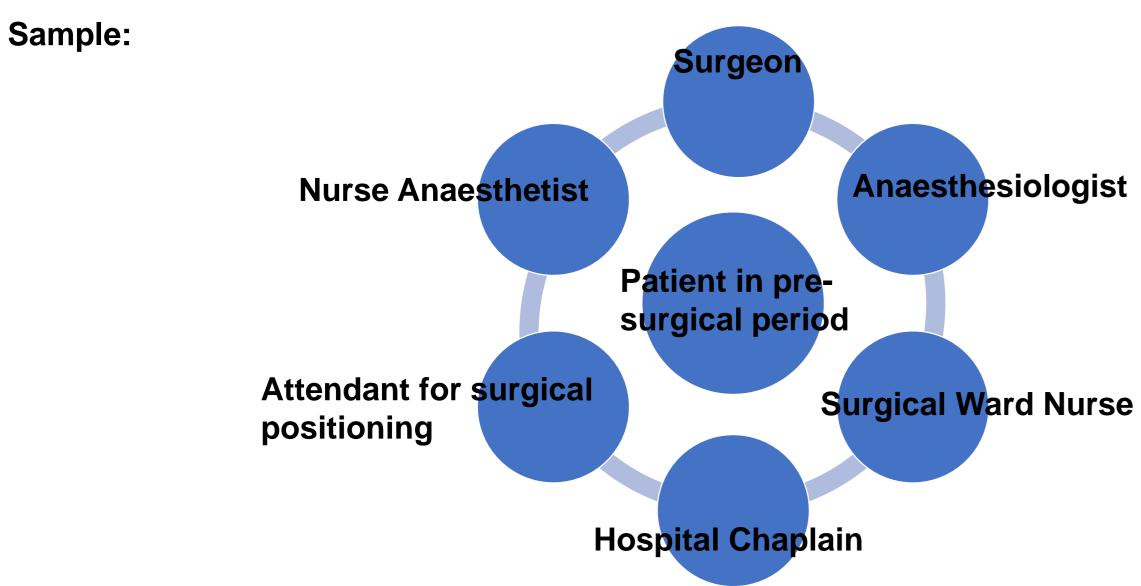
Finding more information about the medical relevance of S/R during the pp

Methods

Design: Qualitative study

Thematic analysis of 6 semi-structured interviews with healthcare professionals, who work with natients during po

who work with patients during pp.



Data collection: Spring 2016 in 3 hospitals in Berne area

Tool used to identify medically relevant spiritual issues: Adapted List of Spiritual Concerns or Diagnoses, which identifies 12 diagnoses.(7)

Examples

Diagnoses	Key feature from history	Example statements
Existential concerns	Lack of meaning Concern about afterlife Questions the meaning of suffering	'My life is meaningless' 'I feel useless'
Despair/ Hopelessness	Hopelessness about future health, life No hope for value of life	'There is nothing left for me to live for'
Grief/Loss	The feeling and process associated with the loss of a person, health, relationship, work	'I miss my family' 'I wish I could run again' 'I might lose my income'
Guilt/Shame	Feeling that one has done something wrong or evil Feeling that illness is God's punishment	'I do not deserve to be pain free' 'It is all my fault'

Findings

6 Healthcare Professionals unanimously agree: Spirituality/Religion is relevant during pre-surgical period

All 12 spiritual diagnoses of the 'spiritual concerns or diagnoses list' were identified as relevant during the pp.



https://health.mil/~/media/Images/MHS/Photos/ERSS.ashx

Patients have general need related to S/R

Attendant for surgical positioning: «I remember a patient who did not allow us to cut her hair until we promissed to keep the hair and to hand it back to her after surgery.»



S/R can help with dealing of stress (positive coping):

Anaesthetist nurse: «People who trust in God or a 'Higher Power' are much easier to handle and anaesthetize.»

tps://upload.wikimedia.org/wikipedia/commons/d/dc/Bagging.JP0



S/R can hinder coping (negative coping)

Surgeon: «There are patients who refuse surgery, because they believe that God will heal them.»



Fears during pp may have spiritual dimension:

Anaesthetist doctor: «Some people think for the first time about the limitedness of their life before surgery.»

https://upload.wikimedia.org/wikipedia/commons/2/2c/Spinal_anaesthesia.jpg

Conclusion

This study illustrates the important influence S/R can have during the pp. This influence has hardly been considered until now. The findings are supported by current literature.

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