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RESEARCH ARTICLE

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PRE ANESTHETIC ASSESSMENT: STUDY ON THE INFLUENCE OF PREOPERATIVE APPROACH ON PATIENT SATISFACTION DURING THE COVID-19 PANDEMIC

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ABSTRACT

Anesthesiology provides absence of or relief from pain and other sensations to patients who need to undergo medical procedures. Those who specialize in this area have been expanding their fields of action not only intraoperatively, but also pre- and postoperatively. Recently, going to pre-anesthetic office was implemented as mandatory for anyone who undergo surgery. However, the COVID-19 pandemic made attending to such meetings difficult, so many of them were done online. This research evaluated the degree of satisfaction with anesthesia office of a sample of the population who underwent surgical procedures during the aforementioned pandemic, verifying the importance of the anesthesiologist and the trust of the community after their contact with this professional, focusing on their opinion regarding the elucidation of doubts and reduction of anxiety symptoms. Pre-anesthetic evaluation has been shown to reduce anxiety and clear doubts about anesthetics procedures. Moreover, this prior contact was considered relevant by the patients.

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INTRODUCTION

Anesthesiology is the medical field that studies and bestows the absence of or relief from pain⁶ and other sensations to patients who have to undergo medical procedures. Those who specialize in this area have been expanding their their fields of action every day, from the pre to the postoperative period, providing outpatient care for pre-anesthetic evaluation and assuming a fundamental post-surgical role regarding patient follow-up, including intensive care units¹⁰. Although this important specialty has existed for years, the vast majority of the population is unaware of the need to go to their office before undergoing surgical procedures⁹, in addition to being unaware of what does an anesthesiologist do. Recently, the pre-anesthesia office was implemented as mandatory for surgeries to be performed. However, the emergence of the COVID-19 sanitary crisis showed that ensuring continuity of care in conditions of crisis can be invaluable^{4,10}. Telehealth is slowly developing in the field of anaesthesia, specially at the perioperative period and found some hindrances, such as a highly anxious population^{3,10}. Based on this, the present study evaluated the opinion change this population had after their contact and doubt elucidation by anesthesiologists and verified whether this impact was positive or negative.

MATERIAL AND METHODS

A questionnaire was disponibilized to patients after their pre-anesthetic appointments through the online platform Google Forms (Appendix I), inquiring about their degree of satisfaction, if They considered the assessment as necessary, if there was any guidance they did not know about, among others. The total numbers of our sample was 41 people, and all of them signed the Informed Consent Form. The inclusion criterion was to be between 30 and 70 years old, regardless of gender and ethnicity; with or without any comorbidities; literate; possuing communication skills, as well as lucidity and who has been evaluated by an anesthesiologist in the preoperative period. The research was submitted and approved by the Research Ethics Committee of Hospital Unimed Vitória. The data obtained was analyzed by our research team and Google Forms statistical analysis was used.

RESULTS

We obtained a sample of 41 participants so far and, of the total sample, 57.9% participants were unaware of the importance of pre-anesthetic evaluation, while 39.5% claimed to know and 10.4% were unsure. 86.8% reported having received pre-anesthetic guidance

(clarification of doubts, explanation of the procedure, time of fasting, medication suspension) and 13.2% did not, 10.4% did not want to answer to this question. Of the participants, 76.3% received pre-anesthetic guidance from the anesthesiologist and 23.7% received guidance from other specialists. The data shows that 84.2% did not have comorbidities such as diabetes, hypertension or heart diseases, while 15.8% did. As for previous surgery, 55.3% of participants had already undergone surgeries with pre-anesthetic evaluation and 44.7% did not have access to the consultation previously. Notably, 78.9% of them knew the role of an anesthesiologist. However, 21.1% were still unaware of it. 94.7% considered the preoperative contact with the anesthesiologist important, but 5.3% did not agree. Interestingly, 18.4% reported anxiety symptoms before surgery (nausea, tachycardia, diarrhea.), but after contact with an anesthesiologist, these symptoms were reported to have decreased in 71.5% of patients who underwent pre-anesthetic consultation. 78.9% had no complications after surgery (nausea, vomiting, post-traumatic stress, irritability), while 21.1% of the participants had.

DISCUSSION

Patients undergoing invasive and/or surgical procedures have a high prevalence of anxiety and depression⁸. When identifying patients with high levels of anxiety or depression, we must consider the use of adequate and continuous psychological support in the pre- and postoperative period, making it possible to prevent them from developing other psychological disorders that require differentiated pharmacological intervention. The present study noticed that both level and prevalence of anxiety were significantly reduced in the group who attended the pre-anesthetic consultation compared to those who did not. Among the many established advantages of pre-anesthetic evaluation are the morbidity decrease and the quality increase of the anesthetic-surgical procedure^{1,2}. When performed before the surgery, the pre-anesthetic evaluation also promotes reduction in surgery cancellation⁵ and the costs acquired from complementary exams and specialized consultations requested in the preoperative period⁷. Also, due to the COVID-19 pandemic, contact between professional and patient was highly difficult due to social distancing, an important measure taken to fight such a highly infectious disease. Because of that, even amount of preoperative appointments was reduced, causing an anxiety increase in the patients who were preparing for surgery, as the lack of information scared them of such procedures.

CONCLUSIONS

In this study pre-anesthetic evaluation was shown to reduced anxiety levels and cleared doubts about surgical procedures of the patients. We emphasize the importance of the patient's prior contact with an anesthesiologist. However, pre-anesthetic consultation is not so well known, as can be seen from 57.9% of the participants being unaware of the importance of pre-anesthetic evaluation. A large portion of them still receives guidance exclusively from surgeons or other specialists.

Most procedures were performed in private service and when the consultation was carried out, this prior contact with the anesthesiologist was considered important by 94.7% of the patients.

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