

Correlation of preoperative anxiety and postoperative pain in patients undergoing major surgery under general anesthesia in a training hospital in the Philippines.

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Abstract

Patient's preoperative anxiety level affects the perception of postoperative pain. Patients with high anxiety should be identified preoperatively so that strategies for pain management will be individualized and postoperative concerns will be addressed earlier. This prospective, cohort study sought to determine the relationship of preoperative anxiety on postoperative pain control in patients after major general surgery.

METHODS: A total of 194 patients scheduled for major general surgery were enrolled in the study. Hospital Anxiety and Depression Scale (HADS) was administered, and patients with a HADS score of >8 were categorized under the anxiety group, while patients with HADS Score < 7 were categorized under the no anxiety group. Duration of surgery, duration of anesthesia, extubation time, time to reach anesthesia recovery using the Modified Aldrete Score, and side effects, were recorded. Pain medications were given, and pain scores using the Numeric Pain Rating Scale (NPRS) were recorded in the postoperative period.

RESULT: A significant correlation between pre-operative anxiety and post-operative pain from the 1st to the 24th hour post-operatively was noted. The duration of surgery and anesthesia were longer in the anxiety group. This group also had more observed side effects, particularly nausea (10.4% vs 5.1%) and agitation (12.5% vs 5.1%). NPRS scores were also higher in the anxiety group 24 hours postoperatively.

CONCLUSION: A positive correlation between pre-operative anxiety and post-operative pain was established. Whereas pre-operative anxiety increases, post-operative pain also increases.



Biography:

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