

Evaluation of Post-operative Nursing Care of Psychological Support and Discharge Plan for Women Undergone Hysterectomy at Maternity Wards in Baghdad City's Teaching Hospitals

تقويم الرعاية التمريضية مابعد الجراحة للدعم النفسي و خطة الخروج للنساء اللواتي خضعن لعملية إستئصال الرحم في ردهات النسائية في المستشفيات التعليمية لمدينة بغداد

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المستخلص

الهدف: تهدف الدراسة إلى تقويم الدعم النفسي و خطة مغادرة المستشفى المقدمة من قبل الممرضات للنساء اللواتي خضعن لعملية إستئصال الرحم.

المنهجية: اعتمدت الدراسة التصميم الوصفي والعينة غير الإحتمالية (المتوفرة) والمكونة من (٤٠) ممرضة من (٨) مستشفيات تعليمية في مدينة بغداد ضمن ردهة النسائية وأجريت الدراسة للفترة من ١١ نوفمبر ٢٠٢٠ إلى ٢٧ يونيو ٢٠٢١. تم تطوير أداة مراقبة لتقويم الدعم النفسي و خطة المغادرة مابعد العملية وتم قياس الثبات وصدق المحتوى لها عن طريق الدراسة الإستقرائية. جمعت البيانات من خلال إستخدام الإستبانة وتم تحليلها بإستخدام أسلوب تحليل البيانات الإحصائية الوصفية والإستنتاجية.

النتائج: أظهرت نتائج الدراسة إلى أن جميع الممرضات قد قدمن رعاية تمريضية غير كفوة بعد الجراحة.

التوصيات: أوصت الدراسة إلى ضرورة تنفيذ برامج تدريبية للرعاية التمريضية بعد إستئصال الرحم. وزيادة عدد الممرضات في هذا المجال لعلاج الضعف في الردهات. بالإضافة إلى ذلك، تحتاج إدارة المستشفى إلى لعب دور قوي في مراقبة رعاية المرضى.

الكلمات المفتاحية: التقويم، الدعم النفسي، خطة الخروج، عملية إستئصال الرحم

Abstract

Objective: The study aims at evaluating the psychological support and discharge plan from the hospital provided by nurses for woman undergone hysterectomy.

Methodology: The study uses descriptive design and non-probability (convenient) sample which is consisted of (40) nurses from (8) teaching hospitals in the City of Baghdad within the maternity wards. The study is carried out from 11 November 2020 to 27 June 2021. A observational tool is developed to evaluate the psychological support and the discharge plan after surgery. Content validity and internal consistency reliability are determined through pilot study. Data are collected through the use of the questionnaire and data are analyzed through the use of descriptive and inferential statistical data analysis approaches.

Results: Findings of the study show that all of the nurses have delivered inadequate postoperative nursing care.

Recommendations: The study recommends that there is necessity of implementing training programs for nursing care after hysterectomy. And increase the number of nurses in this area to treat weakness in the wards. In addition, hospital management needs to play a strong role in monitoring patient care.

Keywords: Evaluation, Psychological Support, Discharge Plan, Hysterectomy

Introduction:

Hysterectomy is a procedure in which the uterus is surgically removed. The majority of hysterectomies for benign indications are performed. And a hysterectomy may be suggested for several purposes in general. One study recorded that the most common symptom is myoma of the uterus, accompanied by endometrial, postmenopausal bleeding, pelvic mass, pelvic pain, and uterine prolapse, with or without irregular uterine bleeding. And ethnicity may also play a role in hysterectomy indications ⁽¹⁾. Nurse's job is difficult because they are active in every aspect of patient care, from offering comfort and hygiene to administering intravenous infusions, recording medical records, and performing minor diagnostic and therapeutic techniques and methods ⁽²⁾.

Since the uterus plays a special social, sexual and psychological function, diseases and procedures related to the uterus may lead to very high rates of mental disorders. The improvement in the socio-medical model is a change in the psychological state of the woman before and after hysterectomy ⁽³⁾. Therefore, nurses are the main caregivers for patients who have a hysterectomy. From the

moment the operation ends, the nurse assumes the role of primary caregiver before the patient is discharged from hospital ⁽⁴⁾.

Nurses are of specific significance during the patient's stay in the hospital. They support patient rehabilitation, minimize the duration of stay for patients, and alleviate the financial burden. This is due to the lack of information about illness in most patients, and uncertainty about recovery after surgery, as well as anxiety and fear. Mental nursing treatment, however, is still the nurses' responsibility. Nurses can clarify post-operational rehabilitation and provide the patient with social and family support. Besides, they not only rely on physical therapy to help patients get back into society, but it is also linked to their psychological treatment, so the nurse plays an important role in the post-operative rehabilitation process ⁽⁵⁾.

The nurse's duties also include getting ready the patients and families for discharge, which is a continual process throughout their stay in the hospital. Prior to hospital exit, the patient and his family are given oral and written instructions, When to contact a physician, activity limits, drug administration orders, infection

early signs to report, and follow-up appointments are all things to consider ⁽⁶⁾.

Methodology:

Study Design: A quantitative descriptive hospital-based study design.

Study Sample: This study is conducted on a non-probability (convenient) sample consisting of (40) nurses working in maternity wards at the morning shift, selected from (8) teaching hospitals in Baghdad City.

Ethical Considerations: The Scientific Research Ethical Committee at the University of Baghdad, College of Nursing has approved the study to be conducted. All nurses who have participated in the study have signed consent form to present their agreement for their participation and to protect their human rights.

The Study Instrument: The data is collected by using evaluation tools (observation tool), it is designed and constructed for the purpose of the study. The observation tool represents evaluation of postoperative nursing care for women undergoing hysterectomy at maternity wards specifically psychological support and discharge plan.

The observation tool consists of two domains and includes:

Domain I: Psychological support for the patient, it comprised of (3) questions.

Domain II: Special instructions for the patient upon leaving the hospital (Discharge Plan), it comprised of (6) questions.

To evaluate the postoperative nursing care of the study group that are based on mean of scores (MS) and cut off point. The observation tool have been scored and rated on three levels scale; Always scored as (3), Sometimes scored as (2) and Never scored as (1). The Scores of responses are categorized according to the following:

Postoperative Nursing Care:

$$\text{Cutoff point } \frac{1+2}{2} = 1.5$$

MS < 2 means as low.

MS > 2 means as high.

Reliability of data: A reliability is determined by the Cronbach alpha correlation coefficient is (r = 0.94) which is considered statistically acceptable.

Data collection: The study is initiated from November 11th 2020 to June 27th 2021. The study is conducted in maternity wards at the morning shift,

selected from (8) teaching hospitals in Baghdad city.

Data Analysis: The data are analyzed by using descriptive and inferential data analysis approaches by the Statistical Package for Social Sciences (SPSS) version 26.

Results:

Table (1): Overall Evaluation of Psychological Support of Post-operative Care for Women undergone Hysterectomy

Inadequate (3-5)	Fair (5.1-7)	Adequate (7.1-9)
(90.0%)	(10.0%)	(0.0%)

Results, out of this table, indicate that most of the nurses have delivered inadequate relative to psychological support (90%).

Table (2): Mean of Scores on Items of Psychological Support of Post-operative Care for

Women undergone Hysterectomy

List	Items	Always	Sometimes	Never	MS	Evaluation
2.1	Talking to the patient about hysterectomy (it is an operation that is necessary to maintain your life and health, and you do not lose her femininity and all the pain will disappear with time).	0	1	39	1.02	Low
2.2	Answer the concerned questions from the patient and reassure her.	7	23	10	1.93	Low
2.3	Communicate with the patient's family.	2	27	11	1.78	Low

MS: Mean of Scores, Low: MS < 2

Results, out of this table, depict that all items have low mean of scores.

Table (3): Overall Evaluation of Discharge Plan of Post-operative Care for Women

Undergone Hysterectomy

Inadequate (6-10)	Fair (10.1-14)	Adequate (14.1-18)
(100.0%)	(0.0%)	(0.0%)

Results, out of this table, indicate that all of the nurses have delivered inadequate postoperative nursing care relative to discharge plan (100.0%).

Table (4): Mean of Scores on Items of Discharge Plan of Post-operative Care for Women Undergone Hysterectomy

List	Items	Always	Sometimes	Never	Mean of Scores	Evaluation
4.1	Instruct the patient to restrict physical activity for a period of 4-6 weeks after the operation.	0	5	35	1.0	Low
4.2	Instruct the patient to avoid sexual intercourse for a period of 4 to 6 weeks after the operation.	0	1	39	1.02	Low
4.3	Instruct the patient to maintain personal hygiene, especially the cleanliness of the perineum (changing the pad frequently, washing and drying the area, changing underwear frequently).	0	3	37	1.07	Low
4.4	Instruct and teach the patient to practice Kegel exercises that help her in strengthening the pelvic floor muscles, after consulting the physician	0	1	39	1.02	Low
4.5	Instruct the patient to follow a healthy diet rich in protein, vitamins, various minerals and fibers.	0	1	39	1.02	Low
4.6	Instruct the patient to keep health follow up with her physician.	3	9	28	1.39	Low

Low: MS < 2

Results, out of this table, reveal that all items have low mean of scores.

Discussion:

1. Psychological support

The overall evaluation of nurses' nursing care for psychological support is inadequate. This has been evidenced in the low mean of scores of all items. The length of time takes for a patient to recover following a hysterectomy is influenced by her psychological state. Anxiety, worry, and disorientation after a hysterectomy increase the chance of complications ⁽⁷⁾. The

psychological treatment of a patient having a hysterectomy is critical in minimizing the patient's recovery time. If her psychological state is poor, she will have a higher chance of post-operative complications ⁽⁸⁾. In the current study, it is found that patients who underwent a hysterectomy did not receive adequate psychological support from the nurses, especially the issue of informing the patient that hysterectomy is an operation necessary to maintain

their life and health, and they do not lose their femininity and all the pain will disappear within time to reduce anxiety and grief (Table 2). This finding is consistent with a study which is conducted at Iran's Shahid University Hospitals Beheshti for Medical Sciences that finds that the quality of postpartum psychological and emotional care provided to mothers was low⁽⁹⁾.

2. Discharge plan

The overall evaluation of nurses with respect discharge plan is inadequate. This is evidenced in the mean of scores of all items. Most of the nurses are not well-oriented and approached to present attention and management relative to such important aspect of care. As a matter of fact, they do not deliver or present instructions-based discharge plan. This is due to that fact that the hospital does not emphasize on this part of care and also the ratio of the number of nurses to the number of patients is below of the standardized value, led to its neglect and their focus only on filling discharge paper forms without giving any advices. As the number of patients under a nurse's care grows, so does the quality of their treatment. Unsafe staffing levels are

associated with greater mortality for patients⁽¹⁰⁾. The nurse is crucial in preparing the patient and her family for release from the hospital. Before being discharge, the patient should be given important instructions, such as when to contact the surgeon, activity restrictions, drug administration protocols, infection signs and symptoms to report, and follow-up appointments⁽¹¹⁾.

Recommendations:

1. Planning and implementation of training educational programs regarding the nursing care of patients who have undergone hysterectomy.
2. Employment of more nurses in this area of care to manage the weakness in nurses/patients ratio.
3. Hospital's administration needs to play more powerful role in monitoring and evaluating the provided care to patients in maternity wards.

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