



Lived experience of persons with an amputation of the upper limb

Elizabeth J. Ligthelm M Tech Nursing (Lecturer),
Susan C.D. Wright D Tech Nursing (Professor, Head of Department) *

Adelaide Tambo School of Nursing Science, Tshwane University of Technology, Private Bag X680,
Pretoria 0001, South Africa

KEYWORDS

Amputation;
Experience;
Prosthesis

Summary Background: Amputations are done daily over the world in an attempt to save a person's life, treat a disease symptomatically or to improve the functionality of a person. Amputation causes disfigurement, a mutilated body image and physical disability with multiple aspects that the person has to deal with.

Objectives: This qualitative phenomenological study was designed to explore the lived experience of individuals with an amputation of an upper limb to provide an evidence base to support nursing interventions.

Methods: A sample of eight participants with amputation of an upper limb, living in the southern sub-district of Tshwane, Gauteng, South Africa, took part in a semi-structured interview. One open-ended central question was used to focus the interview: "Please tell me about your lived experience after losing your arm through an upper limb amputation". Data were analysed using content analysis with open coding. Seven themes were identified from the data.

Results: The themes emerging from the interviews were: Initial reaction post amputation, support from immediate family, support facilitated adaptation and independence, amputation had financial implications, external response to disability, recurrent physical problems and acceptance is a process. Data have shown that effective communication between multidisciplinary team members; discharge information and ongoing support on an outpatient basis are needed to assist with the adaptation process of the individual to amputation.

Discussion: Individuals with an amputation of an upper limb need an effective multidisciplinary approach to care, clear discharge information and ongoing support on an outpatient basis to accept amputation of an upper limb effectively.

© 2013 Elsevier Ltd. All rights reserved.

* Corresponding author. Tel.: +27 12 382 4953; fax: +27 12 382 5033.

E-mail addresses: ligthelmz@tut.ac.za (E.J. Ligthelm), wrightscd@tut.ac.za (S.C.D. Wright).

Editor's comments

It is difficult for the practitioner to understand fully the true depth of impact the loss of an upper limb can have on the life of an amputee. This interesting and important qualitative study helps to illuminate some of this devastating experience so that care and support can be tailored to consider these issues.

JS-T

Introduction

Amputation is defined as the partial or total removal of a limb, or part of a limb with the aim of salvaging the life of the individual or improving function in the remaining part of the limb (Lemone & Burke, 2004). Amputation is performed as a life-saving procedure or when an individual is unwilling to endure further long limb salvage procedures.

Upper limb amputations are mainly due to trauma. Approximately 150 000 amputations are performed in the United States every year, of which upper limb amputations account for 10% (Maher et al., 2002). In South Africa during 2002, 231 arm/leg amputations relating to motor vehicle trauma were performed, of which 30 were upper limb amputations (Herbst, 2002).

Irrespective of the cause of the amputation, the individual needs time to grieve and become psychologically and physically accustomed to an altered body image and differences in functionality.

According to Saradjian et al. (2008) the upper limbs are important in the fulfilling of activities of daily living and of great importance in expressing feelings, non-verbal communication and showing affection such as hugging or touching. A dearth of literature is available regarding experiences of the person who has lost an upper limb with the accompanying restriction of functionality, non-verbal communication and showing affection. To compound the situation, the literature available is not context specific for the South African population.

Objective of the study

The objective of the study was to explore the lived experience of persons with an upper limb amputation living in Tshwane, South Africa.

Research problem

In order for health care providers and families to support and formulate appropriate interventions,

it is crucial to understand the lived experience of persons with an upper limb amputation.

The research question for the study was therefore: What is the lived experience of persons, living in Tshwane, with an upper limb amputation from a physical and psychosocial perspective?

Purpose of the study

The purpose of this study was to provide an evidence base for supportive interventions through exploring the lived experience of persons in Tshwane with an upper limb amputation from a physical and psychosocial perspective.

Research methods and design

Context

The research was contextual; being conducted within a specific area and considering the concerns unique to the people in Tshwane, Gauteng Province, South Africa. The population is approximately 2 200 000 (City of Tshwane Metropolitan Municipality, 2006), but statistics regarding the number of individuals living with an amputation of the upper limb in the City of Tshwane are not available.

Design

The design was exploratory, contextual and qualitative phenomenological, as the researcher was interested in human behaviour – the lived experience of persons living with an amputation of an upper limb (Brink, 2006). Burns and Grove (2001) define contextual research as a study conducted within a specific area and considering the concerns unique to the people of that area. Fouché and de Vos (2005) describe qualitative designs as those used to describe or assist the researcher to understand human experiences by making use of an adaptable approach to the problem.

Download English Version:

<https://daneshyari.com/en/article/2653264>

Download Persian Version:

<https://daneshyari.com/article/2653264>

[Daneshyari.com](https://daneshyari.com)