

The Duration of Self-Selected Music Needed to Reduce Preoperative Anxiety

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Purpose: Preoperative anxiety affects patients both physically and psychologically. It may also influence the patient's perioperative experience and result in reduced patient satisfaction with care and potentially delayed recovery. Previous research indicates that patients who listen to music in the perioperative setting experience less anxiety than patients who do not listen to music. Research does not address the duration of music required to effectively reduce anxiety in this population. Design: A randomized control trial was used. Methods: Two intervention groups (15-minute music and 30-minute music) and one control group (no music) were compared. Findings: Patients (n = 133) demonstrated less anxiety after listening to either 15 or 30 minutes of music (P < .0001). Patients (n = 47) who listened to 15 minutes of music demonstrated less anxiety than those who did not listen to music (P = .005), whereas patients (n = 41) who listened to 30 minutes of music demonstrated less anxiety than those who did not listen to music (P < .001). Conclusions: Listening to as little as 15 minutes of music preoperatively is an effective method to reduce anxiety in patients who are about to have surgery.

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EIGHTY-FIVE PERCENT OF PATIENTS undergoing surgery and general anesthesia experience preoperative anxiety.^{1,2} Preoperative anxiety affects patients both physically and psychologically. Reasons for their anxiety include fear of the unknown, death, disfigurement, being aware during surgery, severe discomfort, and/or postsurgical pain, as well as the inability to return to normal life. Preoperative anxiety is under-reported because of the preconceived idea that preoperative anxiety is to be expected.² Therefore, individuals do not bother to tell anyone about it. Most patients who are awaiting surgery experience high levels of anxiety and significantly fear the surgery more than the anesthesia.³

Patients' preoperative anxiety may affect the quality of their postoperative recovery.^{4,5} The effect of anxiety on patients' postoperative outcomes vary, although researchers agree that anxiety impacts both the quality and cost of postoperative recovery.^{4,5} Patients with high preoperative anxiety experience (1) more painful postoperative recovery, resulting in an increase in the use of analgesic medications; (2) higher incidence of sleep problems; (3) longer hospital stay; and (4) prolonged period of recovery,⁶⁻⁸ all of which may result in an increased hospital costs.

Although one may use conventional pharmacologic treatment (anxiolytics) before surgery, one

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must consider the completion of other necessary care elements before administering anxiolytic medication. Such elements include things like securing consent for the procedure, maintaining patient alertness for consultation with the surgeon or anesthesia provider, in addition to the possibility of untoward side effects from the anxiolytic medications. Several nonpharmacologic therapeutic approaches are available to reduce anxiety in the preoperative setting. Among them are humorous distraction, prayer, massage, herbalism, megavitamins, acupuncture, visual imagery, and music.⁹⁻¹¹

Nurses are responsible for providing a relaxed patient environment that promotes healing. The provision of music to patients may be an effective, independent nursing intervention that fosters a calming environment, especially during anxious situations. The purpose of this research study was to recruit an adequate sample size to (1) explore the impact of self-selected music, specifically a 15-minute or 30-minute music intervention on anxiety in preoperative patients in the ambulatory care setting compared to the same population who did not listen to music; (2) explore the impact of 15-minute and 30-minute self-selected music interventions on patients' satisfaction with care provided in the perioperative setting; (3) examine the relationship between patients' responses about anxiety as measured by two different instruments, the State Trait Anxiety Inventory (STAI) and the Numerical Visual Analog Anxiety Scale (NVAAS).

Research Questions

Research questions for the study were (1) Does music therapy reduce preoperative anxiety? (2) Is a 15-minute music intervention as effective in reducing the patient's level of anxiety as a 30-minute music intervention? (3) Does music therapy promote patient satisfaction?

Background

Music, as therapy, dates back to biblical times, but the first written communication on the use of music therapy to treat medical diseases was published in the early 1800s.¹¹ Patients who were exposed to music had positive physical and emotional responses. Florence Nightingale, the founder of modern nursing, advocated the use of music as a complement to medical treatment.¹² She recognized that music is an essential element of the curative process of healing.

A music intervention is the use of music for the purpose of alleviating, minimizing, or improving medical ailments that affect the physical, emotional, and/or spiritual condition of an individual.¹¹ The role of music as a therapeutic adjunct to illness is identified as having an effect on the limbic system, which assists in the release of endorphins.¹³ Endorphins are the "feel good" substances released from the hypothalamus and pituitary gland that aid in alleviating pain, minimizing stress, reducing blood pressure, and promoting a relaxed state of well-being.¹⁴

Music may benefit individuals whose health status is compromised. The benefits of music are not limited to a specific age, gender, or race. From neonates to geriatrics, in both males and females, and in different ethnic groups, music has been shown to promote positive patient outcomes.¹⁵⁻¹⁹ Evidence suggests that music reduces pain and anxiety in neonates and pediatric patients^{15,16} and reduces behavioral distress in children who are engaged in music during medical procedures.¹⁶ Furthermore, research suggests that music improves sleep in premature infants.¹⁵

Considerable research has explored the benefits of music in the perioperative setting. The role of music as an alternative, therapeutic, intervention in the perioperative setting has been studied in relation to music's effect on anxiety, pain, and postoperative comfort.²⁰ Patients within the first 2 hours after surgery who listened to music demonstrated less postoperative pain and increased comfort.^{21,22} Despite a small sample size, women who listened to music after undergoing laparoscopic sterilization required less rescue medicine postoperatively, than those who did not listen to music,¹⁹ thus implying an opiate-sparing effect for those exposed to postoperative music.

Eight studies of preoperative patients demonstrated the anxiolytic effect of music as measured by a decrease in the STAI scores, despite limitations of small sample size and lack of Download English Version:

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