

Identification of Anxiety and Its Associated Factors among Newly Admitted Patient in a Selected Hospital, Kolkata

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ABSTRACT

Investigators conducted a study to identify the anxiety and its associated factors among newly admitted patients in order to find anxiety level and associated factors among newly admitted patients.

Investigator adopted survey approach. 80 sample of newly admitted patient were selected by event sampling technique. Interview schedule was used to collect demographic data to identify areas of anxiety. Anxiety was assessed by modified hospital anxiety and depression scale. Study findings showed that 38.75% patients were having mild anxiety, 12.5% having moderate anxiety. The study also showed that male (32.5%) were having more anxiety than female (20%). It also showed that patient expressed anxiety mostly due to because of illness (88.75%) and 82.5% patients showed anxiety because of worrying about family members. Study findings also showed that sex, worry about family member, not getting explanation during procedure and away from family member were associated factors of anxiety of newly admitted patient.

The study helps in improving knowledge of care givers regarding areas of anxiety of the newly admitted patients and also improving the existing practices of care givers.

Further similar studies can be conducted on large sample, among children below 18 years of age, among the patients admitted for having critical surgery, among re-admitted patients within 7 days of discharge from hospital.

Key words: Anxiety, areas of anxiety.

INTRODUCTION

According to Cattle anxiety is seen to stimulate when the individual anticipated a situation when his drive may be frustrated. [1]

Anxiety is classified into panic disorder and generalized anxiety disorder. As a continuum anxiety can vary from mild to panic i.e. mild (+), moderate (++) , severe (+++) and panic (++++). [2]

Anxiety results restlessness, fearful experiences, poor concentration, negative thought, increase sensitivity to noise, insomnia etc.

Most of the persons experience a variety of anxiety during hospital admission. There are various reasons for experiencing anxiety and also many methods which have been used by caregiver to reduce the feeling of anxiety

Walter conducted a research on first time admitted patient to assess cause of anxiety and the results shows that some patient expressed their anxiety regarding family and properties which they left, disturbances in their body image, hospital rules and regulation and their expected contribution regarding their stay and various procedure done on them [3]

According to Alison Pooler and Roger Breech, anxiety causes increased length of stay and greater risk of mortality among newly admitted patients.^[4]

Sociological problems in chronic hospitals are discussed by Lewis and Coser emphasizes the various ways in which a person becomes a patient. The patient is lifted out of a new complex society and is placed in a new social order which is vastly different. Coser point out that loss of face, abandonment and anticipation of physical pain often merge into diffuse anxiety.^[5]

A research study conducted by Bhandarkar PN, MohdShaff for assessment of anxiety among patient admitted in tertiary care hospital, Karimnagar among 353 patient .They used hospital anxiety and depression scale (HADS) to collect data out of total 353 study subjects. Anxiety was found in 34.7% of the patient was almost equal in both male and female patient prevalence of anxiety was significantly more in patients who were belongings to lower class than middle and upper class.^[6]

A research study on patient anxiety on admission to the hospital by Barbara Lane Francin who investigate the problem of anxiety experienced by newly admitted patient and to develop techniques of measuring the effectiveness of nursing care in general hospital. A cattles IPAT anxiety questionnaire study was implemented within 48hours after admission and found that patient pose anxiety after admission and found that patient posea hurrying problem for the ward staff. Patient anxiety level on the first day of admission is 30.6%. Effective communication pattern of the staff nurse help to reduce the anxiety of the patient.According to Alison Pooler and Roger Breech, anxiety causes increased length of stay and greater risk of mortality among newly admitted patients.^[4]

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different. Coser point out that loss of face, abandonment and anticipation of physical pain often merge into diffuse anxiety.^[5]

In present setting no such type of research has been conducted to know the areas of anxiety, and its associated factors. As management of anxiety in newly admitted patient is very important in reducing the level of anxiety, the aim of the present study is to identify anxiety and its associated factors and develop a clinical guideline.

MATERIALS & METHODS

Descriptive survey approach was selected for the present study to identify the level of anxiety and its associated factors among newly admitted patient. Pilot and final study was conducted at Rabindranath Tagore International Institute of cardiac Sciences. 80 samples were selected by event sampling technique.

Data were collected through interview schedule. Demographic information and areas of anxiety were collected though self prepared validated reliable tool which consisted of section A 14 items and section B 13 items. Areas of anxiety refers to events related to hospitalization, patient-staff relationship, ward environment, others difficulties arising out of disease which were assessed by interview schedule.

Anxiety is the unexplained discomfort which is experienced by patient on the first day of admission which was assessed by Modified Hospital Anxiety Depression rating scale. Permission was taken to utilize this standardized tool. This standardized tool was tested for internal consistency and 'r' value was .72.

Ethical permission was obtained from Ethics committee. Informed consent was taken from patient. Administrative permission was taken from hospital authority. Anonymity and confidentiality were assured.

DATA ANALYSIS

Demographic data and anxiety level were analyzed with the help of frequency

and percentage. Areas of anxiety were done by rank order. Chi square was done to find

out the associated factors of anxiety of newly admitted patient.

RESULT

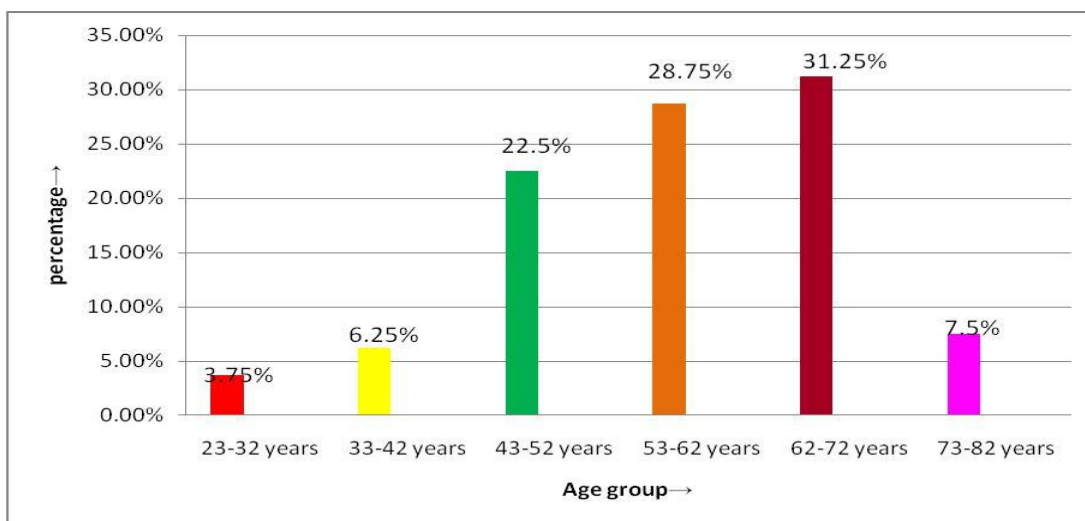


Fig 1: Percentage distribution of newly admitted patients according to age.

Data depicted in fig1 shows that majority of patients i.e. 25(31.25% out of 80 patients belong to the 63-72 years.

visit and previous hospital admission respectively. Table also showed only 48% patients were having health policy.

Table-1 Frequency and percentage distribution of newly admitted patient in terms of sex, resident, education, occupation.

Sl.No	Areas	Frequency	Percentage
1	Sex		
	Male	51	64
	Female	29	36
2	Resident		
	Rural	17	21
	Urban	63	79
3	Education		
	No formal Education	5	6.65
	Upto class IX	13	16.25
	Madhyamik	11	13.75
	HS	10	12.5
	Graduate and above	41	51.25
4	Occupation		
	Service	16	20
	Business	23	28.75
	Unemployed	38	47.5
	Others	3	3.75

Table 2: frequency and percentage distribution of newly admitted patient in terms of marital status, any addiction, h/o OPD visit, previous hospitalization and presence of health policy.

Sl.No	Areas	Frequency	Percentage
1	Marital status		
	Married	73	91
	Unmarried	3	4
	Widow/widower	4	5
2	Any h/o addiction (yes)	63	79
3	Any h/o OPD visit	73	91
4	Previous h/o hospitalization	54	67
5	Presence of health policy	38	48

Table 1 showed that maximum patients were male i.e. 64% and most of the patient (79%) were from urban community. It also showed 51.25% patients were having education graduate and above.

Table 2 showed that maximum patients were married i.e. 91%. It also showed that 79% patient having the history of addiction. Data depicted that 91% and 67% patients were having history of OPD

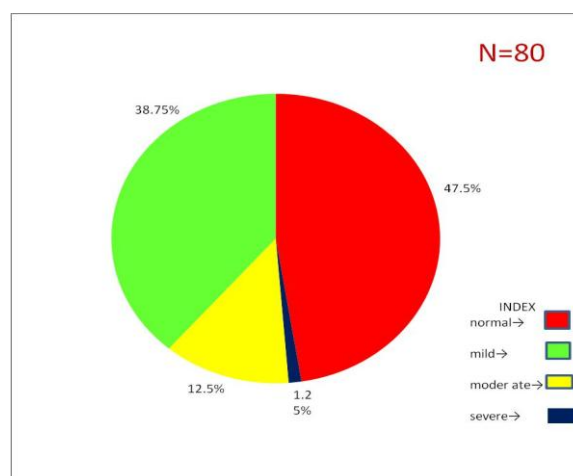


Fig 2: Shows level of anxiety among newly admitted patient

The data reveals in fig 2 shows that 38.75% patients having mild anxiety where as 1.2% patients having severe anxiety.

Rank order	Areas of anxiety	Frequency
1	Because of illness	71
2	Worry about family members	66
3	Sudden hospitalization	54
4	Away from family members	50
5	Not being told about diagnosis	36
6	Not knowing about the illness	35
7	Staying in close environment	32
8	Not understand medical term used by staff	18
9	Seriously ill patient beside you	16
10	Thinking about losing job or Income	14
11	Not fulfilling need in time	13
12	Not getting explanation during procedure	10
13	Any disturbance by the other patients and surroundings	9

The data represented in table 4 shows that according to rank order maximum patients having anxiety due to because of illness (71) where as minimum patients having anxiety due to any disturbances by the other patients and surroundings(9).

Table no - 4 Matrix of events related to anxiety and level of anxiety

Areas of Anxiety	Level of Anxiety		
	Mild	Moderate	Severe
Because of illness	26	10	1
Worry about family members	24	9	
Away from family members	19	9	1
Sudden hospitalization	19	7	1
Staying in close environment	14	6	
Not being told about diagnosis	14	4	
Not getting explanation during procedure	11		
Not knowing about the illness	11	5	
Seriously ill patient beside	11	2	1
Not understand medical term used by staff	7	2	
Not fulfilling need in time	6	4	
Any disturbance by the other patient and surroundings	5	2	
Thinking about losing job or income	4		

Table 4 shows that according to matrix maximum patients having mild, moderate, and severe anxiety due to because of illness.

The data present in table 5 indicates that the association between sex and level of anxiety.

Table 5: Chi square value shows that association between demographic characteristics and level of anxiety

Sl no.	Selected factors	χ^2	df	α value	Table Value
1	Age	0.438636	5	0.05	2.57
2	Sex	28.58 *	1	0.05	12.71
3	Resident	0.00167	1	0.05	12.71
4	Education	0.15	4	0.05	2.78
5	Occupation	1.02	3	0.05	3.18
6	Per capita income	1.21	3	0.05	3.18
7	Position in the family	2.56	1	0.05	12.71
8	Marital status	9.96	3	0.05	12.71
9	Addiction	0.09	1	0.05	12.71
10	OPD checkup before admission	1.35	1	0.05	12.71
11	First time admission in this hospital	2.46	1	0.05	2.57
12	Previous admission history in any hospital	0.708	1	0.05	2.57
13	Having any health policy	0.57	1	0.05	2.57

Table 6: Chi square value shows the association between level of anxiety and

Sl.no	Areas of anxiety	X^2	df	α value	Table Value
1	Away from family Members	5.54*		0.05	3.84
2	Because of illness	1.99	1	0.05	3.84
3	Not being told about diagnosis	0.85	1	0.05	3.84
4	Not getting explanation during procedure	7.63*	1	0.05	3.84
5	Not knowing about the illness	1.28	1	0.05	3.84
6	Not understand medical term used by staff	0.55	1	0.05	3.84
7	Not fulfilling need in time	2.08	1	0.05	3.84
8	Staying in close environment	1.52	1	0.05	3.84
9	Seriously ill patient beside you	2.87	1	0.05	3.84
10	Any disturbance by the other patients and surroundings	0.27	1	0.05	3.84
11	Thinking about losing job or income	1.54	1	0.05	3.84
12	Sudden hospitalization	3.29	1	0.05	3.84
13	Worry about family members	4.53*	1	0.05	3.84

Table 6 shows that among areas of anxiety, the level of anxiety was associated with away from family members, Not getting explanation during procedure, Worry about family members

DISCUSSION

In the present study among newly admitted patients 38.75% were having mild anxiety where male (32,5%) having more anxiety than female (20%).

Bhandarkar PN, Mohd. Shafee conducted a research on assessment of anxiety among patient admitted in tertiary care hospital, among 353 patients. They used hospital anxiety and depression scale to collect data. The result shows that 34.7% patient having anxiety which is equal in both male and female patient.

Present study shows that patient expressed anxiety mostly due to because of illness (88.75%), not understanding the medical terms used by staff (22.5%), staying in closed environment (40%), worrying about family members (82.5%).

Walter (1994) conducted a research on first time admitted patient to assess cause of anxiety and the results shows that some patient expressed their anxiety regarding family and properties which they left, disturbances in their body image, hospital rules and regulation and various procedure done on them.

CONCLUSION

Our study has been conducted to identify the level of Anxiety and its associated factors among newly admitted patients. The following conclusions are drawn based on findings of the study.

38.75% patients having mild anxiety and 12.5% patients having moderate anxiety on the day of admission.

The anxiety is associated only with sex among the demographic characteristics and also because of illness, away from family members, not getting explanation during procedure and worrying about family members among the areas of anxiety.

Conflict of interest: None

Sponsored by: self

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