



A Study of Patient's Perception about the role of Anesthesia and Anesthesiologist

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Abstract

Background: To assess the perception about anesthesia and role of anesthesiologists among lay communities, as anaesthesiology has been considered as behind the scene specialty and image of anesthesiologist has always been problem.

Design: Self-structured questionnaire evaluation

Methods: This prospective questionnaire based study was conducted in SKIMS-Soura among 150 randomly selected patients, admitted for elective surgeries.

Results: Mean age was 25.33 years and majority of them were females. 81% of respondents knew that anesthesiologist is a doctor and 49.5% knew that anaesthesiology is a different specialty; there was significant association between education level of respondents and this response. Of the respondents 77% felt that that anesthesiologist was easy to talk and pleasant by the bedside. Only 37.3% of respondents considered some role of anesthetist in postoperative period. 31% of respondents only were satisfied with explanation of anesthesiologists regarding method of procedure, options and possible complications.

Conclusion: Patients still have inadequate knowledge regarding anesthesia services and role of anesthesiologists.

Introduction

Anesthesiology is one of the youngest branches of medical science that has made immense development. Role of anesthesiologist has extended not only inside but also outside traditional operating room settings.

Anesthesiologists and anesthesia has always been considered as behind the scene specialty. The image and status of anesthesiologist in the eyes of medical and lay communities has always been problem¹. The widespread role of anesthesiologist

in the short term care, as well as in pain relief, is not known to the public, and they have very limited knowledge about the specialty². Although there is tremendous health care awareness, still there is hardly any knowledge of the medical services and practices relating to operating room and to anesthetic management. Although it is not known whether it will be of any further benefit to make the public much more aware of specialty, surveys have been conducted throughout the world to assess the public perception of

anesthesiologist³⁻⁷. With this background, we conducted a study in SKIMS in an attempt to discover the knowledge of patients regarding role of anesthesia and anesthesiologist.

Methods

The study was conducted in SKIMS after obtaining approval from hospital ethical committee. Study was purely oral in nature. It was structural interview based on self-structured questionnaire. Interviews were carried out by team of anesthesiologists during preoperative visit. 150 patients scheduled for various elective surgeries were included randomly in the study. Patients with age less than 15 years, severe medical illness, inability to speak, brain damaged, refusal to participate, were excluded from the study. Questionnaire had questions in total, inquiring about patient's knowledge of role, presence of anesthesiologist inside theatre, concerns and complication setc.

Results

1. **Demographic Profile:** The mean age of the respondents was 25.33 years and majority of respondents were females (M: F – 54:96).

We distributed respondents based on educational level, and majority of patients belonged to primary and high school level. There was significant relationship between the level of education and the knowledge of patients regarding that anesthesia is a different specialty.

Education level	Number (%)	Percentage who knew anesthesia is different specialty
None	36 (24%)	40%
Primary	41(27.3%)	56%
Secondary	51(34%)	65%
Graduation	16(10.6%)	81%
University	6(4%)	94%

2. Role of anesthesiologist: 81.3% of respondents knew that anesthesiologist is a doctor and 49.4% of respondents had

knowledge that anesthesiology is a different specialty.

3. Work of anesthesiologist in OR: 66.3% OF respondents knew that anesthesiologist has a definite role in the operating room, however, most of them thought that the role was limited to administering gases and monitoring patients intraoperatively. Only 11.3% respondents has added information about the role of anesthesiologist.
4. Role of anesthesiologist in postoperative period: Out of the respondents who knew anesthesiologist has definite role, only 37.3% of respondents had knowledge that anesthesiologist are involved in immediate post-operative care and complications, and 19.2% knew that anesthesiologist manage pain and rest did not know anything.
5. Knowledge about different kinds of anesthesia: Most of respondents (71.2%) knew that anesthetic techniques consisted of general anesthesia only, 11.3% had idea also about regional anesthesia techniques and rest of respondents did not have any idea about techniques of anesthesia.
6. Knowledge about regional anesthesia: Among the respondents, who knew about regional anesthetic techniques, 26% had knowledge about spinal anesthesia and 41.7% of respondents knew about local infiltration, and rest had no idea.
7. Post-operative complications: about 36% of respondents had some knowledge about anesthetic complications and rest majority of patients did not have any knowledge about complications of anesthesia.
8. Attitude of anesthesiologist: when asked about the bed side manner of anesthesiologist, about 77% of respondents revealed pleasant bedside manner of anesthesiologist. 31% of respondents were satisfied by the explanation and discussion by anesthesiologists about methods, options to put on sleep and about possible side effects of drugs and possible complications.

Discussion

Regarding perception of patients about anesthesiologists and anesthesiology, various reports have been published previously and overall, there has been little change in the knowledge among general population regarding the specialty⁸. The reason for this may be the less contact of anesthesiologist with conscious patient than other specialists⁹. The modern medical era requires expertise of anesthesiologist than any other medical specialty, acquiring role of "perioperative physician".

In the present study, around 80% of respondents knew that anesthesiologist was a doctor compared with 67% and 65% in two surveys done in UK in 1978 and 1994, respectively^{10,11}. This might be due to introduction of pre-anesthetic clinics, routine preoperative and postoperative visits combined with increasing awareness among patients.

It is heartening to note that more than 70% of respondents felt that anesthesiologist and pleasant manners and easy to talk. Even a previous study has found that attire of anesthesiologist can affect perception of patient¹². Many of the respondents, however, were not satisfied with the explanation from anesthesiologist regarding the procedure of anesthesia, possible side effects and complications. Previous studies have also found that anesthesiologists failed to explain the details of anesthesia to the patients¹³. The possible explanation for this may be that many anesthesiologists did not want to disclose every detail for fear of increasing patient anxiety, and many patients accept the paternalistic attitude of physicians^{14,15}.

The questions regarding about role of anesthesiologist has mixed response. Many of the respondents knew that anesthesiology is a different specialty, however, in present study, significantly limited number of respondents knew about spectrum of services provided by anesthesiologists, different techniques and possible side effects and complications of

anesthesia. This is in concordance with previous studies¹⁶.

In our study the knowledge of patients about anesthesiology and anesthesiologist correlated well with level of academic qualification. Previous studies have also found that patients with better academic qualification had better knowledge of anesthesia and anesthesiologist.¹⁷

Broadly our study revealed limited knowledge of anesthesia and anesthesiologist as a specialty among general masses. The matter of debate is that whether public image of anesthesiologist is really important. Some authors have opinion that anesthesiologists should not be concerned to widespread public ignorance of specialty¹⁸. Other authors have argued that increasing appreciation by public will increase the ability to influence the provision of resources for the specialty¹⁹. The lack of recognition can affect the self-esteem of anesthesiologist and amount of effort required to achieve expertise²⁰. There should be some means to disseminate information regarding the widespread role of anesthesiologist inside and outside operating rooms, including pain clinics, emergency medicine, ICU.

In summary our study reiterates poor knowledge of specialty among general population and highlights the need for exposure of the specialty to patients, making use of media and internet to improve image in the eyes of the public.

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