

The Perioperative Experience During COVID-19: Exploring Patient Pandemic Anxiety

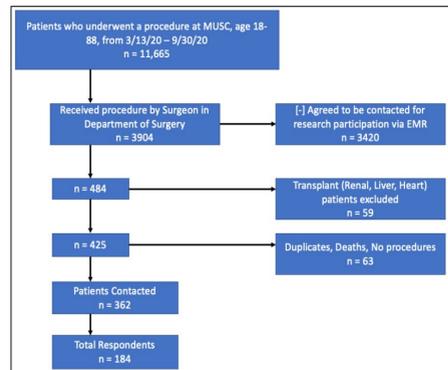
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BACKGROUND

- Access to elective surgical procedures during the initial COVID-19 pandemic was significantly reduced. We anticipated that these changes could cause reduced patient satisfaction, and negatively impact quality of life and health status.
- The delivery of healthcare was significantly altered during the initial COVID-19 pandemic response. Limited visitor visitation, limited provider interactions, and burden of using telehealth may contribute to patient anxiety.

METHODS

- We sought to quantify and qualify the mental health impact of COVID-19 on surgical patients
- We hypothesized that increased anxiety would be associated with increased demographic risk of severe COVID-19 infection



- All patients undergoing non-emergent surgery March 2020 – Sept 2020 were screened to participate in online survey

Figure 1. Patient screening methodology

RESULTS

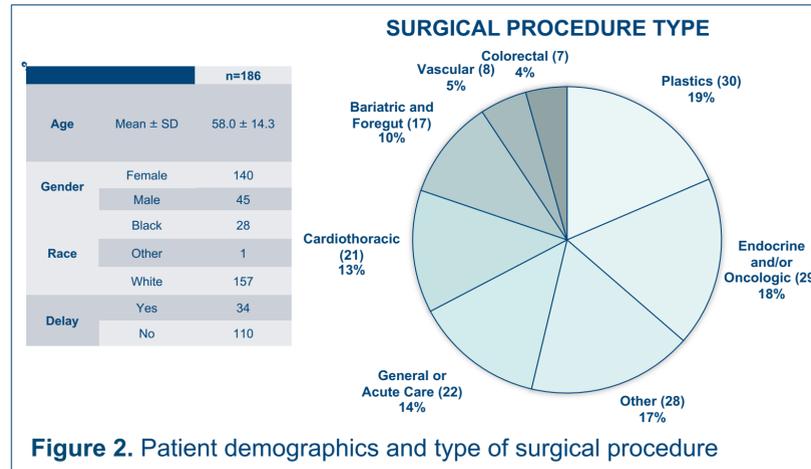


Figure 2. Patient demographics and type of surgical procedure

- Patients indicated their anxiety during the perioperative period on a 5-point Likert Scale and completed an abbreviated RAND-36 questionnaire
- 186 patients completed the survey, 75.3% were female and 84.4% were white

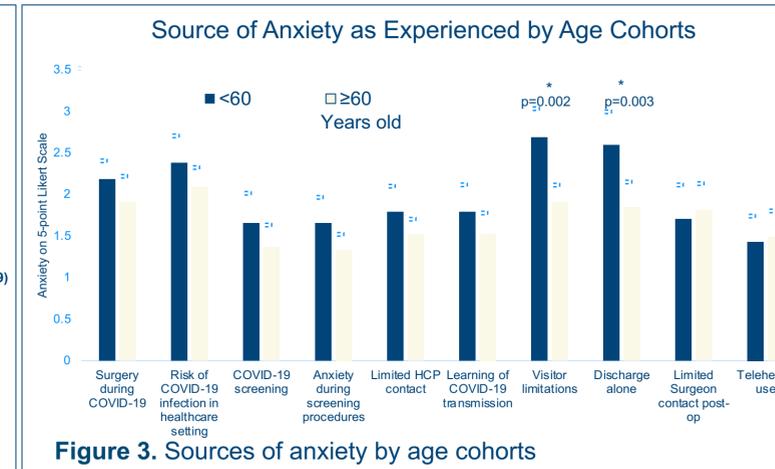


Figure 3. Sources of anxiety by age cohorts

- There was significantly higher anxiety in younger subjects related to visitor limitations and undergoing discharge process alone
- There was a trend in higher self-reported anxiety levels in AA patients. Female patients rated more anxiety undergoing discharge process alone (p=0.056)

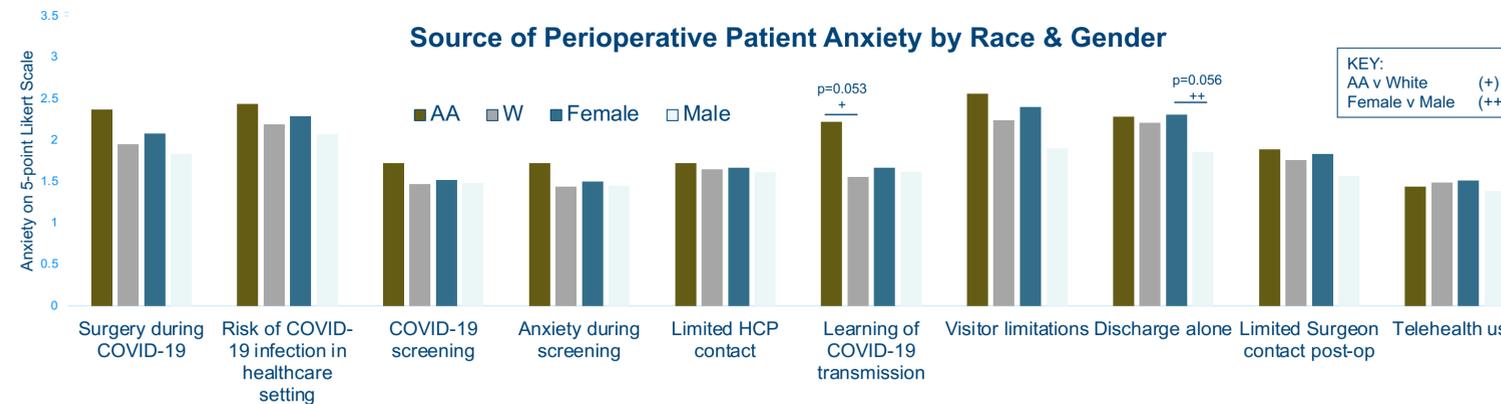


Figure 4. Sources of anxiety by sex and race

CONCLUSIONS

- Our data suggest population differences exist and that there is higher self-reported anxiety in patients <60 years of age
- African American respondents showed a trend towards higher anxiety regarding learning about COVID-19 and a greater willingness to delay surgery
- Clear communication and setting expectations can aid transition to alternative healthcare delivery platforms
 - Supported by low anxiety reported by all groups regarding telehealth transition and use
 - Timely resumption of elective cases
- Patients demonstrated resiliency and acceptance of changes to healthcare delivery
- These results can inform healthcare delivery during future disruptions such as pandemics, natural disasters, or mass casualty events
- This data encourages the creation of targeted inpatient social support teams in future case alterations
- Questions? Contact quinnkr@musc.edu