

Visualizing a safe place reduces procedural pain

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Visualising a safe place reduces operative pain, according to research presented today at EuroHeartCare 2014. Nurses guided patients into a trance and found it helped patients cope with pain and anxiety during ablation of atrial fibrillation (AF).

EuroHeartCare is the official annual meeting of the Council on Cardiovascular Nursing and Allied Professions (CCNAP) of the European Society of Cardiology (ESC). This year's meeting is organised jointly with the Norwegian Society of Cardiovascular Nurses. It is held 4-5 April in Stavanger, Norway.

Marianne Wetendorff Nørgaard, lead author and a clinical nurse specialist at Copenhagen University Hospital, Rigshospitalet, Denmark, said: "We ask patients to describe a comfortable safe place they want to be during the procedure. People have chosen a summer house, the beach, or the woods. During the procedure the nurse asks the patient to focus on their safe place and how it looks, smells and sounds."

She added: "When the patient expresses pain, the nurse helps the patient visualise an alternative scenario to the invasive procedure. For example, if the patient says 'my chest is burning', the nurse may say 'imagine that it's a cold day and there is ice on your chest'. Patients tell us that being in this trance like state with safe images makes the procedure a pleasant experience and it feels shorter."

Mrs Nørgaard continued: "Visualisation has the potential to reduce pain



and anxiety in numerous procedures. Many patients could even avoid having general anaesthesia, which carries risks."

In the first clinical study of <u>visualisation</u> during ablation of AF, the researchers compared outcomes between 76 patients who used visualisation and 71 patients who received conventional care. All patients were awake during the 2-4 hour treatment and received local anaesthesia plus painkillers when they signalled the nurse using a push button. During the procedure patients scored their pain and anxiety levels every 15 minutes and after specific painful experiences.

The researchers found that patients who used visualisation during the procedure were in pain less often and asked for fewer painkillers. When the patients <u>perceived pain</u>, there were no differences between groups in the perception of <u>pain intensity</u> and no differences in anxiety levels.

Mrs Nørgaard said: "Patients who used visualisation expressed pain fewer numbers of times and asked for less painkillers. Their perceived pain intensity may have been the same because we interrupted their visualisation at regular intervals to record pain and <u>anxiety levels</u>. If they had been allowed to stay in their trance like state during the entire procedure, their perceived pain intensity may have also reduced."

The current investigation explored in more detail the experiences of 14 patients who had used visualisation during the clinical study. Qualitative interviews were conducted and subjected to inductive content analysis.

Mrs Nørgaard said: "Patients told us that visualising their own safe place during the procedure made them feel involved and helped them cope with pain and anxiety. Before the intervention patients were anxious and afraid of being on the operating table for a long time but afterwards they said visualisation had made it seem short and that it was a positive and pleasant experience."



She added: "We know that patients want to be in control when they come into hospital and into the operating room. But patients who used visualisation during their <u>invasive procedure</u> said they felt it allowed them to let go of the control because they felt secure and had something else to focus on."

Mrs Nørgaard continued: "Some countries, for example the US and in southern Europe, use general anaesthesia during ablation of AF which can be risky during such a long procedure and is expensive. Some of these patients could use <u>local anaesthesia</u> and visualisation instead, plus painkillers as needed. Extra nurses are not needed in the operating room, you just need to train the ones who are already there."

Mrs Nørgaard concluded: "Patients go through painful procedures every day in different departments of the hospital. Visualisation has the potential to reduce the amount of <u>pain</u> patients experience during numerous invasive procedures. We offer visualisation to all our AF ablation <u>patients</u> and those who return for another <u>procedure</u> request it. We also use visualisation during other cardiac procedures because it works so well."

More information: 1Nørgaard MW, Werner A, Abrahamsen R, Larsen B, Darmer MR, Pedersen PU. Visualization and attentive behavior for pain reduction during radiofrequency ablation of atrial fibrillation. Pacing Clin Electrophysiol. 2013;36(2):203-213.

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