

Efficiency of Nursing management Toward Pain

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الملخص:

الهدف: تهدف هذه الدراسة إلى معرفة كفاءة العناية التمريضية المقدمة للمرضى الذين يعانون من الألم، ولمعرفة وجود علاقة بين العناية التمريضية المقدمة للمريض الذي يعاني الألم والمعلومات الديموغرافية عن الممرضين والمرمضات. **إجراءات البحث:** دراسة وصفية كمية أجريت في مستشفيات محافظة النجف الاشراف : مدينة الصدر الطبية، مستشفى الحكيم، مستشفى الزهراء، ومستشفى الفرات للفترة من 2011/11/11-2012/4/28. تم جمع عينة عشوائية مؤلفة من 83 ممرض وممرضة. تم وضع استمارة استبيانها لهذا الغرض مؤلفة من جزئين الأول يحتوي على المعلومات الديموغرافية ومؤلفة من العمر والجنس والمستوى العلمي وسنين الخدمة والمستشفى التي يعمل بها . ومكان العمل في المستشفى. أما الجزء الثاني فيحتوي على (16) سؤال تخص العناية التمريضية للمرضى الذين يعانون من الألم تم جمع المعلومات بطريقة المقابلة الشخصية للممرضين والمرمضات. **النتائج:** أظهرت النتائج وجود علاقة قوية بين مستوى العناية التمريضية والجنس اما باقي العلاقات فكانت ضعيفة. وإن غالبية الأشخاص ضمن العينة لديهم مستوى متوسط من المعرفة بالعناية التمريضية. **التوصيات:** تحضير برنامج تثقيفي للممرضين والمرمضات الذين لديهم خبرة قليلة في تقييم والعناية بالألم. وبزيادة عدد الساعات الدراسية العملية والنظرية في المناهج اللازمة لتدريب العناية بالألم لطلبة كليات التمريض. وتوفير كتيبات ونشرات ومطبوعات التي تساعد على تزويد المريض والممرضة بالمعلومات اللازمة لهذا الغرض **مفردات البحث:** كفاءة، العناية التمريضية، الألم

Abstract

Objectives: The study aimed to identify the efficiency of nursing management toward patients' pain. And to find out the association between the nursing knowledge concerning pain management and nurses characteristics. **Methodology:** A descriptive study is carried out at AL-Najaf teaching hospitals which include, AL-sadder medical city, AL-Hakeem hospital, AL-Zahra hospital, AL-Forat hospital, from the period of 11/11 /2011 to 28/3/2012. A probably (random sample) of (83) nurses those who are work in the above hospitals. The data are collected through the use constructed questionnaire, which consists of two parts, demographic characteristic sheet that consists of (6) items, which included gender, age, level of education, years of experience and hospital, place of work in the hospital. And the second part of the questionnaire was consists of (16) question concerning nursing management regarding pain management and by means of direct interview technique with nurses who were individually interviewed in the hospitals. **Results:** The finding of the present study indicate that a significant association between nursing knowledge concerning pain management and gender and the result shows no other association occurs between the nursing management and other nursing characteristic in this results. And the majority of nurses have moderate level in knowledge about pain management. **Recommendation:** Conduct education programs for nurses who have no experience in assessing and managing of pain and to increase the teaching hours about pain management in the curriculum in nursing colleges and institutes including both theory and practice. Also to Provide posters, pamphlets, and booklets in the hospitals to improve their knowledge.

Keywords: efficiency, nursing management, pain

INTRODUCTION

Pain is such an important indicator of health, its assessment has been called the “fifth vital sign,” joining temperature, pulse, respiration, and blood pressure (Kipkorir, 2011). Pain is one of the most widely experienced and expressed phenomena in nursing practice only individuals experiencing pain can fully describe it (Chandler, et al, 2002).

Millions of patients suffer from pain caused by diseases, surgery, or trauma on an everyday basis (Apolone, et al, 2012). Practically all hospitalized patient experience pain at some point during their stay. The presence of pain can

negatively affect the patient and family; it has significant clinical effect on recovery, mortality, and quality of life and inhibits feelings, emotions, thinking and reactions. Social interactions and work are restricted to the extent that mobility and physiological functions are inhibited. (Eghbali, et. al, 2008).

Acute pain can occur after traumas, operations, or lesions of a nerve, and pain is often recurrent and its relatively brief and diminished as healing occurs. Chronic pain occurs continuously for at least 3 months and is usually subdivided into either malignant or non-malignant pain, chronic non-malignant pain may be either nociceptive or neuropathic. A person with chronic pain may have exacerbation of acute pain known as break through pain (Pasero, and McCaffery, 2005).

Kessar, (2000) suggested that nurses must continuously stay abreast with current treatment guidelines if they are to provide competent care and improve patient outcomes. Pain management extends beyond pain relief, encompassing the patient's quality of life, ability to work productively, to enjoy recreation, to function normally in the family and society. The nurse must be ready to Advocate and able to convince others of the patient's pain and need for intervention.

(Rawal, and Langford, 2007) emphasized that a qualified nurses who practice pain control and palliative care, now have the opportunity to take on extended clinical responsibilities by using a scientific knowledge to serve as a case manager, a coordinator of care, and a client advocate to facilitate a self-management plan for the person with pain that emphasizes biopsychosocial factors. That promote compliance and to acquire more effective coping mechanisms that minimize the negative effects of pain. Therefore, Nursing attitude in management of pain is a challenging task requiring up-to-date knowledge, skilled interventions and attitudes that convey trust, care and an honest belief in what the patient says (Wilkes and Carr, 2002). The study aims are to identify the efficiency of nursing management toward patients' pain. and to find out the association between the nursing practices and demographical data.

METHODOLOGY

The Sample of the study:

Eighty three (83) nurses were randomly selected from four Al hospitals in Al-Najaf City; The data was collected from AL-Sadder Medical City, AL-Zahra hospital, AL-Hakeem hospital, AL-Forat hospital.

Data Collection:

A descriptive study was developed by using a constructed questionnaire to find out the quality of nurses care in managing patients' pain. The data was a check list questionnaire which was designed by researchers. For validity, the questionnaire was sent to three of the experts in nursing field. The final questionnaire was designed after applying the suggestions of the experts to it. The researchers design a questionnaire for gathering the data. A questionnaire was prepared for this purpose consists of two parts:

- Demographical data which includes age, gender, educational level, years of experience, hospital and place of work in the hospital
- A check list which consist of (16) questions about the nursing knowledge concerning pain management

The research was conducted from the period (11/11/2011- 28/4/2012) to gather the information from the nurses who work in these hospitals

Data analysis:

After gathering the data, the information was statistically analyzed using percentage and frequency and P. value by using of SPSS version 16.0.

RESULT

Table 1: Characteristics of the Study Sample

Variables		Frequency	Percentage
Age	(20-28)	26	31.3%
	(29-37)	23	27.7%
	(38-46)	14	16.9%
	(47- 55)	15	18.1%
	(56- 64)	5	6%
	Total	83	100%
Gender	Female	11	13.3%
	Male	72	86.7%
	Total	83	100%
Educational level	Nursing school	38	45.8%
	Nursing institute	39	47%
	Nursing college	6	7.2%
	Total	83	100%
Years of experiences	(1-10)	40	48.2%
	(11-20)	17	20.5%
	(21-30)	26	31.3%
	Total	83	100%
Hospital	AL- Sadder	43	51.8%

	AL- Zahra	15	18.1%
	AL- Forat	8	9.6%
	AL-Hakeem	17	20.5%
	Total	83	100%
Place work in hospital	Emergencies	34	41%
	Catheterization	25	30.1%
	Cardiac unit	13	15.7%
	Neurological Unit	8	9.6%
	Fractures unit	3	3.6%
	Total	83	100%

This table indicated that the age group (20-28) was the highest among the other age groups at (31.3%). And in regard to gender, there were (86.7%) male and the remaining were female. And about (47%) of the sample graduated from Nursing Institutes, while (45.8%) graduated from nursing school. Concerning nurses' years of experience, (48.2%) of the sample have from (1-10) years of experience. More than half of the sample (51.8%) were from Al sadder hospital. Regarding their place of work in the hospital about (41%) of the sample were working in emergency room.

Table 2: The association between Level of Nurses' Management and Demographical Data

Variables		Level of Nursing Care			Total	
		Poor	Moderate	High		
Age	(20-28)	3	11	12	26	V = 10.343 df = 8 sig = 0.248
	(29-37)	1	16	6	23	
	(38-46)	2	5	7	14	
	(47- 55)	4	7	4	15	
	(56-64)	1	1	3	5	
	Total	11	40	32	83	
Gender	Female	1	6	4	11	V = 15.011 df = 2 Sig = 0.00055
	Male	10	34	28	72	
	Total	11	40	32	83	
Educational Level	Nursing school	8	21	9	38	V =11.475 df = 4
	Nursing institute	2	15	22	40	

	Nursing collage	1	4	1	6	Sig =0.022
	Total	11	40	32	83	
Years of Experience	(1-10)	5	20	15	40	V = 1.904 df =4 Sig= 0.753
	(11-20)	1	8	8	17	
	(21-30)	5	12	9	26	
	Total	11	40	32	83	
Hospital	AL- Sadder	8	21	14	43	V = 30 .606 df = 6 sig = 0.00
	AL- Zahra	0	1	14	15	
	AL- Forat	0	8	0	8	
	AL-Hakeem	3	10	4	17	
	Total	11	40	32	83	
Place work in hospital	Emergencies	8	17	9	33	V = 46.353 df = 8 sig = 0.00
	Catheterization	0	3	22	25	
	Cardiac unit	1	12	0	13	
	Neurologic unit	2	5	1	8	
	Orthopedic unit	0	3	0	3	
	Total	11	40	32	83	

This table show there was only one significant relationship between nursing knowledge concerning pain management and gender. Concerning the association between nursing knowledge concerning pain management and other demographical characteristics like age, education level, and years of experience, kinds of hospitals and place of nurses' work in hospital, there were no significant relationship.

DISCUSSION:

The result of the study shows that most of the nurses have moderate nursing knowledge concerning pain management. This may be due to the nurses who spend little time assessing the effect of pain on the patient's daily life and do not understand the importance of pain management. Nurses' knowledge and attitudes of pain management greatly affects their patient's treatment of pain. However, Nurses are answerable and liable in assuring that all the patients suffering from pain are attended to both in assessment and treatment of pain in accordance with the current evidence-based nursing practices (Pasero, and McCaffery,2005)

Nurses have a key role in effective pain management, The nurse's accurate assessment, prompt intervention, and evaluation of pain relief measures are necessary for positive patient outcomes (Anderson, et al 2006). Nurses must gather information

from as many sources as possible, especially the person in pain (Bonica, and Loeser, 2001). This investigation includes obtaining a comprehensive pain history, making observations of behaviors, performing an appropriate physical examination, and consulting with other healthcare professionals (Kipkorir, 2011). The pain management is guided by the history of the pain, its intensity, duration, aggravating and relieving conditions, and structures involved in causing the pain. A pain history is obtained from written documents and from interviews with the person in pain, family members, and other caregivers. It asks specific questions about the location, intensity, quality, and history of the pain. sometimes these questions are printed on an assessment form, with space for answers to be recorded beside each question (Pellino, 2005).

Physical examination to elicit pain information should be performed only after through history of the pain is obtained. The nurses should ask about pain, and the patient's self-report should be the primary source of assessment. (Johnson, and Kitchell, 2000).

Berman and Bare, (2004) pointed that assessment and management of pain by nurses should be carried out in a holistic manner considering the physiological effects of pain on the mind, body, spirit and social interactions. This places nurses in a unique position, nurses spend most the time with patients and therefore must be competent in pain management (Musclow, et al, 2002)

The nurse utilizes a developmentally appropriate, standardized pain assessment tool which is essential in the assessment process. For those incapable of self-reporting, standardized pain assessment tools should include behavioral observations with or without physiologic measures (Wilkes and Carr, 2002). A pain scale to rate pain should be used (Hudson ,et al, 2000). Most patient can use a numerical pain rating scale or a faces pain scale to quantify their pain, allows the patient to express their pain (Chanques, et al, 2006). One reason that patients continue to needlessly suffer from improper pain management is the lack of expertise of nurses (Erin, 2004).

The study shows that strong correlation between the gender of the nurses in the study, and level of nursing care. The confident nurses can act as patients' advocates and ensure that their pain is managed appropriately. This was emphasized by (Cronin, & Rawlings, 2004) who pointed that nurses must be willing to venture into the pain with the patient, this may be scary and the nurse must have the courage to be present and narrow the distance between her and patient by focusing on the patient and their pain.

Briggs (2003) stated that a ward nurse suggested that pain management meant giving analgesia and making the patient comfortable. Another, that pain management meant instructing patients with pain how to cope. Continuing education in intensive pain management was an effective means in improving the knowledge and attitudes of nurses (Berman, and Bare, 2004).

The comprehensive evaluation of the patient's pain including but not limited to: location, intensity, duration of the pain, aggravating and relieving factors, effects on activities of daily living, sleep pattern and psychosocial aspects of the patient's life, and effectiveness of current management strategies. Pain assessment includes the use of a standardized pain measurement tool (Briggs, 2003)

Evaluate severity of the pain including an assessment of the pain intensity and character. Appropriate diagnostic workup to determine the cause of the pain, which may include tumor markers, radiologic studies, scans etc. Re-evaluate therapy. The evaluation of pain must consider the factors and their interactions that result in the experience of pain (Chanques, 2006).

CONCLUSION

The majority of sample has moderate level in knowledge about pain management. The study indicates that significant association between nursing knowledge concerning pain management and gender.

RECOMMENDATION

1. Conduct nurses education programs to nurses who have minimum experience in assessing and managing of pain to improve their knowledge and practices about pain management.
2. Increase the teaching hours about pain management in the curriculum for the students in nursing colleges and institutes including both theory and practice
3. Providing posters, pamphlets, and booklets to improve knowledge of nurses and patients about pain management
4. Provide pain scale chart in the hospitals' wards to help the nurses in using it as a tool in assessment of the pain level for the patients

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