

Development of a Tool to Qualitatively Access Impact of Customized Patient Education Materials on Patient Satisfaction During Labor and Delivery Experience

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INTRODUCTION

- The Painless Push (www.thepainlesspush.com) is an engaging and interactive patient education website that is tailored to the New Mexican population to provide evidence-based information about pain relief options for labor and delivery.
- The website is available in English and Spanish translations.
- In review of the current literature, it was identified there is no validated tool developed to analyze satisfaction with education surrounding pain relief in labor.
- We hypothesized that having an increased knowledge base and understanding of pain relief options during labor and delivery may help patients feel more prepared for delivery, more comfortable with their various pain relief options, and overall more satisfied with the experience of childbirth.

OUR SURVEY

1)	What is your primary spoken	language?	English	Spanish	Other:	
2)	What type of delivery did yo	u have?	Vaginal	Cesarean		
3)	Did you attend childbirth cla	sses?	Yes	No		
4)	Did you know what type of p	ain control you	wanted to use	during labor?	Yes	No
5)	What type of pain control die	control did you want before you were admitted for labor? (Circle all you wanted)				
	Doula/Coaching	Hypnobirthing	3	Lamaze	Aromatherapy	/
	IV Pain Medicine	Nitrous Oxide	(Laughing Gas)	Epidural		
				•		
	Other:		,	•		
6)				labor? (Circle all that	you used)	
6)	Other:		se during your	labor? (Circle all that	you used) Aromatherapy	<i>'</i>
6)	Other: What type of pain control op	tions did you u Hypnobirthing	se during your	Lamaze		/

	Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree
I had a sense of control	1	2	3	4	5
I was able to ask questions	1	2	3	4	5
I was aware of my options	1	2	3	4	5
I was satisfied with the information provided	1	2	3	4	5

MATERIALS AND METHODS

 Using results of a systematic review evaluating patient-satisfaction measures throughout the field of Anesthesia, we developed a Likert multipoint scale to measure 10 statements to be assessed in the early post-partum period evaluating satisfaction of childbirth experience. For each question below, circle the response that best characterizes how you feel about the statement, where: 1= strongly disagree, 2=disagree, 3= neither agree or disagree, 4= agree, 5=strongly agree

	Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree
I was able to decide if I wanted pain control in labor	1	2	3	4	5
I was able to decide what types of pain control to use in labor	1	2	3	4	5
I was satisfied with my choice for pain control in labor	1	2	3	4	5
I was satisfied with my pain control during labor	1	2	3	4	5
My pain was controlled during labor	1	2	3	4	5
The pain control I received was safe for me	1	2	3	4	5
The pain control I received was safe for my baby	1	2	3	4	5

RESULTS

In a preliminary sample, website exposure did not modify epidural usage rates: epidurals were applied in 37/43 respondents in the website group and 31/37 of the baseline group (p=1.00).

Also in the preliminary sample, the website exhibited a nonsignificant tendency to increase maternal satisfaction with the pain control choice (p=0.08), level of pain control (p=0.09), and information provided (p=0.08).

Issues of patient autonomy, e.g. ability to choose pain control type, ability to ask questions, and a sense of control, did not differ between study groups (p= 0.87, 0.99, 0.65, respectively).

DISCUSSION

- While both groups expressed overall satisfaction with issues of autonomy, patients exposed to the website tended to exhibit greater satisfaction with the pain control received, and interestingly with their own choice of pain control modality to use.
- Further analysis will evaluate the website's effect in specific patient subsets, e.g. the Spanish-speaking population, those who did not attend childbirth classes, etc.

REFERENCES

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