

The Relationship of Giving Informed Consent with Anxiety Levels of Preoperative Sectio Caesarea Patients in the Surgical Room at Immanuel Hospital Bandung

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ABSTRACT

Sectio Caesarea is a medical procedure performed to assist childbirth when normal delivery is not possible due to maternal health issues or fetal conditions. This surgery can cause significant physical trauma and carries a risk of mortality, leading to psychological effects such as anxiety. Providing informed consent to preoperative Sectio Caesarea patients can reduce anxiety levels. This study aimed to determine the relationship between giving informed consent and anxiety levels in preoperative Sectio Caesarea patients in the surgical room at Immanuel Hospital Bandung. This study utilized a correlational descriptive design. The population comprised patients scheduled for a cesarean section, with a sample size of 57 respondents determined through purposive sampling. The variables examined were informed consent and anxiety levels, measured using the HARS questionnaire and an informed consent questionnaire. Data were analyzed using univariate and bivariate techniques. The results indicated that the majority of informed consent provisions for preoperative Sectio Caesarea patients were adequate (70.2%), and nearly half of the respondents (43.9%) experienced mild anxiety. The Spearman Rank statistical test showed a p-value of 0.001, indicating a significant relationship between giving informed consent and anxiety levels in preoperative Sectio Caesarea patients. The findings suggest that there was a correlation between the provision of informed consent and anxiety levels in preoperative Sectio Caesarea patients.

Keywords: Anxiety, Informed consent, Preoperative, Sectio Caesarea

Introduction

Surgery is a procedure carried out by making an incision to reveal the area of the body to be treated, and one example of a major surgical procedure is a caesarean section (Sjamsuhidajat & Win De Jong, 2015). Basic Health Research (Risikesdas) in 2018 showed that the percentage of births carried out via cesarean section in Indonesia increased from 9.8% in 2013 to 17.6% in 2018. Caesarean delivery is a form of abnormal birth due to health problems or the baby's condition. As a complex medical procedure, caesarean section surgery requires careful preparation from the patient and the medical team, starting with the pre-operative evaluation, the surgical procedure itself, and post-operative care.

According to Law Number 44 of 2004 concerning hospitals, every medical procedure carried out in a hospital must obtain the consent of the patient or his family. This agreement is called informed consent, which is a procedure involving medical personnel and the patient or family, that involves communication and understanding of the diagnosis, goals, procedures,

benefits, risks, and alternative treatment methods involved. The aim of this process is to ensure that the patient or family has a complete and clear understanding of the medical treatment that will be carried out, so that they can make conscious decisions based on the information they have.

Surgery can cause significant physical trauma and a high risk of death, thereby affecting the patient's psychology, such as anxiety. Anxiety associated with surgical procedures may vary from patient to patient. Anxiety is a mental health condition that does not have a specific focus (Stuart and Sundeen, 2016). High anxiety can affect the body's physiological functions, characterized by increased blood pressure, an increased pulse rate, an increased respiratory rate, fear, nausea, vomiting, restlessness, dizziness, trembling, and hot and cold sensations. In very severe conditions, anxiety can cause an increase in sympathetic tone to the point that it can affect the patient's general condition, for example, blood sugar levels soaring, high, exacerbation of an existing chronic lung disease, or even cardiac arrhythmias (Matthias, 2012).

The prevalence of preoperative anxiety in patients undergoing various types of surgery is found to be around 60% to 90%. Research in Rwanda shows that the incidence of preoperative anxiety was 72.8%. Meanwhile, the prevalence of preoperative anxiety in Nigeria among adult patients is 51%. The incidence of anxiety increases to 60% - 80% of patients waiting for surgery, and 5% of patients are anxious before taking action. Research in the United States shows that the prevalence of preoperative anxiety is 59.6%. In western countries, the incidence of preoperative anxiety is around 60% - 80% (Spreckhelsen & Chalil, 2021).

Giving informed consent to a person's level of anxiety is related to when treatment or invasive medical procedures will be carried out. Based on research by Astuti and Kulsum (2018) entitled The Effect of Giving Informed Consent on Anxiety in Preoperative Caesarean Section Patients, it was found that anxiety levels were reduced in patients before and after being given informed consent. This research shows that there is an influence of informed consent on anxiety in pre-cesarean section patients, with a P value of $0.001 < p \text{ value } 0.05$.

The same research results were also shown by research by Arisandi, et al (2014) entitled The Effect of Providing Informed Consent on Anxiety Levels in Preoperative Patients at Tugurejo Regional Hospital, Semarang, that there was a significant influence of providing informed consent on the anxiety level of preoperative patients. The patient's anxiety level before being given informed consent was 73 respondents (92.2%) experiencing severe anxiety and 7 respondents (8.8%) experiencing moderate anxiety, whereas after being given informed consent there was a decrease, namely 21 respondents (26.2%) experiencing mild anxiety and 59 respondents (73.8%) experiencing moderate anxiety.

The results of the preliminary study showed that caesarean section was the most common type of surgery compared to other types of surgery. In 2021, there will be 633 caesarean section procedures and 283 procedures from January 2022 to June 2022. Giving informed consent in the Immanuel Hospital operating room is always given to patients who will carry out surgery, but sometimes the implementation is not optimal, especially for patients who come from the gynecology clinic or from the emergency room. with urgent conditions so that informed consent is carried out in the induction room. The results of interviews conducted on several patients who were about to undergo a cesarean section experienced varying symptoms of anxiety, including increased blood pressure, restlessness, rapid breathing, sweating, being unable to sleep, frequent urges to urinate, feeling nauseous, and having no appetite. The anxiety and fear they feel are more about imagining post-operative pain, losing the experience of giving birth naturally, and changes to the body due to surgical wounds.

Materials and Methods

This research is a correlational descriptive study with a cross-sectional approach to obtain an overview of the relationship between giving informed consent and the preoperative anxiety level of patients at Immanuel Hospital in 2022. The research population is all patients who will undergo a caesarean section from January to March 2022, totaling 130 people. The total sample was 57 people, and the technique used in determining the sample was purposive sampling. The research instrument used the Hamilton Anxiety Rating Scale (HARS) questionnaire to measure the patient's anxiety level, while the instrument for implementing informed consent adopted a questionnaire from Madubun researchers. Data collection was carried out by giving questionnaires to respondents, but beforehand, the researcher explained the purpose of the research and gave informed consent. Univariate data was analyzed using frequency distribution, while bivariate data was analyzed using Spearman rank. This research has received ethical approval from Immanuel Hospital Bandung under No. 54/A02/EC/VII/2022.

Results and Discussion

Table 1 shows the majority of informed consent given to preoperative patients for a cesarean section is good, namely 70,1%.

Table 1. Providing Informed Consent

Providing Informed Consent	Frequency (f)	Percentage (%)
Good	40	70,1
Not Good	17	29,9
Total	57	100

Table 2 shows almost half of the respondents experienced moderate anxiety, namely 11 people (19,3%).

Tabel 2. Anxiety Level

Anxiety Level	Frequency (f)	Percentage (%)
Not anxious	5	8,9
Mild anxiety	25	43,9
Moderate anxiety	11	19,3
Severe anxiety	9	15,7
Very serious anxiety	7	12,2
Total	57	100

Table 3 shows the results of the Spearman Rank test, which show that H_0 is rejected while H_a is accepted because the p -value is $0.000 < 0.05$. These results indicate that there is a relationship between giving informed consent and the level of anxiety in preoperative sectio caesarea patients. The correlation result (ρ) of -0.865 shows that there is a strong correlation between providing consent information and the patient's level of anxiety.

Tabel 3. The Relationship of Giving Informed Consent to the Anxiety of Preoperative Sectio Caesarea Patients

Providing Informed Consent	Anxiety Level					Total	P Value	P (ρ)
	Not Anxious	Mild Anxiety	Moderate Anxiety	Severe Anxiety	Very Serious Anxiety			
Good	3 (60%)	23 (92%)	8 (72.8%)	3 (33.3%)	3 (42.9%)	40 (70.1%)		
Not Good	2 (40%)	2 (8%)	3 (27.2%)	6 (66.7%)	4 (57.1%)	17 (29.9%)	0,000	-0,865
Total	5 (8.8%)	25 (52.7%)	11 (17.5%)	9 (12.2%)	7 (8.8%)	100 (100%)		

The results of this study showed that the majority of informed consent given to patients who were going to undergo a caesarean section was in the good category, namely 40 people

(70.1%), and almost half of the patients experienced mild anxiety, namely 23 people (92%). This means that complete information is given to the patient before surgery regarding the surgical procedure, and the patient understands well enough what is being conveyed regarding the surgical procedure. However, there are also patients who experience moderate anxiety, severe anxiety, and very severe anxiety.

Based on the results of the Rank Spearman statistical test, it shows a P-value of 0.000 < 0.05 and P (rho) -0.865, so it can be concluded that there is a relationship between giving informed consent and the anxiety level of pre-operative sectio secarea patients in the operating room at Immanuel Hospital Bandung, and the direction of the relationship is negative, which means that the better the provision of informed consent to the patient, the lower or reduced the patient's anxiety level.

The results of this research are in line with Ardiansa's (2014) research on the relationship between giving informed consent and anxiety levels in preoperative patients at Salewangan Maros Regional Hospital with a sample of 31 respondents, showing that there is a relationship between informed consent and preoperative patient anxiety at Salewangan Maros Regional Hospital and the P value. $= 0.012 < P$ value 0.05. The same research results were also found in Rochmawati's (2011) research on "The Relationship between Giving Informed Consent and the Level of Anxiety in Preoperative Patients in the Inpatient Installation of Kajen Regional Hospital, Pekalongan Regency", it was concluded that there was a relationship between giving informed consent and the level of anxiety in preoperative patients in the room. inpatient treatment at Kajen District Hospital, Pekalongan Regency with a p value of $0.026 < 0.05$.

A sectio caesarea is a medical procedure necessary to assist with childbirth that cannot be carried out normally due to maternal health problems or the condition of the fetus. This action is defined as surgery to deliver the fetus by opening the abdominal wall and uterine or vaginal wall, or a hysterotomy to deliver the fetus from the uterus (Kristensen et al., 2018). There are several indications for caesarean section, including maternal factors, namely age at risk, history of caesarean section, non-advanced labor, postdate, failed induction, amniotic fluid, maternal illness (severe pre-eclampsia, asthma, anemia), and fetal distress (Safitri, 2020).

Sectio caesarea is a major surgery that is more difficult to carry out than minor surgery because it takes time and involves risks to the two lives of the patient, namely the mother and child (Brunner & Suddarth, 2014). This action also clearly increases the psychological and physical burden for the mother and family (Mindsari & Yulifah, 2017). According to Stuart and Sundeen (2016), surgery can cause extensive physical trauma, and the risk of death is very

serious, giving rise to psychological impacts or influences on preoperative patients such as anxiety. Anxiety is a natural emotional disorder characterized by deep and ongoing feelings of fear or worry, the ability to assess reality, a personality still remaining intact, and behavior that can be disturbed but is still within normal limits (Dadang Hawari, 2019). Manifestations of anxiety responses can include changes in physiological, behavioral, cognitive, and affective responses (Spreckhelsen & Chalil, 2021).

Preoperative patient anxiety is caused by pain or discomfort, changes in body fluids and functions, self-dependence on other people, loss of control, changes in lifestyle, and financial problems. Apart from that, preoperative patients experience anxiety regarding vulnerability during an unconscious state, the threat of losing their job, losing their role in the family and society, being separated from those closest to them, having to change their usual lifestyle, and even causing the risk of death (Black & Hwaks, 2014). Therefore, providing informed consent is very necessary to reduce patient anxiety regarding the threats that patients feel when undergoing surgery. Things that need to be communicated to the patient or family are the condition of the pregnancy, how it works, the possibility of feeling sick or having other feelings, and the risks of the action (Suharto, 2012 in Astuti & Kalsum, 2018).

Conclusion

1. The majority of informed consent given to preoperative caesarean section patients is good.
2. Almost half of the respondents experienced mild anxiety.
3. There is a correlation between providing informed consent and the patient's level of anxiety before undergoing caesarean section surgery.

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