

MEETING ABSTRACTS



The 1st Hellenic Conference of Perianesthesia Care

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Abstract

Pandemic Covid-19 had a major impact on PeriAnesthesia Nurses worldwide. PACU Nurses had to deal with unfamiliar conditions. In Greece, this pandemic has highlighted the importance of PeriAnesthesia Nursing in all areas, such as Intensive Care Units, Emergency Rooms and Clinics.

Major intention of the Hellenic PeriAnesthesia Nursing Organization through this conference is to strengthen its members continuing education and the promotion of PeriAnesthesia Nursing, as well as Perioperative Nursing in Emergency Room and Intensive Care Unit.

Organizing the 1st Hellenic Conference of PeriAnesthesia Care in 2021 will boost Nurses participation, contribution and development in this very important scientific fields, such as:

- Ethical dilemmas in Perianesthesiology Nursing
- Pre-hospital Anesthesia
- Cardiopulmonary Resuscitation
- Vascular access
- Management of acute and chronic pain
- Minimally Invasive Surgery and postoperative pain management

Clinical Scenarios and roundtables with international participation will provide information and knowledge in various topic, as well as sessions with experts in the field of PeriAnesthesia Nursing will give the opportunity to advance and generate interaction between the speakers and the delegates.

01. Hospitalization in intensive care unit through the eyes of caregivers. needs and challenges for relatives in the time of pandemic COVID-19

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Objectives: Admitting a patient to the Intensive Care Unit (ICU) becomes a particularly stressful experience for his family members. Over the years, despite the conducting of studies focusing on the caregivers’ burden of chronically ill patients, corresponding studies concerning people hospitalized to ICU and the burden of their relatives, fall short in number and quality processing.

Aim: The present review explores the needs and the challenges that caregivers of ICU patients are called upon to address. In addition, an attempt is made to record the methods used to meet these needs and the importance of applying these methods in the daily clinical practice.

Methods: A critical review of the literature was applied. The online databases PubMed, SpringerLink, ScienceDirect and SCOPUS were searched. Google and Google Scholar search engines were used to find references not found in the aforementioned databases. In addition, references of articles resulting from the initial search were used to locate further published studies.

Results: The search revealed that the needs of caregivers are primarily centered around information retrieval and health status update. In addition, there is an impact on the psychology of relatives with the appearance of anxiety, depression, post-traumatic stress disorder (PTSD) and sleep disorders.

Conclusions: During the hospitalization of an individual in the ICU, communication between the staff and the relative environment of the patient is considered necessary for the participation of the family in clinical decisions. Caregivers want to participate in these decisions and seek information about the course of the disease, in order to maintain their psycho-emotional well-being. However, family needs are usually sidelined. The pandemic, due to the strict measures and therefore the lack of communication between caregivers and medical staff, highlighted the problem, having significant effects on the psychosomatic health of the patients' relatives, making the need for new interventions urgent.

Keywords:

Communication in ICU; COVID19; Family needs; Quality of life; Psychological needs

02. Clinical evaluation of a patient with sublingual tracheal stenosis

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Introduction: The difficult airway and alternative ways of management it according to international protocols is a daily challenge for the Anesthesiologist and the Anesthetic nurse, because its complications could be fatal.

Aim: The purpose of this case presentation was to present an airway management incident with sublingual narrowing of the trachea. in a patient who underwent laparoscopic sigmoidectomy.

Methods: In a case of 71 year old female with ASA II, also reported a medical history of a failure to secure the airway in a previous gynecological surgery and recommendation of discharge from the Anesthesiologist, not to undergo general anesthesia in any subsequent surgery. The preoperative assessment revealed the following: (a) Mallampati II airway assessment, thyroid angle <3 cm, good extent of the cervical spine (AMSS), (b) voice rock, severe respiratory fatigue and normal peer breathing whisper and (c) otolaryngological assessment without particular findings.

For further investigation of the reported problem, a chest-tracheal CT was performed and bronchoscopy showing extensive subglottic stenosis of 5.8 mm (FT.25MM). Is decided to provide an airway to a patient with mild depression for nasotracheal intubation using a fiberoptic bronchoscope (3.5 mm diameter).

Results: The patient with mild repression, blood pressure 125/80 mmHg, hean beak 75/min and hemoglobin saturation rate SpO2 98% was intubated successfully on the 1st try without complications with the help of a fiberoptic bronchoscope and the scheduled operation was performed under general anesthesia.

Conclusions: The appropriate preoperative assessment, investigation, the good cooperation of the Anesthesiologist and the Anesthesiologist nurse of the Department and the strategic treatment of the difficult airway according to the ASA guidelines, can ensure the positive outcome of patients during intubation.

Keywords:

Sublingual tracheal stenosis; Patients' assessment; Operation & sublingual tracheal stenosis

03. Implementation of enhanced recovery after surgery program in elderly patients undergoing pancreatectomy

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Introduction: Enhanced recovery after surgery (ERAS) programs accelerate postoperative recovery of patients, improving clinical outcomes. ERAS protocols are patient-center evidence based practice which reduce postoperative complications, such as nausea/vomiting and length of stay (LOS), promoting health care professionals collaboration. Aim of this study was to evaluate the effectiveness of ERAS protocols in elderly oncological patients.

Methods: A prospective clinical study was conducted from March 2017 to October 2019 with a sample of 34 elderly patients who undergone pancreatectomy, in major Oncological Hospital, in Athens, Greece. In patients was applied ERAS protocol. Mobilization occurred 4 hours after surgery, while liquid diet 6 hours, postoperatively. Demographic and clinical data were collected. Statistical analysis was carried out by SPSS 22, at a nominal significance level $\alpha = 0.05$. The results were expressed as mean (SD).

Results: Nineteen males and 15 females participated in the study. The mean age of patients was 73.15 (6.18), where 79.4% underwent pancreatoduodenectomy, 17.6% peripheral pancreatectomy and 2.9% laparoscopic peripheral pancreatectomy. Patients’ mean day of consuming normal diet was 5.24 (1.45) and the mean day of LOS was 6.5 (2.36). Six patients appeared to have nausea/vomiting, 1 fever and 1 pancreatic fistula, whilst 1 patient was readmitted. There was no significant correlation between gender and the appearance of complications ($\chi^2 = 0.147$, $df = 1$, $p = 0.702$).

Conclusions: Study results indicated that the implementation of ERAS programs in elderly patients, undergoing pancreatectomy, is safe and efficient.

Keywords:

ERAS; Hepatectomy; Pancreatectomy; Elderly patients

04. Do perioperative nurses adapt positive attitude toward evidence-based practice?

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Introduction: The notion of evidence-based practice (EBP) has had globally influenced the field of healthcare practice by providing high quality services. There is sound evidence highlighting nurses’ positive attitude towards EBP-implementation, but only few data are available regarding EBP-implementation in perioperative nurses. Many researchers highlight perioperative nurses’ low EBP competencies showing that many of them struggle with EBP concepts and face many difficulties in every step of the EBP implementation process.

Aim: To investigate perioperative nurses’ attitude towards EBP.

Methods: The authors carried out a bibliographic search using Medline database for the years 2001 to 2021. Search terms used were chosen from the USNLM Institutes of Health list of MeSH (Medical Subject Headings) and free text key terms were used as well.

Results: According to researchers, perioperative nurses state familiarity with the term of “EBP”, most of them believe that EBP must be implemented to achieve desired patient outcomes, while many perioperative nursing leaders try to implement clinical guidelines in daily clinical practice. Only a low percentage has successful or highly successful ability in MEDLINE search, while internet search is stated as the most preferred method of

information seeking. In most of the studies, the majority reports limited utilization of research in daily practice and points out that the low organizational budget for acquisition of information resources is considered the main organizational constraint affecting the research utilization. Interestingly, research findings support that the two primary barriers to personal use of research are the difficulty in accessing research materials and the lack of skills to critique the literature. International literature supports the imperative need for cultivating nurses' core EBP competencies in order to be successfully involved in asking and answering focused clinical questions with a goal of improving patient outcomes.

Conclusions: Implication for perioperative nurses: Although perioperative nurses seem to adapt a positive EBP-attitude, they lack the EBP-skills and knowledge. Strategies aimed at changing the organizational context need to be developed. EBP-education may help nurses overcome the potential barriers leading to secure the quality in perioperative care.

Keywords:

Attitude; Competencies; Evidence-based practice; Perioperative nursing

05. The complications of anesthesia in pediatric population to cardiological surgeries: *α* literature review

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Introduction: General anesthesia in cardiac surgery was first performed in 1925 in a patient undergoing mitral valve plastic surgery. Anesthesia in children undergoing heart surgery is considered as a stressful and difficult process due to the special pathophysiological characteristics of children and the specialized training of the medical staff required. Although much has changed since then in anesthesia, general anesthesia in cardiac surgery in the pediatric population is still considered a challenge.

Aim: The aim of the present study was to explore the complications of general anesthesia in the pediatric population undergoing cardiac surgery.

Methods: A descriptive review was performed that examined the bibliographic databases of Pubmed, Google Scholar, IATROTEK and Oxford journals. The filters used for data collection were the time period (2010-2021) and the language of the articles (Greek and English). In addition, the following algorithm was used for English terminology: (“Pediatric” OR “Pediatric population” OR “Children”) AND (“Heart Surgery” OR “Cardiac Surgery”) AND (“Anesthesia” OR “General anesthesia” OR “Endotracheal Intubation” OR “Mask Ventilation”) AND (“Complications” OR “Difficulties” OR “Adverse Events”) AND (“Nurse” OR “Nurse Anesthetist” OR “Anesthesiologist” OR “Doctor”).

Results: According to the ten-article study, the pediatric population undergoing cardiac surgery had higher mortality rates associated with general anesthesia than the pediatric population undergoing other surgeries. In addition, the main side effects of dexmedetomidine were found to be bradycardia and hypotension. However, the dexmedetomidine-ketamine combination appeared to be safer with fewer side effects. Dexmedetomidine in combination with a low dose of fentanyl, also, helped to eliminate stress hormones. Airway obstruction was common after pediatric cardiac surgery, especially when large doses of dexmedetomidine and vecuron were administered during anesthesia.

Conclusions: Complications of anesthesia in children undergoing heart surgery are now minimal and treatable with the help of a specially trained anesthesiology team and the existence of appropriate infrastructure.

Keywords:

General anesthesia; Complications; Cardiac surgery; Pediatric population.

06. The impact of COVID-19 infection on incidence of surgical site infection: a systematic review

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Introduction: The Coronavirus disease-2019 (COVID-19) placed unprecedented pressure on the healthcare system. COVID-19 is highly contagious, and the severity of cases varies. For this reason, extensive measures have been taken to prevent the spread of the infection in hospitals.

Aim: The exploration of the impact of COVID-19 on incidence of surgical site infection (SSI).

Methods: A systematic review of the literature was conducted in the international electronic database “PubMed” with the keywords: “COVID-19”, “surgical site infection*”, “SSI” and in the Greek electronic database “IATROTEK-online” with the keywords: “surgical site infections” and “COVID-19”, without time limit for the publication of scientific papers. On PubMed, the keywords were searched in the title and abstract of the studies. Studies were excluded if they were not published in English and Greek language, were conducted on animals and were case studies, editorials and letters to the editor.

Results: Of the 32 scientific papers retrieved, 7 were included in the systematic review. In 5 of the participating studies, the incidence of SSIs during the COVID-19 pandemic period was decreased by 30.7% to 100% comparing with the period before the pandemic, due to the increased use of personal protective equipment and the implementation of site-specific protocols concerning the management of patients preoperatively, intraoperatively and postoperatively. In one of the remaining studies, the incidence of SSIs did not change during the COVID-19 pandemic period, while in the other, incidence was increased.

Conclusions: The increased use of personal protective equipment and the implementation of site-specific protocols concerning the management of patients preoperatively, intraoperatively, and postoperatively, due to the COVID-19 pandemic, has led to a reduction in incidence of SSIs.

Keywords:

COVID-19; Surgical site infection; Personal protective equipment; Incidence

07. Non-opioid analgesia: a new plan of management in analgesia

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Introduction: Pain is described as an unpleasant experience associated with potential or actual tissue damage. Opioid administration is an important tool in the treatment of pain but with side effects, the use of non-opioid analgesia can be an effective means of treating pain by reducing opioid use.

Aim: The aim of this review is to emphasize on the use of non-opioid analgesia highlighting the benefits in general but also against the use of opioids, as well as addressing possible contraindications.

Methods: The articles used in review are numbered at eight. The PICO model (Population, Intervention, Comparison, Outcome) was used to formulate the query. The PubMed database was used and the inclusion criteria were: 2011 articles, adults regardless of gender, use of non-opioid analgesia.

Results: The side effects of opioid use include respiratory depression, decreased gastrointestinal function, and the appearance of atelectatic alveoli at the bases of the lungs due to an increase in intra-abdominal volume. Nausea and vomiting, urinary retention, delirium, and attenuation of cell-mediated analgesia occur. Avoiding opioids postoperatively has contributed to increased patient satisfaction, reduced opioid consumption and the occurrence of adverse events. Reduced use of analgesics postoperatively, faster return to normal bowel function

and faster discharge from the hospital. Non-opioid analgesia appears to be safe and is associated with reduced postoperative pain. In a randomized double-blind study it appears that prtramide consumption is high in a resuscitation unit which was significantly reduced by concomitant use of metamizole. Reduction in pain appears to be present in a group of patients receiving parecoxib compared with those receiving metamizole 24 hours after surgery. Opioid antagonists such as methylnatrexone (s.c), albimopam (p.o) or in combination (oxycodone/naloxone) appear to be effective in reducing opioid side effects such as gastrointestinal impact.

Conclusions: Opioid use is a familiar method and the effects of opioid abuse are well known. Different methods now exist that lead to less serious complications, such as less frequent ileus and vomiting. At the same time, patient satisfaction improves and hospital stays decrease.

Keywords:

Opioid free; Analgesia; Opioid free; Postoperative analgesia

08. Ethical dilemmas and challenges of nurses during the COVID-19 pandemic

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Introduction: Nursing is one of the most stressful professions with nurses experiencing daily moral dilemmas, challenges and fears that bring them face to face with themselves, seriously affecting their mental health, especially when working in an infectious and highly stressful environment like what caused the COVID-19 pandemic.

Aim: To highlight and examine the ethical dilemmas and challenges faced by nurses caring for COVID-19 patients.

Methods: A search was conducted for review articles and research studies published in Greek and English in the electronic databases “Pubmed”, “Google Scholar” and “IATROTEK” for the period 2020–2021.

Results: The COVID-19 pandemic posed a challenge to the global health system. The nurses were at the forefront and fully committed to controlling the pandemic, defying any danger, while at the same time, they had to face moral challenges and dilemmas on many fronts. The significant increase in the volume and intensity of their work, along with the constant implementation of new protocols and changes in disease management, has been a source of constant stress and self-doubt as to whether they met the needs of the health system without adverse effects on both themselves and their familiar environment as well as towards their debt to patients.

Conclusions: There is an urgent need for health policies, review and redesign of health protocols for comprehensive service delivery, resource redistribution, training and adequacy of staff and in particular proposals to support mental health and strengthen nurses’ mental resilience.

Keywords:

COVID-19 pandemic; Nurses; Ethical dilemmas; Challenges; Mental health; Patients

09. Clinical outcomes of fast-track protocol application in geriatric hepatectomized patients

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Introduction: Fast-track (FT) protocols enhance postoperative care of patients, focusing on early mobilization and consumption of normal diet, reducing postoperative complications. FT programs facilitate early discharge of patients. The aim of this clinical study was to compare the FT recovery protocol with the conventional (CON) one, in geriatric patients undergoing hepatectomy.

Methods: It was a prospective randomized study, which was conducted from January 2018 to December 2019, in major Oncological Hospital, in Athens, Greece. Thirty six geriatric patients, who underwent hepatectomy, were randomly divided into 2 groups. Group A (N = 18) followed FT protocol and group B (N = 18) the CON postoperative care. Demographic and clinical data were collected. Postoperative care of the patients, such as hospital length of stay, mobilization, diet and complications between the two groups were studied and statistically compared. Statistical analysis was carried out by SPSS 22 (IBM Corp., Chicago, IL, USA), at a nominal significance level $\alpha = 0.05$.

Results: The two groups of patients were matched for age, gender, body mass index and kind of surgery ($p > 0.05$). There was a significant difference in developing complications between the two groups ($\chi^2 = 3.7$, $df = 1$, $p = 0.05$). On the contrary, there was significant difference in the appearance of postoperative nausea/vomiting ($\chi^2 = 8.86$, $df = 1$, $p = 0.003$).

Conclusions: The present study showed that FT protocol was associated with early ambulation and fewer complications, indicating to be safe for patients undergo liver surgery.

Keywords:

Fast track protocol; Nausea/Vomiting; HPB surgery

10. The value of simulation in nursing education- a systematic review

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Introduction: Nursing education combines both theoretical knowledge and a wealth of practical skills. Clinical practice is the link between theoretical knowledge and practice, to properly prepare future Nurses. The fact that there is an increased risk of injury to patients by Nursing Students in combination with the fact that there are limited places for students to be admitted to hospitals, is a strong obstacle to their education. Instructors are forced to turn to alternative methods of education that will promote the active participation of students in a safe and interactive environment. One method of education that seems to provide these possibilities and has been adopted by several educational institutions around the world are Simulations.

Aim: To explore the use and contribution of the innovative educational method, the simulation in Nursing education.

Methods: A systematic review of the literature in the PubMed database for scientific quantitative design articles published over the last 15 years. The search followed specific criteria and was conducted using specific MESH terms.

Results: Ninety twenty four articles were retrieved from the literature search, of which 25 were included in the study. From most of the articles, it was found that education with the method of simulations, contributes not only to the improvement of practical skills, but also to the theoretical knowledge and critical thinking of Nursing students. The review also showed that simulation as an educational method in relation to traditional teaching methods reduces student stress, increases satisfaction levels and at the same time leads to increased self-confidence through experiences in the simulation environment.

Conclusions: It was found that the educational method of simulations is a modern but not purely innovative method for Nursing science. Given its usefulness, it is proposed to integrate it into the student curriculum, where possible, and to expand its use as a highly effective teaching method.

Keywords:

Students; Nursing; Simulation; Education