Role of Parental Preoperative Anxiety in Pediatric Anesthesia Experience: Implications for Family-Centered Care

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Abstract

Parental anxiety before pediatric surgical procedures can significantly impact the child's anesthesia experience and overall well-being. This research article delves into the role of parental preoperative anxiety in the context of pediatric anesthesia, emphasizing the importance of family-centered care. Through a comprehensive review of existing literature, this article explores the effects of parental anxiety on children's psychological and physiological responses to anesthesia, outlines potential mechanisms, and underscores the significance of healthcare providers adopting family-centered strategies to alleviate preoperative stress.

Keywords: Parental anxiety • Pediatric anesthesia • Preoperative anxiety

Introduction

Pediatric anesthesia is a critical component of surgical care for children, with a focus on ensuring safety, comfort, and minimal stress. Parental anxiety is a common occurrence before surgical procedures involving their children. This anxiety can significantly impact both the child's experience and the efficacy of anesthesia administration. Understanding the mechanisms underlying the relationship between parental preoperative anxiety and pediatric anesthesia outcomes is essential for the provision of comprehensive family-centered care. Parental anxiety can lead to a heightened emotional response in children, including increased fear and distress. This emotional state may affect the child's cooperation during induction, emergence, and recovery from anesthesia. It could also contribute to the development of negative associations with medical procedures.

Parental anxiety is associated with physiological changes, such as increased heart rate and blood pressure. These physiological changes can potentially influence the child's autonomic responses, including cardiovascular stability during anesthesia administration. Children are highly perceptive of their parents' emotional states. Elevated parental anxiety levels during induction and emergence from anesthesia can amplify the child's apprehension, potentially leading to difficult inductions and an increased risk of emergence delirium [1-3].

Literature Review

Children may imitate their parents' anxiety, leading to the adoption of similar anxious behaviors. This modeling effect could contribute to heightened anxiety during anesthesia procedures. Parental anxiety may disrupt the caregiver-child bond, which is crucial for reassuring the child and promoting a sense of security during the anesthesia process. Impaired bonding can lead to emotional distress and resistance to cooperation.

Emerging research suggests that neurobiological factors, including stressresponsive pathways and the release of stress hormones, may play a role in mediating the effects of parental anxiety on children's anesthesia experiences.

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Family-centered care is an approach to healthcare that recognizes the central role of families in a patient's well-being and treatment journey. In the context of pediatric anesthesia, family-centered care strategies aim to involve parents and caregivers as active participants in the care process and decision-making. These strategies promote collaboration, communication, and support to create a more positive experience for both the child undergoing anesthesia and their family members. Healthcare providers should offer comprehensive information about the anesthesia process, potential risks, and benefits to parents and caregivers. This education helps alleviate anxiety, clarifies expectations, and empowers families to actively participate in the decision-making process [4,5].

Allowing parents to be present during the induction of anesthesia, if deemed safe and appropriate, can provide comfort to the child and reduce anxiety. This practice helps establish a sense of security and trust, enhancing the child's cooperation and easing the transition into anesthesia. Involve parents and caregivers in decisions related to anesthesia, including the choice of anesthesia technique and pain management strategies. Acknowledge their insights, concerns, and preferences, fostering a collaborative and respectful partnership.

Discussion

Maintain transparent and open communication with parents throughout the entire perioperative process. Address any questions, concerns, or uncertainties they might have and provide regular updates on the child's status. Offer psychological interventions, such as relaxation techniques and coping strategies, to parents and caregivers to help them manage their preoperative anxiety. By addressing parental stress, the overall environment becomes calmer and more conducive to positive outcomes. Educate parents about what to expect postoperatively, including pain management, potential side effects, and signs of complications. Providing this information empowers parents to care for their child effectively once they leave the healthcare facility.

Maintain continuity of care by involving parents in the child's postoperative recovery plan. Ensure that parents understand follow-up instructions, medication schedules, and any potential red flags that require medical attention. Encourage parents to share their feedback and experiences with the healthcare team. Their insights can provide valuable perspectives for improving the anesthesia process and enhancing family-centered care practices. Recognize and respect the diverse cultural and individual preferences of families. Tailor care strategies to align with their beliefs and values to create a more personalized and supportive experience. Consider the needs of siblings and other family members who might be present during the anesthesia experience. Offer appropriate information and support to ensure their comfort and understanding [6].

Postoperative follow-up is a crucial aspect of patient care, especially in the context of pediatric anesthesia. It involves monitoring and assessing a child's recovery after a surgical procedure and anesthesia administration. Effective postoperative follow-up helps ensure that the child's healing progresses as expected, any complications are promptly addressed, and parents or

caregivers receive the necessary guidance for optimal aftercare. Here are key considerations and practices for postoperative follow-up in pediatric anesthesia:

Communication and education

Provide parents or caregivers with clear postoperative instructions before discharge. This should include information about pain management, wound care, activity restrictions, and potential side effects. Use language that is easy to understand and encourage parents to ask questions if they are unsure about any aspect of the aftercare. Discuss pain management strategies and provide guidelines for administering pain medication. Make sure parents understand the appropriate dosage, timing, and potential side effects of the prescribed medications.

If the surgical procedure involved an incision, provide detailed instructions for wound care, including how to keep the area clean, when to change dressings, and signs of infection to watch for. Clearly outline any activity restrictions or limitations based on the child's surgical procedure and anesthesia type. This may include guidelines for physical activities, dietary restrictions, and other precautions to prevent complications. Schedule and communicate any necessary follow-up appointments with the healthcare provider. These appointments allow for assessment of the child's recovery progress and the identification of any potential issues early on.

Conclusion

Parental preoperative anxiety has far-reaching implications for pediatric anesthesia experiences. The emotional and physiological interplay between parents and children underscores the need for healthcare providers to adopt family-centered care strategies. By addressing parental anxiety through effective communication, parental presence, and psychological interventions, healthcare professionals can contribute to a positive anesthesia experience for children and families alike.

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Conflict of Interest

There are no conflicts of interest by author.

References

- Chieng, Ying Jia Shermin, Wai Chi Sally Chan, Piyanee Klainin-Yobas and Hong-Gu He. "Perioperative anxiety and postoperative pain in children and adolescents undergoing elective surgical procedures: A quantitative systematic review." J Adv Nurs 70 (2014): 243-255.
- Ben-Amitay, Galit, Irene Kosov, Ahuva Reiss and Paz Toren, et al. "Is elective surgery traumatic for children and their parents?." J Paediatr Child Health 42 (2006): 618-624.
- Goodman, Sherryl H. and Ian H. Gotlib. "Risk for psychopathology in the children of depressed mothers: A developmental model for understanding mechanisms of transmission." *Psychol Rev* 106 (1999): 458.
- Creswell, Cathy and Polly Waite. "The dynamic influence of genes and environment in the intergenerational transmission of anxiety." Am J Psychiatry 172 (2015): 597-598.
- Aydın, Gözde Bumin and Bahar Sakızcı Uyar. "Mothers level of education and preoperative informative story book reading helps reduce preoperative anxiety in children in Turkey." J Pediatric Nurs 60 (2021): e19-e23.
- Chow, Cheryl HT, Stephanie Wan, Eliza Pope and Zhen Meng, et al. "Audiovisual interventions for parental preoperative anxiety: A systematic review and metaanalysis." *Health Psychol* 37 (2018): 746.

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