The effect of music as a preoperative anxiety-reducing aid

No registrations found.

Ethical review Not applicable

Status Pending

Health condition type -

Study type Interventional

Summary

ID

NL-OMON28077

Source

Nationaal Trial Register

Health condition

preoperative anxiety, music intervention, coping and sense of control dutch: preoperatieve angst, muziekinterventie, copingstrategieen, gevoel van controle

Sponsors and support

Primary sponsor: fonds=verrichter=sponsor

Source(s) of monetary or material Support: fonds=verrichter=sponsor

Intervention

Outcome measures

Primary outcome

Heartrate: t0, t1,t2,t3

Bloodpressure: t0, t1,t2,t3

Skintemperature: t1,t2,t3

VAS-anxiety: t0, t1,t2,t3

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VAS-controle: t0,t1,t2,t3

VAS-pain: t3

Coping strategy: t0

Preoperative anxiety anesthetic: t0

preoperative anxiety surgery: t0

need for information anesthetic; t0

need for information anesthetic: t0

Secondary outcome

qualitative interview with musictherapist, main experience music intervention.

Study description

Background summary

This research is taken place in the St. Elisabeth Hospital in Tilburg The Netherlands, assigning a Master Thesis Health Psychology at the Open University Heerlen Netherlands.

Rationale

In most cases ongoing surgery will cause an amount of anxiety within the patient. Listening to music in the preoperative fase can have an anxietyreducing effect. Some researchers state that self-chosen music is most effective, others state that calming-music is most effective. Perhaps copingstrategies give an answer to the question which type of music is most effective.

Objective

Daycare patients premedicated with benzodiazepines sometimes have a prolonged stay at daycare centre. This is a negative side effect. Music can be a alternative to premedication because of its anxiety reducing effects. When this music is offered more custom-made, suited to the patients copingstrategy, it will be more beneficial to patient and hospital.

Study design

200 participants allocated at-random to one of the 3 groups: 1. Self-chosen music.2. calming music. 3. Controle group/ care-as-usual/no music

Measurements t0, t1, t2, t3: Several physiological and psychological parameters of anxiety were measured four times. Heartrate, bloodpressure, skintemperature, Visual Analoge Scaleanxiety, VAS-sense of control, Amsterdam Preoperative Anxiety Information Scale. Coping was measured with Coping Inventory Stressful Situations-NL. And pain with VAS-pain (t3)

Study population

Day-care patients over 18 years old, understanding Dutch language. Excluding patients with mental diseases, patients with diseases that influence directly HR and BB, patients who take medication that influence HR and BB, visual and/or hearing limitations.

Intervention

First measurement of BB and HR at the PPO screening. At home daycare patient fill out the questionnaire they received at de PPO screening (it includes VAS, APAIS, CISS-NI). Within several weeks the daycare patients undergoing surgery arrive at the holding of the OR. After scoring VAS and measuring BB and HR they listen to music(self-chosen or calming) with a headphone. Controle group doesn't receive music, but care-as-usual. At some point the patient is transported tor he OR. Music is continuated at the OR. The Third measurements are taken place just before the anesthetics are injected. The patient scores VAS, and BB and HR are registered. Postoperative at the daycare centre the fourth measurements are taken place.

Study objective

Preoperative anxiety can cause a range of negative outcome effects in the perioperative fase, e.g. higher consumption of medication, more pain, prolonged stay at hospital and more postoperative infections. Music as a anxiety reducing aid in the preoperative fase has proven to be effective. But there is still no consensus on which music is most effective (selfchosen or calming music) Are coping strategies and sense of controle of patients related to the kind of music that is applied in the preoperative fase.

Problem-focused coping strategies relate to more sense of control and therefore self-chosen music is more effective in anxiety reduction. Emotion-focused coping strategies are therefore more effective when calming music is offered in the preoperative fase. We expect that music is anxiety reducing, especially when the kind of music is meeting the needs of the patient.

Study design

t0; PPO outpatients

t1: arrival holding OR

t2: arrival OR

t3: arrival daycare centre

Intervention

Patient are at-random allocated to one of the three intervention groups:

- 1. self-chosen music
- 2. calming music
- 3. control group/ no music/ care-as-usual

When patient arrive at the holding of the OR, the listing to music by headphones. The control-group receive care-as-usual. The music continues at the arrival of the OR. Just after the anesthetics are injected the music intervention stops.

Contacts

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Eligibility criteria

Inclusion criteria

1. patients over 18 year

- 2. daycare patients
- 3. speaking Dutch language

Exclusion criteria

- 1. mental diseases
- 2. diseases that influence heartrate and bloodpressure
- 3. medication that influence heartrate and bloodpressure
- 4. vision difficulties
- 5. hearing difficulties

Study design

Design

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Single blinded (masking used)

Control: Active

Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-10-2013

Enrollment: 200

Type: Anticipated

Ethics review

Not applicable

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register ID

NTR-new NL3958 NTR-old NTR4138

Other METC St. Elisabethziekenhuis Tilburg : ISRCTN wordt niet meer aangevraagd.

Study results

Summary results

N/A