UNPLEASANT AND PLEASANT MEMORIES OF INTENSIVE CARE IN ADULT MECHANICALLY VENTILATED PATIENTS

Findings from 250 interviews

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Patients (>18 years, ICU stay >24 hours) interviewed 5 days after ICU discharge using two open-ended questions:

1. Please describe what you remember as unpleasant during your ICU-stay
2. Please describe what you remember as pleasant during your ICU-stay
Of the 250 patients included:

- 81% remembered being in the ICU
- 71% had recall of unpleasant memories
- 59% had recall of pleasant memories
- 10% had vague memories - neither unpleasant or pleasant
- None had merely pleasant memories
Qualitative content analyses exploring the manifest content

- Physical distress
  - Relief of physical distress
- Emotional distress
  - Emotional well-being
- Perceptual distress
  - Perceptual well-being
- Environmental distress
  - Environmental comfort
- Stress-inducing care
  - Caring service
What surprised me – compared to my previous research?

• Environmental distress *was extensive*

• Stress-inducing care - *terrible to hear*
  – Disrespectful staff
  – Non-caring patient management
  – Lack of attention
  – Unpleasant intensive care interventions
  – Uncomfortable daily procedures

• The *extent and importance* of the pleasant memories
The importance of pleasant memories

• Relieving the stress

• Promoting comfort and well-being

• Balancing the impact of negative experiences

• May prevent the stress from becoming traumatic and thereby reducing the attendant risk of subsequent psychological problems
Balancing – reducing the impact of the unpleasant memories

Physical distress → Relief of physical distress
Emotional distress → Emotional well-being
Perceptual distress → Perceptual well-being
Environmental distress → Environmental comfort
Stress-inducing care → Caring service
The significance of the ICU staff

“I got help...the fact that I got proper help when I was gasping for air...and survived.”

“They did everything they could to help and support me. Like they were carrying me through...through all the hard and terrible ordeals. Like something warm and human in the middle of chaos.”

“The clever and competent staff...wonderful...they counterbalanced the unpleasantness...without them I’d gone crazy.”

“They were like angels...like being in heaven.”
The significance of nursing care

Considering the often vulnerable and distressed critically ill patient, we need to better inform and increase the ICU nurses’ understanding in terms of demeanour and nursing care, thus explaining the significance of emotional support, environmental comfort and caring service.
The role of the ICU nurse

“.....nurses are in a unique position to influence the way in which care is delivered and thus the patients’ and relatives’ experiences of critical care. It is often the art of nursing, the invisible care that is remembered by the patient or their family.”

(Dawson, 2006, p 314)

Conclusion

• Most critical care patients have both unpleasant and pleasant memories of their ICU stay.

• Pleasant memories seem to play an important role in relieving the stress and promoting well-being, and may thereby balance the unpleasant memories by reducing the impact of the distressing experiences.
Conclusion

• It therefore seems worthwhile to enhance positive experiences during the ICU stay, giving the patients pleasant memories which will help them move on and lessen the impact of traumatic stressors.