

PSYCHO-EMOTIONAL EFFECTS ON RELATIVES INVOLVED IN ORGAN PROCUREMENT: A FOLLOW-UP ASSESSMENT PROGRAM

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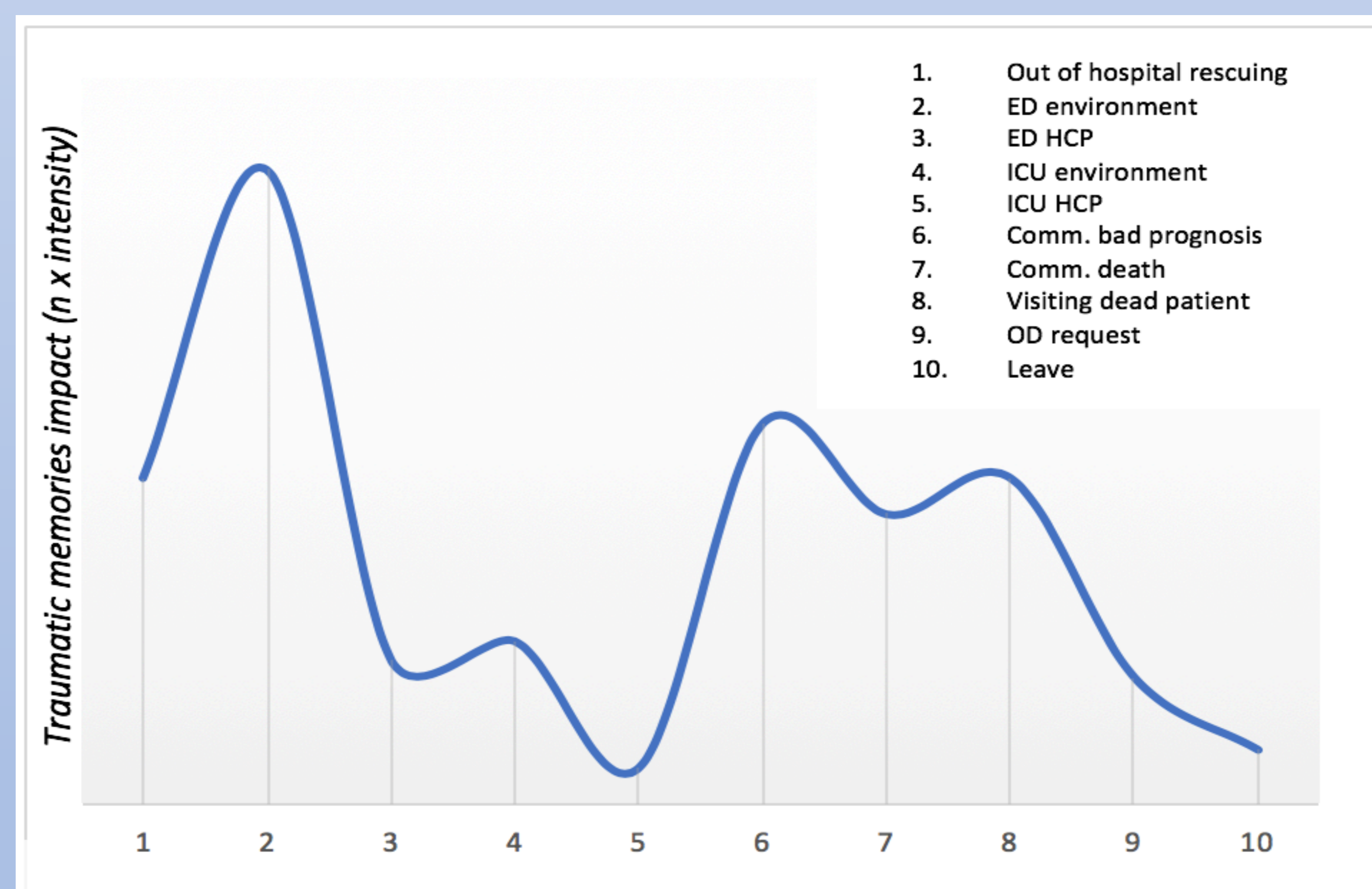
Introduction - Organ procurement (OP) is a complex process in which clinical, organizational and psycho-social issues are at play [1]. Understanding the experiences of potential donors' family members (FM) in a follow up clinic is crucial to identify the most relevant factors affecting OP [2].

Aims - To describe the effects of OP on the psycho-social wellbeing of FM, and to explore the possible causes of family refusals to organ donation (OD).

Methods - Mixed-method study involving FM at 3 and 12 months after patients' death. Psychological profile was evaluated with Psychological well-being scale (PWBS), State trait anxiety inventory – form Y (STAI-Y), Beck Depression Inventory – II (BDI II), Impact of Event Scale – Revised (IESR), Inventory of Complicated Grief (ICG). Traumatic memories were assessed with a 4-point scale. Satisfaction with care was measured with Family Satisfaction ICU.

Results - 24 FM were enrolled; 13 (52.4%) were female, mean age 54.9 (DS 17.0); 9 were spouse (37.5%), 7 (29.1%) sons, 4 (16.7%) parents, 4 (16.7%) other relatives. All FM were Italian and consented to OD. DBD and DCD processes were analyzed; 17.6% patients expressed willingness to OD. Quality of Life's more affected dimensions were personal growth and autonomy; mean values of BDI-II (9.8), IES-R (25.2) and ICG (20.5) were below the clinical cut-off. FM showed symptoms of anxiety. Traumatic memories were more frequent and intense in relation with the early stages of OP (out-of-hospital rescuing/emergency department) and with the communication of bad prognosis and death. Satisfaction with care was fair good.

Conclusion: Preliminary data suggests that the early stages of OP and the communication of bad news deserve attention.



References

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