



Service Priorities and Programmes
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Obstructive Sleep Apnea: Emphasis on Discharge Education after Surgery

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Introduction

Over half of the surgical patients with obstructive sleep apnea (OSA) are predisposed to increased incidence of perioperative complications. The American Society of Perianesthesia Nurses recommends that discharge education (DCE) on OSA should be provided after surgery to OSA patients to promote continuous positive airway pressure (CPAP) compliance and self-care behaviors at home.

Objectives

To evaluate the effectiveness of DCE on OSA for increasing CPAP compliance after surgery among adult surgical patients diagnosed with OSA, who use CPAP.

Methodology

Participants were adult surgical patients over 18 years old diagnosed with OSA, who use CPAP. Phase one was completed using the Apnea Knowledge Test to measure patients' knowledge on OSA. Phase two included a second set of surgical patients that were provided DCE on OSA by telephone, five to seven days before surgery. Education was reinforced on the day of surgery and seven to 10 days after surgery. Outcomes measured were CPAP usage and the Epworth Sleepiness Scale score to evaluate effectiveness of this evidence-based practice project.

Result

Sixty-six participants were provided DCE on OSA. In phase one, the mean patients' knowledge demonstrated a 23.9% increase from pretest to three days after discharge. In phase two, the mean CPAP hours per night usage increased by a total of 72 minutes after DCE on OSA provided. There was no clinically significant change in ESS over time. The DCE on OSA demonstrated effectiveness in increasing CPAP compliance after surgery. Thus, it could be implemented in the surgical setting as part of routine clinical care.