

**“PILOT PROJECT ON EFFECTIVENESS OF VIDEO-ASSISTED TEACHING ON  
KNOWLEDGE AND PRE-PROCEDURAL ANXIETY LEVEL OF PATIENTS  
UNDERGOING UPPER GI ENDOSCOPY IN A TERTIARY CARE HOSPITAL,  
VADODARA.”**

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**ABSTRACT**

**Background of the study:** Upper GI endoscopy is the most essential type of endoscopy in clinical setting. The most common people in decrease knowledge and increase anxiety level of patients who were candidates for upper GI endoscopy. **Aim:** Assess the reliability of self-developed tool on knowledge and anxiety about upper GI endoscopy among patients in Gujarat, India.**Material and method:** Pre-experimental one group pre-test-post-test research design was used to assess the knowledge and anxiety level of patients undergoing upper GI endoscopy and received video-assisted teaching. The evaluation of knowledge and anxiety was done through self structure question and Hamilton Anxiety rating scale. **Result:** Analysis using the collected

data was tabulated and analyzed by using inferential statistics and excel. The results show that among patient's majority 60% having inadequate and 40% adequate knowledge score and anxiety was 80% severe. **Discussion and Conclusion:** Tool was found reliable ( $r=0.81$ ). There is requiring of improvement of knowledge and reduce anxiety level among patients.

**Keywords:** Effectiveness, Video-assisted teaching, Knowledge, Anxiety, Upper GI endoscopy procedure.

## **INTRODUCTION**

Gastrointestinal endoscopy is a simple process but stressful process for the patients, as they do not be given sufficient procedural and sensory information related with it. Patients established most of the practical information verbally and only on the day of the process.<sup>1</sup> Preventing great anxiety during the assessment is central because the patient's anxiety may result in a wide range of potential complication.<sup>2</sup> There is a generally increase in the number of endoscopies being performed due to enhance in the incidence of peptic ulcer, Gastro Esophageal Reflux Disease (GERD), emergence of persistent infectious diseases like hepatitis B and hepatitis C virus infection, improved health consciousness of the public and inclusion of upper GI endoscopy in the screening practice for various diseases. It is predictable that more than 20 million endoscopies are performed yearly in the United States. Out of this, 30.6% endoscopies are Upper GI endoscopy.<sup>3</sup> According to The American Society for Gastrointestinal endoscopy, the overall complication rate of endoscopy was 0.13% with an associated mortality of 0.004%.<sup>6.4</sup>

## **MATERIAL AND METHODS**

The study was conducted by using pre experimental one group pre-test post-test design. Population of this study was patients admitted in a Tertiary Care Hospital, Vadodara. The population in this studies 10 patients who are undergoing upper GI endoscopy procedure. 10 patients were selected as a sample by using non-probability convenient sampling technique. The study included Patients admitted in Tertiary Care Hospital and patients undergoing GI endoscopy procedure for the first time and age below 18 years were excluded. The data collected by a self

structured questionnaire to assess the knowledge and Hamilton Anxiety rating scale to assess anxiety level.

Reliability of tool was assessed by conducting pilot study among 10 patients who participated in this study. A split half method and Karl Person's formula was used to check reliability its result was 0.81. This states that modified self structure question and Hamilton Anxiety rating scale was reliable. Validity of this tool was re examined by 5 experts. Finally all 8 criteria's were determined to assess the knowledge and anxiety of patients undergoing upper GI endoscopy. Data were analyzed using excel. Descriptive statistics and inferential statistics were used.

## **RESULTS**

The majority of patients 6 (60%) age group between 31-35. Male participants were 7 (70%) more than female patients. The 6 (60%) were having primary education, and 3 (30%) belongs to occupation, 8 (80%) were having no any endoscopy related knowledge and 7 (70%) were diagnosis of alcoholic liver disease, 6 (60%) having suffering year above 1 yr.

<b>Sr.no</b>	<b>Knowledge level</b>	<b>Frequency</b>	<b>%</b>	<b>Anxiety level</b>	<b>Frequency</b>	<b>%</b>
1	Inadequate	06	60%	Mild	0	0%
2	Adequate	04	40%	Moderate	20	20%
3	Excellent	0	0%	Severe	08	80%

Table shows that; pre-test knowledge score on upper GI endoscopy all participants having adequate knowledge and majority of patients 6 (60%) have inadequate knowledge on endoscopy

The reliability of the self-developed tool was  $r=0.81$ , indicates that the tool reliable for the research study.

## **DISCUSSION**

In the study population, majority of the patients 15 (30%) belonged to the age group of 31-40 years and were predominantly males 34 (68%). However, the data provided by the National

endoscopic data base revealed that common of the patients undergoing upper GI endoscopy belonged to the age group 50-59 years.<sup>5</sup>

The studies intend of to evaluate the result of video teaching on knowledge and pre procedural anxiety level of patients undergoing upper GI endoscopy. Das S et al. has conducted study on Video teaching knowledge outcome of endoscopy concerning patient's alertness, pleasure and anxiety level and its result shows increase alertness, pleasure and pre procedural anxiety level was decreased.<sup>6</sup>

Results of this study show the inadequate knowledge and severe tense ness of patients who are undergoing upper GI endoscopy. Study conducted by Mohammed, Salwa A. GI endoscopy is aching procedures that cause pain and tension. Knowledge of the patient previous to the procedure leads to decrease worry; the structure learning plan regarding endoscopy had convenience so increase information and decrease anxiety level.<sup>7</sup>

Present study indicates that there is no association between demographic variables about upper GI endoscopy. Which is supported by a study carried out by Malghani WS et al. Retrospective study in 730 (464 male and 266 female) patients undergone upper GI endoscopy. Upper GI bleed so other likely to occur in male gender. The study skillful significant association with male gender and middle age group.<sup>8</sup>

## **CONCLUSION**

This article shows that, there is need of improvement in the knowledge of patients and reduce anxiety level on upper GI endoscopy.

## **ETHICAL CONSIDERATION**

A formal ethical approval received from institutional ethical committee. Informed consent was obtained from participants and assured for anonymity.

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**CONFLICT OF INTEREST:** Author declared that no conflict of interest disclosed.

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