

Do ICU Patient Diaries Promote Recovery?



Psychological and physical sequelae are common following a stay in the ICU. Intensive care diaries are one tool that is intended to improve factual memory of the intensive care stay, and improve recovery. Diaries record the patient's stay in the ICU and outline daily activities, but there is no standard template. Previous studies have found that they are commonly used in Scandinavian countries (in up to 76% of ICUs).

Ullman and colleagues, in a Cochrane systematic review of the use of diaries, found that there was not enough evidence to support their effectiveness in improving psychological recovery after critical illness.

The review, published in the *International Journal of Nursing Studies*, set out to assess the effect of an intensive care unit (ICU) diary versus no ICU diary on patients, and their caregivers or families, during the patient's recovery from admission to an ICU. Three studies were eligible - two about ICU patients, and one about ICU patients' relatives. Outcome measures for describing recovery from ICU included the risk of post-traumatic stress disorder (PTSD), anxiety, depression and post-traumatic stress symptomatology, health-related quality of life and costs.

A survey in Australia of use of patient diaries by Nair and colleagues, published in *Australian Critical Care*, found that use of diaries in Australian ICUs is in its infancy. Only half of the survey respondents had heard of patient diaries. Out of the 194 participants, 19% (n = 37) reported patient diary use in their unit. Fifty (70%) of the non-diary users, who responded, indicated that they were hesitant to introduce them, due to a lack of guiding policies and potential medico-legal ambiguity.

The authors recommend that before promoting uptake of diaries in Australian ICUs formal trial evaluations of their impact, format, and handover processes are needed. In particular, a greater understanding of the psychological impact of diaries on patients and families is required, they suggest.

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