



## 'Superbug' Diagnosis Needs Better Patient Explanation, Study Finds



Although government figures show that hospital acquired infections are declining, for those who are affected, the impact can be significant, causing additional physical complications and persisting distress.

New postgraduate study at the University of Leicester into the emotional and psychological effects of acquiring *Clostridium difficile* whilst in hospital reveals that many patients did not fully understand their diagnosis and its implications, speculated about how it had been contracted and were fearful of long-term consequences.

Conducted by Dr Nicola Parker in the School of Psychology, the study is the first of its kind to investigate the impact of *C.diff* from the patient perspective, which is vital for informing hospital managers of the necessary strategic changes to improve the quality of care. Dr Parker's study shows the lack of information that accompanies the diagnosis, in terms of explaining what it means, how other people might catch it, how it is treated and what the expected recovery path will be, causes additional unnecessary confusion, distress, fear and anxiety in patients and their families.

The study suggests prioritising training of hospital staff to explain what *C.diff* diagnosis might mean to patients in order to mitigate anxiety and confusion. Hospital systems could be enhanced to ensure that patient complaints are dealt with effectively and minimise likelihood of enduring psychological issues arising from infection. Dr Parker commented: "I was personally surprised by the level of distress and frustration felt by the patients that I interviewed for this study, and concerned to hear how little time and care had been given to them when staff delivered a *C.diff* diagnosis.

"I really hope that this research makes a difference to the way that staff think about the emotional and psychological impact of infection diagnosis on patients, and that it may help remind hospital staff that they are treating the whole person, not just the medical condition." Dr Noelle Robertson, clinical senior lecturer with the School of Psychology, commented: "Greater awareness of the psychological consequences of iatrogenic infection is long overdue. This research contributes to a fuller appreciation of patient's experiences of hospital-acquired infection, and the emotional burden *C.diff* can impose, in the short and long term. The findings should alert staff and managers alike to consider how such a diagnosis is given to patients and how care can be improved to fully address patients' understanding and fears about their condition, their treatment and future health."

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