

# **Emotional and Physical Rehabilitation Protocol for Patients Undergoing Permanent Cardiac Pacemaker Implantation**

## ***Thesis***

Submitted for Partial Fulfillment of the Requirements of  
Doctorate in Nursing Science Degree  
Psychiatric/Mental Health Nursing

**By**

**Entisar Mohammed Mahmud Abu-Salem**

M.Sc. Nursing

Assistant Lecturer in Psychiatric /Mental Health Nursing Department

Faculty of Nursing

Beni-Sueif University

**Faculty of Nursing  
Ain Shams University  
2014**

# **Emotional and Physical Rehabilitation Protocol for Patients Undergoing Permanent Cardiac Pacemaker Implantation**

*Thesis*

Submitted for Partial Fulfillment of the Doctorate Degree  
In Nursing Science (Psychiatric/Mental Health Nursing)

*By*

**Entisar Mohammed Mahmoud Abou-Salem**

Assist. Lecturer of Psychiatric /Mental Health Nursing  
Faculty of Nursing – Beni-Sueif University

*Under supervision of*

**Prof. Dr. Sorayia Ramadan  
Abd El-Fatah**

Professor of Psychiatric/Mental Health  
Nursing & Vice Dean for Community  
service and Environmental Affairs  
Faculty of Nursing  
Ain Shams University

**Ass. Prof. Dr. Neamat Allah  
Gomaa Ahmed**

Assistant Professor of Medical  
Surgical Nursing  
Faculty of Nursing  
Ain-Shams University

**Dr. Amal Elias Abdel-Aziz**

Lecturer of Psychiatric/Mental Health Nursing  
Faculty of Nursing - Ain Shams University

**Faculty of Nursing  
Ain Shams University  
2014**



## Acknowledgments

*My sincere gratitude should be submitted for ALLAH who always helps and cares for me.*

*I would like to thank my supervisors, **Dr. Sorayia Ramadan Abdel-Fatah**, Professor of Psychiatric/Mental Health Nursing & Vice Dean for Community service and Environmental Affairs, Faculty of Nursing, Ain-Shams University for her wise guidance, clarity of thought, indispensable care, for her continuous encouragement, and advice in every step of this work, she was the actual spirit of this work.*

*I wish to express my sincere thanks for **Dr. Neamat Allah Gomaa Ahmed**, Assistant Professor of Medical Surgical Nursing, Faculty of Nursing, Ain Shams University for her close, supportive and meticulous thorough supervision, expert guidance, and broad understanding.*

*I am really so grateful to **Dr. Amal Elias Abdel-Aziz**, Lecturer of Psychiatric/Mental Health Nursing, Faculty of Nursing / Ain Shams University, who rendered me the needed support, professional encouragement, and supervision*

*Their wonderful combination of supervision style always made me feel motivated, excited and active throughout my study. The process of working with them was a very enjoyable and unforgettable journey. Their patience and encouragement kept me going to the very end. I am extremely fortunate to have been supervised by both of them.*

*My thanks to all those who helped me in fulfilling this work, with special thanks to all patients who participated in the study.*

*Finally, my special thanks to my parents, my husband and my sons for their unconditional love and great support in keeping my self-confidence, strength and passion, especially when I was facing difficulties or challenges.*



*Entisar Mohammed Mahmoud Abou Salem*



*This work is dedicated to my Parents*

*My Husband and my Kids for supporting  
me and pushing me forward all the time, dealing  
patiently and tactfully during this work*

## **List of Contents**

| <i>Subject</i>               | <i>Page No.</i> |
|------------------------------|-----------------|
| List of Abbreviations.....   | i               |
| List of Tables.....          | ii              |
| List of Figures.....         | v               |
| Abstract.....                | vi              |
| Operational definitions..... | vii             |
| Introduction.....            | 1               |
| Aim of the Study.....        | 8               |
| Review of Literature.....    | vii             |
| Subjects & Methods.....      | 54              |
| Results .....                | 71              |
| Discussion.....              | 98              |
| Conclusion .....             | 115             |
| Recommendations.....         | 116             |
| Summary.....                 | 118             |
| References.....              | 122             |
| Appendices.....              | I               |
| Protocol .....               |                 |
| Arabic Summary .....         | —               |

---

## *List of Abbreviations*

|                |                                                  |
|----------------|--------------------------------------------------|
| <b>AV node</b> | : AtrioVentricular node                          |
| <b>BACR</b>    | : British Association for Cardiac Rehabilitation |
| <b>CCU</b>     | : Coronary Care Unit                             |
| <b>CHB</b>     | : Complete Heart Block                           |
| <b>CHD</b>     | : Coronary Heart Disease                         |
| <b>CR</b>      | : Cardiac Rehabilitation                         |
| <b>ECG</b>     | : ElectroCardioGram                              |
| <b>HB</b>      | : Heart Block,                                   |
| <b>HD</b>      | : Heart Disease                                  |
| <b>HM</b>      | : Heart Manual                                   |
| <b>ICD</b>     | : Implantable Cardioverter–Defibrillators        |
| <b>MHLNs</b>   | : Mental Health Liaison Nurses                   |
| <b>MRI</b>     | : Magnetic Resonance Imagination                 |
| <b>PM</b>      | : Permanent Pacemaker                            |
| <b>PTCA</b>    | : Percutaneous Transluminal Coronary Angioplasty |
| <b>SA node</b> | : SinoAtrial node                                |
| <b>SDHB</b>    | : Second Degree Heart Block                      |
| <b>SSS</b>     | : Sick Sinus Syndrome                            |
| <b>SVT</b>     | : SuperaVentricular Tachycardia                  |
| <b>TDHB</b>    | : Third Degree Heart Block                       |

## **List of Tables**

| <i>Table No.</i>   | <i>Title</i>                                                                                                                                       | <i>Page No.</i> |
|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Table (1):</b>  | Socio-demographic characteristics of the study & control group subjects (n=70). ....                                                               | 72              |
| <b>Table (2):</b>  | Socio-demographic characteristics of the study & control group subjects (n=70). ....                                                               | 73              |
| <b>Table (3):</b>  | Medical history among the study and control group subjects (n=70):.....                                                                            | 74              |
| <b>Table (4):</b>  | Frequency distribution of vital signs among study and control group subjects (n=70). ....                                                          | 76              |
| <b>Table (5):</b>  | Total knowledge levels among the study subjects pre /post pacemaker insertion. (n=70).....                                                         | 77              |
| <b>Table (6):</b>  | Total knowledge levels among the study groups pre /post pacemaker insertion n=35.....                                                              | 78              |
| <b>Table (7):</b>  | Total knowledge levels among the control group pre /post pacemaker insertion n=35 .....                                                            | 79              |
| <b>Table (8):</b>  | One way repeated measures ANOVA total mean knowledge scores of the study and control group throughout the study period n=70. ....                  | 80              |
| <b>Table (9):</b>  | Correlation between total knowledge and practice scores among the two studied groups before insertion, before discharge and follow up (n=70). .... | 82              |
| <b>Table (10):</b> | Correlation between age and total knowledge scores among the two studied groups before insertion, before discharge and follow up (n=70). ....      | 82              |

## *List of Tables (Cont..)*

| <i>Table No.</i>   | <i>Title</i>                                                                                                                                                | <i>Page No.</i> |
|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Table (11):</b> | Correlation between level of education and total knowledge scores among the two studied groups before insertion, before discharge and follow up (n=70)..... | 83              |
| <b>Table (12):</b> | Compliance levels among the study and control group before insertion, before discharge and follow up (n=70):.....                                           | 84              |
| <b>Table (13):</b> | Frequency and severity of depression pre/post implantation among the study and control groups. ....                                                         | 85              |
| <b>Table (14):</b> | Relation among depression and socio-demographic characteristics of study group & control group.....                                                         | 86              |
| <b>Table (15):</b> | Correlation between depression and total knowledge scores among the two studied groups (n=70).....                                                          | 87              |
| <b>Table (16):</b> | Correlation between depression and Practice scores among the study group (n=35).....                                                                        | 88              |
| <b>Table (17):</b> | Frequency and severity of anxiety among patients pre/post implantation and in the study and control groups.....                                             | 89              |
| <b>Table (18):</b> | Relation between anxiety and socio-demographic characteristics of study group & control group.....                                                          | 90              |
| <b>Table (19):</b> | Correlation between anxiety and total knowledge scores among the two studied groups (n=70).....                                                             | 91              |



## *List of Tables (Cont..)*

| <i>Table No.</i>   | <i>Title</i>                                                                                                                                                | <i>Page No.</i> |
|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Table (20):</b> | Correlation between anxiety and practice scores among the study group (n=35).....                                                                           | 92              |
| <b>Table (21):</b> | Radial pulse measurement score levels among the study and control group before insertion, after discharge and follow up (n=70).....                         | 93              |
| <b>Table (22):</b> | Arm exercises practice score levels among the study and control group before insertion, after discharge and follow up n=70. ....                            | 94              |
| <b>Table (23):</b> | Deep breathing practice score levels among the study and control group before insertion, after discharge and follow up n=70. ....                           | 95              |
| <b>Table (24):</b> | Correlation between age and total practices scores among the two studied groups before insertion, after discharge and follow up (n=70).....                 | 96              |
| <b>Table (25):</b> | Correlation between level of education and total practices scores among the two studied groups before insertion, after discharge and follow up (n=70). .... | 96              |
| <b>Table (26):</b> | Rehabilitation assessment score levels among the study and control group before discharge and follow up (n=70).....                                         | 97              |

## *List of Figures*

| <i>Figure No.</i>   | <i>Title</i>                                                                                                                                                                                                                         | <i>Page No.</i> |
|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Figure (1):</b>  | Normal electrical signals in the heart. ....                                                                                                                                                                                         | 12              |
| <b>Figure (2):</b>  | Conduction system of the heart .....                                                                                                                                                                                                 | 13              |
| <b>Figure (3):</b>  | 1 <sup>st</sup> and 2 <sup>nd</sup> degree of heart block.....                                                                                                                                                                       | 15              |
| <b>Figure (4):</b>  | Complete heart block.....                                                                                                                                                                                                            | 15              |
| <b>Figure (5)</b>   | Types of pacemaker .....                                                                                                                                                                                                             | 17              |
| <b>Figure (6):</b>  | Pacemaker Components: Adopted from<br>Procedures, pacemaker implantation (2010):<br>available at <a href="http://www.MichiganHeart&amp;VascularInstitute.com">http//www. Michigan Heart &amp;<br/>Vascular Institute. com.</a> ..... | 18              |
| <b>Figure (7):</b>  | Site of pacemaker implantation .....                                                                                                                                                                                                 | 19              |
| <b>Figure (8):</b>  | Distribution of co-morbidity diseases among<br>the study and control group subjects (n=70) .....                                                                                                                                     | 75              |
| <b>Figure (9):</b>  | Distribution the mean knowledge scores<br>among patients pre- implantation and in the<br>study and control groups n=70 .....                                                                                                         | 81              |
| <b>Figure (10):</b> | Distribution of frequency and severity of<br>depression among patients pre/post<br>implantation in the study and control groups<br>(n=70) .....                                                                                      | 87              |
| <b>Figure (11):</b> | Distribution the Frequency and severity of<br>anxiety among patients pre/post implantation<br>and in the study and control groups (n=70).....                                                                                        | 91              |

## **Abstract**

**The aim** of the study is to investigate the effect of emotional and physical rehabilitation protocol for patients undergoing permanent cardiac pacemaker implantation. **This study** used a quasi experimental design. **The study** was carried out at the inpatient and outpatient cardiac clinic, in Nasr City Health Insurance Hospital. All patients undergoing permanent cardiac pacemaker implantation at Nasr City Health Insurance Hospital along were the target of this study. **The tools** used for data collection were: Taylor Manifest Anxiety Scale to measure the degree of patients' anxiety, Beck Depression Inventory Scale to measure the degree of patients' depression and a questionnaire to assess the physical needs of the patients. **The main findings** of the study were: There was no statistically significant difference between control and study groups before rehabilitation protocol implementation. There was a high statistically significant difference between control and study groups after rehabilitation protocol implementation regarding emotional and physical needs or knowledge for patients undergoing permanent cardiac pacemaker implantation. **The study recommended**, conduction of further studies in order to assess the effectiveness of emotional and physical rehabilitation protocol applications on patients outcome regarding different cardiac disorders with replication of this study on a larger probability sample from different geographical locations in Arab Republic of Egypt.

## Operational Definitions

|                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Protocol</b>                | <p>Means a series of actions (which may include a number of medications) that may be implemented to manage a patient's clinical status. A protocol allows the application of specific interventions to be decided by the nurse based on the patient meeting certain criteria outlined in the protocol as long as the intervention is within the scope of practice of the nurse.</p> <p>A protocol including alternative actions or exceptions to the prescriptive orders, that, allows for patient circumstance to be assessed by the nurse. These exceptions are addressed by application of an algorithm that is a step-by-step procedure for solving a problem or accomplishing the intervention. An agency may, if it chooses, have protocols that are developed by authorized practitioners and are designed to standardize and optimize patient care in accordance with current clinical guidelines or standards of practice.</p> |
| <b>Rehabilitation</b>          | <p>Rehabilitation is a treatment or treatments designed to facilitate the process of recovery from injury, illness, or disease to as normal a condition as possible. Patients participate in rehabilitation either by going to inpatient sessions for a certain amount of time or visiting the facility on a daily basis for visits until he or she no longer needs the therapy.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Cardiac Rehabilitation:</b> | <p>Rehabilitation of cardiac patients is the sum of activities required to influence favorably the underlying cause of the disease, as well as the best possible physical, mental and social conditions, so that they may benefit by their own efforts preserve or resume as normal a place in the community</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |

|                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|--------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Psychological Rehabilitation:</b> | Psychological rehabilitation is the process of facilitating an individual's restoration to an optimal level of independent functioning in the community. While the nature of the process and the methods used differ in different settings, psychological rehabilitation invariably encourages persons to participate actively with others in the attainment of psychological health and social competence goals. Psychological rehabilitation is frequently defined as the activity of a set of specialist services. An alternative formulation would be in terms of the needs or characteristics of people who would benefit from rehabilitation interventions, as 'people with severe and long-term emotional problem who have both active. symptomatology and impaired social functioning as a consequence of their mental illness'. |
| <b>Physical Rehabilitation:</b>      | One of the many different types of rehabilitation program is a physical therapy that helps people regain use of a body part that was injured or that sustained deterioration from a medical condition. During physical therapy, a physical therapist tries to decrease the amount of pain the person has, as well as improve function and mobility. The therapist also develops a treatment plan consisting of exercise, hot and cold massages and nerve stimulation therapy. Some individuals require extensive physical therapy for many months such as those who have hurt several body parts from being in an accident                                                                                                                                                                                                               |
| <b>Liaison psychiatric nurse:</b>    | Liaison psychiatric nurse, also known as consultative psychiatry or consultation-liaison psychiatric nurse is the branch of psychiatry that specializes in the interface between medicine and psychiatry, usually taking place in a hospital or medical setting. The role of the consultation-liaison psychiatrist is to see patients with co morbid medical conditions at the request of the treating medical or surgical consultant or team.                                                                                                                                                                                                                                                                                                                                                                                           |

## Introduction

Normally the heart generates its own electrical currents allowing it to beat at various rates according to the daily needs. When there are blocks in the pathways through which the current flows (heart blocks) are helped by using a small battery operated device called artificial pacemaker which stimulates the heart (**Kusumoto & Goldschlager, 2011**).

Artificial cardiac pacemakers are electronic devices that deliver electrical stimulation to the heart. They are utilized in the treatment of cardiac bradycardia and tachycardia that are caused by an alteration in the normal electrical pathways in the heart. Artificial pacemakers send out tiny electrical impulses down through a lead to the heart muscle that receives the electrical signal to contract (**Wilkoff, 2011**).

Patients undergoing cardiac pacemaker implantation may experience anxiety and significant symptoms of depression due to fears and worries about surgery itself, surgical outcomes and any complications following surgery as pain or discomfort and their ability to return to normal life and work (**Miller, 2009**).

From another point of view **Kutalek and Maquilan (2012)** patients perceive the device as an electronic security as a source of physical and emotional discomfort; it was found that the possible loss of the function of body senses causes a major threat to perception of body image. Introducing a foreign body

into the heart may cause a change in body image that, causes problems in psychosocial adaptation and contribute to development of affective disorders (***French & Phillips, 2012***).

Intense emotions such as anxiety, anger, elation and depression are accompanied by predictable increases in heart rate and blood pressure. The interaction of heart and psyche is bi-directional (***Kawachi, 2009***). According to ***Scheier (2011)*** emotions and stressful experiences affect the heart directly through the autonomic nervous system, and indirectly through neuro-endocrine pathways. Clinicians dating back to Sir William Osier have observed that a surprising number of Heart Disease (HD) patients seem to be compulsive, driven, overachievers, and are unable to relax and quick to feel angry and frustrated when things do not proceed as planned.

Patients with anxiety and depression can experience physical symptoms including; headache, dizziness, nausea, muscle weakness, fatigue, sweating, and difficulty to fall asleep or even more intense symptoms such as chest pain, palpitations, shortness of breath. These can exacerbate symptoms of existing cardiovascular disease which adversely affect physiological parameters before and during any procedure and may result in prolonged recovery period (***Roll and Theorell, 2010***).