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Informed Consent: The Surgical Patient's Experience in a Tertiary Hospital in Northwest Nigeria

Consentement Éclairé: l'Expérience d'un Patient Chirurgical dans un Hôpital Tertiaire du Nord-Ouest du Nigéria

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ABSTRACT

BACKGROUND: Obtaining informed consent (IC) before a surgical procedure is the cornerstone of medical practice. The practice of IC continues to evolve as litigations increase. Most studies on patients' perspectives of IC are either old or were done in southern Nigeria. This study assessed the surgical patients' IC experience in a tertiary hospital in northwest Nigeria. **METHODS:** This cross-sectional study assessed 244 consecutive patients who had elective surgeries in surgical departments of a tertiary hospital. Pretested questionnaires were used to collect data regarding their perception of the meaning of IC, the process of obtaining it, satisfaction with how it was obtained, and factors associated with satisfaction on how consent was obtained.

RESULTS: Most were females (61.9%); their mean age was 34.8±14.3 years; 52.9% and 61.9% of respondents did not believe that IC enables patient-clinician shared decision-making or patient's self-decision making, respectively. Most were allowed to ask questions (83.2%), received information on the surgical procedure (91.4%), diagnosis (97.9%); however, 38.5% and 48.8% did not receive information about surgical procedures' immediate and long-term complications, respectively. Surgical procedure explanation was mostly provided by Resident Doctors (53.7%). Most (88.9%) were satisfied with how IC was obtained; satisfaction was associated with being allowed to ask questions, receiving explanations on diagnosis, surgical-procedure, complications of surgery, available alternative treatments, and when the resident/consultants gave the explanation (all P<0.05).

CONCLUSION: Deficiencies exist in the process of getting IC. Satisfaction with this process was high though associated with following the recommended strategies. Improving the IC process will require appropriate interventions in this and similar settings. **WAJM 2022; 39(5): 471–478.**

Keywords: Informed consent, Kano, patient experience, surgical patients, tertiary hospital.

RÉSUMÉ

CONTEXTE: Obtention du consentement éclairé (CI) avant une intervention chirurgicale la procédure est la pierre angulaire de la pratique médicale. La pratique de l'IC continue d'évoluer à mesure que les litiges augmentent. La plupart des études sur les patients les perspectives d'IC sont soit anciennes, soit ont été faites dans le sud du Nigeria. Cette étude a évalué l'expérience IC des patients chirurgicaux dans un tertiaire hôpital dans le nord-ouest du Nigeria.

MÉTHODES: Cette étude transversale a évalué 244 études consécutives les patients qui ont subi des chirurgies non urgentes dans les services chirurgicaux d'un tertiaire hôpital. Des questionnaires prétestés ont été utilisés pour recueillir des données concernant leur perception de la signification de l'IC, le processus d'obtention, la satisfaction à l'égard de la façon dont il a été obtenu et les facteurs associés à la satisfaction quant à la façon dont le consentement a été obtenu.

RÉSULTATS: La plupart étaient des femmes (61,9 %); leur âge moyen était de 34,8 ±14,3 ans; 52,9 % et 61,9 % des répondants ne croyaient pas que l'IC permettait la prise de décision partagée patient-clinicien ou l'auto-décision du patient, respectivement. La plupart ont été autorisés à poser des questions (83,2 %), reçu de l'information sur l'intervention chirurgicale (91,4 %), le diagnostic (97,9%); toutefois, 38,5 % et 48,8 % n'ont pas reçu d'information sur les complications immédiates et à long terme des interventions chirurgicales, respectivement. L'explication de la procédure chirurgicale a été principalement fournie par médecins résidents (53,7 %). La plupart (88,9 %) étaient satisfaits de la façon dont IC a été obtenu; la satisfaction était associée au fait d'être autorisé à poser des questions, recevoir des explications sur le diagnostic, la procédure chirurgicale, complications de la chirurgie, traitements alternatifs disponibles et quand le résident/les consultants ont donné l'explication (tous P<0.05).

CONCLUSION: Des lacunes existent dans le processus d'obtention de l'IC. La satisfaction à l'égard de ce processus était élevée, bien qu'elle soit associée à en suivant les stratégies recommandées. L'amélioration du processus de CI permettra nécessitent des interventions appropriées dans ce contexte et dans des contextes similaires. **WAJM 2022; 39(5): 471–478.**

Mots-clés: Consentement éclairé, Kano, expérience du patient, chirurgie patients, hôpital tertiaire.

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