



Patient Intensive Care Journals to Mitigate Post Intensive Care Syndrome

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"We must do more than help the person's body survive the trauma of serious illness. We must treat and support the whole person to allow for a full recovery of body, mind, and soul". Glenda Sartore

Research Highlights

- There is little evidence that interventions to mitigate PTS and PTSD following ICU treatment are utilized in Canada (Kredenster et al., 2018), (Howard et al., 2019).
- In a seminal study (Jones et al., 2010), ICU diaries were shown to be helpful interventions to mitigate PTSD. Since that time, studies have varied in their conclusions on the efficacy of ICU diaries on mitigating PTSD. It is likely that variances in diary construction and use have an impact on these inconclusive results.
- Most research in the area of PTSD following ICU treatment has been done in the medical field. Few studies in my lit review have been published in psychological journals. This likely indicates a gap in the research. PICS is a medical term that includes physical and cognitive impairments with mental health sequelae. It is possible that psychology has not found its place yet in the highly technical and medical arena of ICUs.

Rationale for a Patient ICU Journal

This capstone project is in response to a desire to provide support and interventions to mitigate PICS in ICU survivors. It is based on ICU diaries which are kept by medical staff for patients. This is a common intervention in European ICUs to address PICS. Although ICU diaries have been piloted in Canada (Kredentster et al., 2010), it is speculated that their use is impeded due to fear of lawsuits on the part of hospitals (Bienvenu, O.J., and Gerstenblith, T., 2017).

A **Patient ICU Journal**, kept by a patient's loved ones, offers the benefits afforded by ICU diaries, without the legal concerns of having medical staff record information outside of formal medical records. Patient ICU Journals help to educate patients on the possibility of experiencing PICS. As well, they aim to encourage ICU survivors to work with a mental health professional to alleviate any psychological sequelae.



Theories Supporting Patient ICU Journals

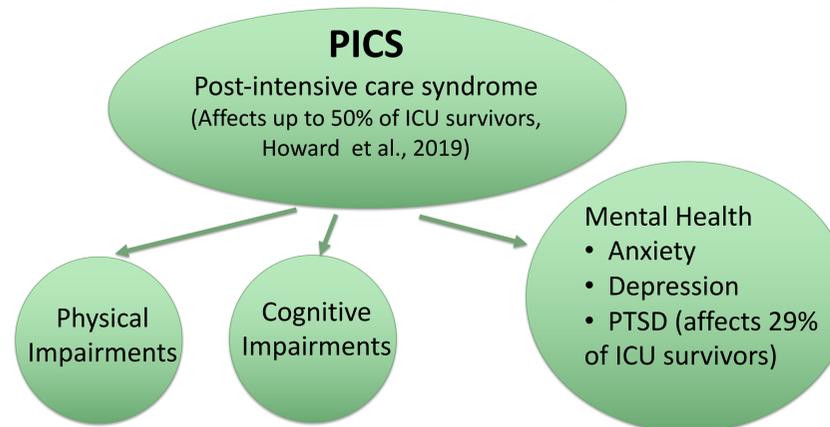
Cognitive Processing Therapy (CPT) helps patient explore unhelpful beliefs surrounding trauma and create a new understanding and concept of the trauma. A Patient ICU Journal allows the patient to further explore thoughts and experiences related to their ICU experience that they may not otherwise have a clear memory of (Resick, Monson, and Chard, 2017).

Narrative Therapy (NT) invites a patient to explore a different way to understand a problem. NT views the person as the expert and the problem as separate from the person. A Patient ICU Journal plays a significant role in helping an ICU survivor construct an illness narrative that becomes part of their overall life narrative. It affirms the patient's ability to take agency in their life after a time of incapacity (White and Epston, 1990), (Egerod, Storli, and Akerman, 2011).

Humanistic-Existential Therapy aims to assist patients in finding a new sense of purpose and to more fully embrace life following a traumatic event. It recognizes that traumatic events often provoke challenging inner experiences that are existential in nature. These may be feelings of fear, isolation, anxiety and despair. A Patient ICU Journal may help a patient to search out and find meaning in, and grow from, their ICU experience (Vachon, Bessette, and Goyette, 2016).

What is Post Intensive Care Syndrome (PICS)?

PICS refers to physical, cognitive, and mental health impairments that decrease the quality of life of ICU survivors. Mental health impairments include depression, anxiety, posttraumatic stress (PTS), and posttraumatic stress disorder (PTSD) that can occur when a person has experienced ICU treatment. These symptoms may persist long after the person is physically recovered.



What is a Patient ICU Journal?

A Patient ICU Journal is based on the research and practice of ICU Diaries and their effectiveness in reducing PTS and PTSD. ICU diaries, common in European ICUs, are written by medical staff and given to the patient following ICU discharge. In contrast, Patient ICU Journals are kept by the patients' loved ones with the aim to promote the patients' psychological health following discharge, and encourage post-traumatic growth with the support of a mental health therapist. It contains general information on what it is, who fills it out, what to write, and why it is helpful. It also includes information to help patients and loved ones after ICU treatment, including how to access mental health support.

Patient ICU Journal Information

WHY: Maintaining a **Patient ICU Journal** is an act of caring and empathy for the patient. As well, it may help the patients' psychological recovery by explaining chaotic experiences and avoiding a sense of isolation the patient may experience in having missed out on this liminal time of their life. As well, a Patient ICU Journal helps to humanize a highly technical and medical experience (Beg, Scruth, and Liu, 2017).

A **Patient ICU Journal** may aid follow-up mental health care as it can be used to engage the patient in post-ICU care conversations (Storli et al., 2009), it helps create a narrative of what happened during the ICU admission (Akerman et al., 2012), aids in finding meaning in the ICU experience and places the experience in the context of the patients' life and beliefs (Egerod et al., 2011).

WHO, WHERE, and WHEN: **Patient ICU Journals** are booklets given to the patients' loved ones at the first opportunity after the patient is admitted to the ICU. It is provided by an ICU staff member and kept at the bedside of the patient.

This interaction provides an opportunity for ICU staff to connect with family members regarding the psychological impact of ICU treatment and strategies to help cope with this traumatic time.

Did you know?

- ICU survival rates are increasing due to advances in science and medical technology. Currently 80% of ICU patients survive treatment in the ICU (Howard et al., 2019).
- The prevalence of PTS and PTSD, a component of the psychological sequelae of PICS, is estimated at 29% following ICU treatment (Davydow, Gifford, and Needham, 2008).
- PTSD was added to the Diagnostic and Statistical Manual of Mental Disorders (DSM-3) in 1980. Medically based trauma was added to the DSM-IV (1994) and the definition of what constituted medical trauma was revised in the DSM-V (2013), with no specific mention of ICU treatment.

Reflections

This project has emerged from my experience of posttraumatic stress following my illness and ICU treatment. My experience has led to the development of an intervention that will benefit ICU survivors and provide a bridge to receiving the psychological support they need to make a full recovery and re-enter the fullness of their lives. I am motivated to pursue this knowing that many others who have survived critical illness are suffering in silence with posttraumatic stress. This caring, loving, and thoughtful intervention promises to help survivors along their path of posttraumatic growth.

Next steps:

- Study outcomes of use of Patient ICU Journals on PICS
- Provide therapist-lead individual sessions, or group workshops, to process Patient ICU Journals with survivors.
- Pursue use of Patient ICU Journals in other hospitals