Correspondence

Effective transition: A dual and stressful challenge for patients in the intensive care unit

Reza Abdollahi *

a. Nursing and Midwifery School, Urmia University of Medical Sciences, Urmia, Iran

*Corresponding author(s): Reza Abdollahi (PhD student), Nursing and Midwifery School, Urmia University of Medical Sciences, Urmia, Iran.

Email: rezaabdollahi97@yahoo.com

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To the Editor

Patients in the intensive care unit (ICU), who generally recover from a difficult and life-threatening condition, often suffer from its complications in various physical, mental, psychological, and social dimensions [1]. It is necessary to adjust these conditions and prevent the spread of their complications, to support the recovery of these patients. Therefore, proper preparation of the patient in different dimensions and correct education of them during transfer from the ICU are vital [2]. Although discharge is a positive step towards the patient’s recovery, a patient who is not mentally or physically ready to transfer to the ward will experience severe anxiety during the transfer from the ICU to the general ward, which is caused by a phenomenon called the effective transition [3].

The term transition is used to describe the process of change in developmental stages of life or change in health and social conditions rather than a reaction to change. This transition is accompanied by changes in identity, role, communication, ability, and behavior, which requires new knowledge, behavior change, and self-definition for a person to adapt. Factors that can affect the transition process include preparation and planning, individual knowledge, meaning and experience of transition, individual transitioning environment, and finally emotions and well-being [4].

Transferring a patient from the ICU to the general wards of a hospital is a complex process with potential psychological and physical challenges and is also one of the most vulnerable transfers facing patients [5]. Patients admitted to the special ICU may experience several complications. These transfers can affect the health-disease status, tension, and anxiety of patients and can be considered as a health threatening factor for patients. The transition from specialized, technical care from a safe environment to general care, which is a vulnerable and unpredictable environment, can be challenging and frustrating for patients [6]. During this period, patients and their families may experience feelings such as insecurity, despair, fear, and anxiety, which over time can affect the results of the patients’ recovery and be accompanied by complications such as fatigue and depression [7]. Furthermore, in the case of poor management and improper coordination in the transfer process, treatment goals will not be achieved. Problems such as long-term hospitalization, high costs of care, higher degree of disability and mental stress for the patient and family are the consequences of incorrect coordination [8].

In sum, the transfer of patients from the ICU can be a double and anxiety-inducing challenge, because, a step forward is taken for recovery and in case of noncompliance with the standards of transfer and education of the patient to reduce his anxiety, can endanger the health and safety of the patient and may even lead to death. Therefore, it seems necessary for the hospital authorities to design and implement programs such as continuous training for nurses and healthcare workers, implement training programs for patients and families in a practical way, eliminate risk factors in patient transfer and identify high-risk patients, safe hospitalization without anxiety for patients to prevent unwanted side effects, and speed up the recovery process.

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