PRACTICES OF NURSES IN MANAGEMENT OF PAIN AMONG CRITICALLY ILL NON-VERBAL ADULT PATIENTS IN THE CRITICAL CARE UNIT, KENYATTA NATIONAL HOSPITAL

BY

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SUPERVISORS' APPROVAL

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ABSTRACT

Background: Pain is a common distressing symptom among the critically ill patients, yet its assessment and management remains a major challenge to critical care givers because self-report is frequently compromised by altered level of consciousness, sedation and invasive procedures. Hence pain assessment among the critically ill nonverbal patients should remain a top priority among nurses who are the primary group of health care professionals responsible for the ongoing monitoring of patients to ensure that pain is effectively and appropriately managed.

Objectives: The researcher sort to establish the practices of nurses in management of pain among critically ill non-verbal patients in the critical care unit.

Methodology: A cross sectional study design and convenient sampling method was employed to obtain a sample size of 86 nurses working in the critical care unit, Kenyatta National Hospital. A self administered Questionnaire and an observation checklist were used to collect data. Data was entered and analyzed using SPSS version 17. Continuous data was analyzed using t-test. Categorical data was analyzed using chi- square. Measurement of association between the independent variable with key dependent variables was ascertained through logistic regression modeling.

Results: Nurses working in the critical care unit had inadequate knowledge on pain assessment and management with an overall knowledge score of 8.26 (SD$\pm$2.23). Overall attitude score on a 3 Likert scale was 84% indicating positive attitude. Nurses significantly ($P<0.05$) considered physiological indicators more than behavioral indicators of pain in deciding to intervene. Lack of pain assessment tool to guide nurses and lack of well laid out regulations for frequent pain assessments, significantly ($P<0.05$) prevent nurses from rating the patient's level of pain. Results from binary logistic regression analysis indicated that the nurse's age (*p=0.065*), duration

worked in critical care unit (*p=0.057*) and duration after critical care training (*p<0.05)*) were key determinants of effective pain management.

Conclusion: Overall, critical care nurses need to be trained on pain assessment and management principles to improve on their knowledge for effective practice. It is also necessary to have a standard pain assessment tool for critically ill nonverbal patients with well laid out guidelines on the use of the tool. There is also need for policy change to enable critical care trained nurses prescribe analgesics based on assessment and clinical judgment without waiting for the doctor to prescribe.