

MENTAL HEALTH AND POSTOPERATIVE PAIN



Anne Shirley Hoselton, Taylor Jamali, Aubrey White, MD, Kari Teigan, MPH, Andy Vu, MD

RESEARCH QUESTION

Do women who score highly on preoperative assessment of anxiety, depression, and perceived low social support report higher pain scores after hysterectomy?

BACKGROUND

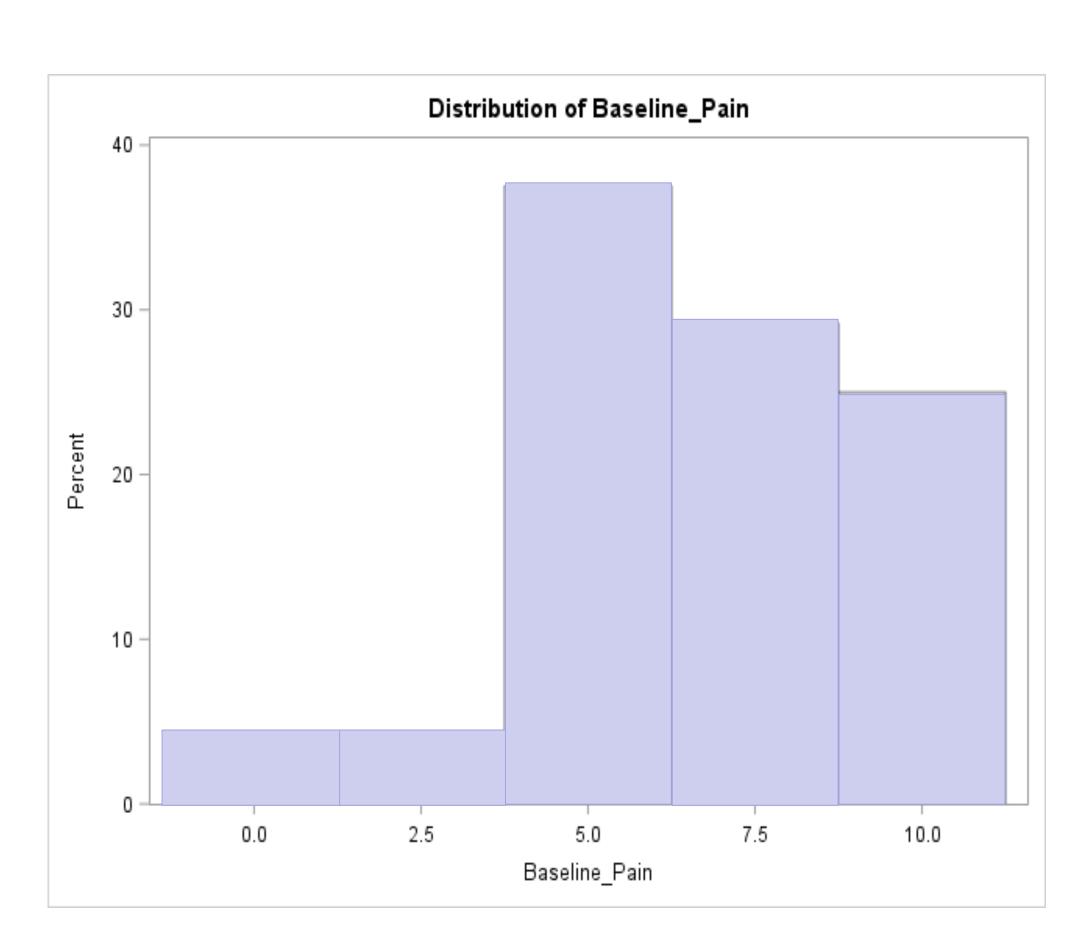
Because hysterectomy is one of the most common surgical procedures performed in the US, it is imperative to understand what preoperative factors can affect surgical outcomes.

METHODS

Preoperative mental health surveys were conducted. After the hysterectomy, pain scores were documented at regular intervals. Surveys were again collected at 6 weeks post-op. Descriptive statistics describe the preliminary data.

RESULTS

31 women have been enrolled in the study, and 16 have completed the data collection.



Preoperative Anxiety, Depression, and Perceived Low Social Support May Negatively Impact Postoperative Pain in Women Undergoing Hysterectomy

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Pain Score (0-10)
PHQ-SADS
MSPSS

Surgery

1 day post-op ↓
Pain Score (0-10)

2 wks post-op ↓
Pain Score (0-10)

6 wks post-op ↓
Pain Score (0-10)

PHQ-SADS
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QR code for more information

GAD-7 score	
Minimal (0-4)	6 (25%)
Mild (5-9)	5 (21%)
Moderate (10-14)	5 (21%)
Severe (15-21)	8 (33%)
Anxiety Attack	
Yes	7 (29%)
PHQ-15	
None or mild (0-4)	7 (29%)
Moderate (5-9)	5 (21%)
Moderately Severe (10-14)	8 (33%)
Severe (15-30)	4 (17%)
PHQ-9	
None (0-4)	7 (29%)
Mild (5-9)	6 (25%)
Moderate (10-14)	3 (13%)
Moderately Severe (15-19)	O (400/)
Ω_{α}	3 (13%)
Severe (20 +)	5 (21%)
MSPSS	
Low	0
Moderate	9 (38%)
High	15 (63%)

FUTURE DIRECTIONS

Additional studies can be conducted to determine possible interventions for improving preoperative mental health status, and mental health status can be included in surgical optimization.