

## FEATURE ARTICLE

# Before the Teaching Begins: Managing Patient Anxiety Prior to Providing Education

Pamela L. Stephenson, RN, MSN, CS, AOCN®, CHPN

Patients experiencing cancer also can experience anxiety. Moderate to severe levels of anxiety can interfere with patients' ability to concentrate and comprehend new information. The condition is particularly troublesome when trying to present educational material related to recommended treatment interventions. Patients' understanding of the material is critical to ensure informed consent. Informed consent can be compromised if patients are unable to understand the information being provided. Nurses must be cognizant of the impact that anxiety has on patient education and assess patients prior to initiating patient teaching. By managing anxiety before beginning education, nurses can provide an environment more conducive to learning.

**T**he United States' current medical system encourages patients to be active participants in their plans of care. Unfortunately, after a cancer diagnosis, decisions must be made quickly, which can be overwhelming and result in patients experiencing psychosocial distress, including anxiety (Gobel, 1996).

Anxiety is defined as a response to a perceived threat and is associated with a vague, unpleasant uneasiness (Clark, 1992). Approximately 28% of the general population will meet the criteria for anxiety at one point in their lifetime (Kaplan & Sadock, 1998). The number rises to 44% among those diagnosed with cancer, illustrating the prevalence of the problem (National Cancer Institute, 2006). Anxiety can occur with or without associated depression. Not all anxieties are severe enough to be debilitating. Pathologic anxiety disorders include phobias, panic attacks, and post-traumatic stress disorder (Kaplan & Sadock).

Mild anxiety can be useful during a crisis by making individuals more alert to their environment. As attention and awareness are stimulated, concentration is enhanced. Unfortunately, once anxiety escalates to moderate levels, concentration becomes compromised. Severe or panic anxiety experienced by patients can be detrimental to learning and should be managed before education begins (Smith-Alnimer, 1996).

Significant levels of anxiety can threaten patients' quality of life and interfere with their ability to concentrate and understand information, ultimately influencing informed consent (Bush, 1998). Because people can experience anxiety at any point during the cancer trajectory, clinicians always should be aware of patients' anxiety levels, particularly as new information is presented (Clark, 1992).

Nurses may be unaware of the impact that anxiety has on patients' ability to concentrate and learn. This article will discuss the importance of assessing and managing anxiety before initiating

### At a Glance

- ◆ Patients can experience anxiety at any point during their cancer experience.
- ◆ Moderate to severe levels of anxiety can interfere with a person's ability to comprehend information.
- ◆ Managing anxiety prior to providing patient education can improve patient comprehension and informed consent.

patient education related to a cancer diagnosis or treatment. Although patients may experience several types of psychological distress with cancer (e.g., depression, denial) and nurses are capable of providing many interventions that facilitate learning, this article will focus on patients with significant anxiety prior to patient education and its impact on comprehension and learning.

### Types of Anxiety

Several types of anxiety have been described, including reactive, preexisting, and anxiety related to drugs or medical conditions (Sivesind & Rohaly-Davis, 1998). Reactive anxiety, also known as situational or stress anxiety, is an acute form of anxiety that occurs in response to a stressor or traumatic event. Needle phobias or claustrophobia associated with magnetic

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Pamela L. Stephenson, RN, MSN, CS, AOCN®, CHPN, is a clinical nurse specialist of oncology at Forum Health's Cancer CareCenters in Youngstown, OH. No significant financial relationship to disclose. (Submitted March 2004. Accepted for publication June 21, 2005.)

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