Attitude of Pregnant Patients Toward Informed Consent

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Key Words: pregnant patients; patients' rights; informed consent; inpatient care.

Summary. The purpose of informed consent is informed and justified patients' decision-making. Objective. The aim was to assess the attitude of pregnant patients toward the application of informed consent in an inpatient health care institution.

Methods. An anonymous questionnaire survey of 304 pregnant women (response rate, 84%) was carried out in the Clinic of Obstetrics and Gynecology, Hospital of Lithuanian University of Health Sciences.

Results. Nearly all pregnant women (98%) confirmed that they were aware of the right to information about their health status. More than 90% of the patients indicated that they were more often satisfied with the information received from obstetricians-gynecologists who provided the patients with the information about their health status in an understandable manner in comparison with midwives (P<0.001). The majority (n=237, 77.9%) of the pregnant women were satisfied with the procedure of giving informed consent; however, more than half of the respondents considered this procedure as the physicians' protection. The informed consent was read before being signed by 230 respondents (75.7%).

Conclusions. Almost all the pregnant patients were aware of the right to information about their health status and satisfied with the procedure of giving informed consent in the health care institution.

Introduction

Information exchange is one of the core processes in medicine with great importance on the treatment and care of patients. Information of patients gives an opportunity to achieve better treatment results (1). The problem of the doctor-patient relationship arose and progressed because of various factors concerning the patient, doctor, and health care system, influenced by the changes in the society and health care policy itself (2). Progress in biomedical sciences and application of innovations in medical practice in the second half of the 20th century have greatly expanded the scope of health care services (3, 4). The nature of the doctor-patient relationship has also changed. The traditional paternalistic approach that was prevalent earlier has gradually been replaced by the principle of person's autonomy (5). Namely, informed and justified patients' decision-making is the purpose of informed consent. By giving informed consent under their own free will, patients concurrently implement their right to person's immunity and decision-making, including decisions about their health care (6).

The latest research suggests that an active participation of informed patients in medical decision-making increases their satisfaction with and confidence in health care facilities, contributes to

more effective representation of patients' rights, encourages patients' responsibility for their health status (7–11), improves the quality of health care services, and enhances effectiveness of the services provided (12). Informed consent is one of the key principles in modern medicine. It has been confirmed by international legislation and codes of ethics. It is one of the best known and one of the most frequently discussed ethical principles (13).

In Lithuania, patients' rights have been recently expanding to receive full information from physicians with regard to the patient's health status, anticipated course of treatment, prognosis, examinations, and available treatment methods. Patients' signatures for the information provided to them have been obtained in Lithuanian health care facilities since 2005 when the new version of the Law on the Rights of Patients and Compensation of the Damage to their Health (RPCDH) came into force. The patient shall accept or reject the proposed treatment against signature. The problem of informed consent has been analyzed more often in clinical practice than biomedical research (14). The present research was aimed at assessing the pregnant patients' attitudes toward the application of informed consent in inpatient health care facilities.

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Material and Methods

The anonymous questionnaire survey of pregnant women was carried out in the Clinic of Obstetrics and Gynecology, Hospital of Lithuanian University of Health Sciences, in 2007. All the pregnant women staying in the hospital during the period at issue were offered to take part in the survey. Those who agreed to participate were asked to fill in the anonymous questionnaire. To ensure confidentiality, the respondents were asked to put the completed questionnaires into a special box. The questionnaire was prepared by the researchers in accordance with the Law on RPCDH and deep scientific literature review (15-18) and consisted of 27 items. The first 4 questions dealt with the sociodemographic situation of the respondents; questions 5 through 15 were intended to find out the attitudes of the pregnant women toward the form of giving informed consent; questions 16 through 27 were about the nature and quality of the information provided by obstetriciansgynecologists (physicians) and midwives. The questionnaire was modified after a pilot testing.

A total of 360 questionnaires were handed out, and 304 were returned back (response rate, 84%).

The research was authorized by the Centre for Bioethics of the Lithuanian University of Health Sciences.

SPSS 10.0 statistical analysis software was used in the data analysis. Relationships between variables were evaluated using the chi-square (χ^2) test, and the degree of freedom (df) was calculated. The dif-

ferences of data were considered statistically significant when P<0.05.

Results

The majority of the respondents (98%) affirmed that they were aware of the right to information about their health status. When answering the questions related to patient's informed consent, 281 pregnant women (92.4%) confirmed that all the procedures (treatment and laboratory tests) they were to undergo during their hospitalization were explained to them in a clear manner. Physicians, in comparison with midwives, were reported to have provided the health-related information (information about health status and diagnosis, treatment and alternative treatments, and prognosis) in a manner that was clearer and better understandable by the patients (P<0.001) (Table 1). However, midwives outperformed in providing organizational information about the in-house rules of order and services provided by the health care institution as well as possibilities to access them (P<0.001) (Table 2).

Nearly 75% of the pregnant women reported that they read the informed consent before signing it, and about 4% of the respondents did not understand what they were signing it. Nonetheless, about 80% of all the respondents maintained that they were satisfied with the procedure of the application of informed consent; despite that, 160 (52.6%) of them stated that the implementation of patient's informed consent was necessary only to protect

Table 1. Attitude of Pregnant \	Jomen Toward Nature and Quality of Health-Related Information Provided	
_	by Physicians and Midwives	

Information on	Provided by	In an Understandable Manner n (%)	In a Partially Understandable Manner n (%)	Not Provided n (%)
Health status and diagnosis	Physician	272 (89.6)*	25 (8.0)*	7 (2.4)
	Midwife	236 (77.8)	57 (18.7)	11 (3.5)
Methods and course of treatment	Physician	258 (84.8)*	40 (13.0)	6 (2.2)
	Midwife	229 (75.4)	59 (19.4)	16 (5.2)
Treatment prognosis and likely treatment outcomes	Physician	239(78.5)*	55 (18.3)*	10 (3.2)
	Midwife	202 (66.5)	73 (24.0)	29 (9.5)
Available alternative methods of treatment	Physician	188 (61.7)*	41 (13.5)	75 (24.8)
	Midwife	159 (52.3)	60 (19.7)	85 (28.0)

^{*}P<0.001, comparing physician and midwife.

Table 2. Attitude of Pregnant Women Toward Organizational Information Provided by Physicians and Midwives

Information on	Provided by	In an Understandable Manner n (%)	In a Partially Understandable Manner n (%)	Not Provided n (%)
Services provided in the institution and possibilities to access them	Physician	183 (60.2)*	57 (18.7)	64 (21.1)*
	Midwife	216 (71.1)	48 (15.9)	40 (13.0)
In-house rules of order	Physician	130 (42.9)*	32 (10.5)	142 (46.6)*
	Midwife	199 (65.3)	30 (10.0)	75 (24.7)

^{*}P<0.001, comparing physician and midwife.

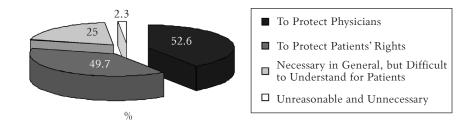


Fig 1. Attitudes of pregnant women as to why the procedure of written informed consent is necessary to be applied in an inpatient health care institution

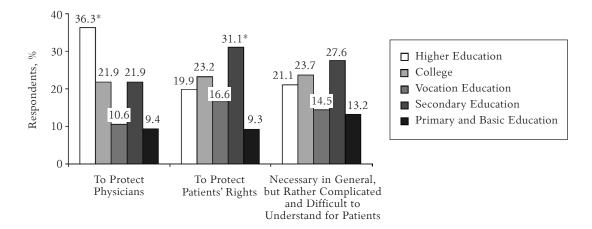


Fig. 2. Attitudes of pregnant women toward the procedure of written informed consent in relation to the level of their education (%) *P < 0.05, comparing in item groups.

physicians (Fig. 1). This opinion was supported by one-third of the patients with a university degree. Around 30% of the respondents with the secondary education said that the procedure was necessary to protect the patients' rights (Fig. 2).

Discussion

Physicians have a duty to protect and extend human life, but in doing so, they should take into consideration the patient's individual decision and preserve his/her dignity. Justified patient decision-making constitutes the purpose of informed consent. The participation of patients in decision-making related to their health increases patients' confidence in a health care institution and satisfaction with the quality of health care services (16–18).

Although an active patients' involvement in decision-making today becomes an integral component of the health care system, there have been no studies or research conducted so far to analyze the attitudes of pregnant patients toward the application of informed consent in inpatient health care institutions in Lithuania.

The present survey revealed that nearly all the pregnant patients were aware of their right to receive full information about the health status from a physician. Similar findings were obtained in 2008 in

a survey covering oncological patients in Lithuania (19). Nearly all the male and female respondents were aware of their right to the information about their health status, examinations, and treatment applied (19). In our study, most of the patients of the Department of Obstetrics were satisfied with the information provided by physicians as compared with only two-thirds of oncological patients satisfied with the information received from physicians (19).

Likewise, the survey results showed that the information about health status and diagnosis was provided to the pregnant women in a manner best understandable to them; the information about the alternative methods of treatment appeared to be the least understandable. The same information was provided on a somewhat poorer level at a mental health care institution and Kaunas Clinical Hospital (Lithuania). This was reflected in the surveys carried out in 2006 and 2001, respectively. In the mental health care institution, the information about health status was received in an understandable manner only by two-thirds of the patients, while possible treatment alternatives were understood only by half of the patients. In Kaunas Clinical Hospital, less than half of the patients said that the information about alternative treatment methods was provided in an understandable manner (20, 21).

Almost half of the respondents of our survey pointed out that the application of informed consent was necessary to protect physicians. This opinion was mainly dominant among women with the university education. The rest of the patients were of the opinion that this was necessary to protect the rights of patients. The latter view was more prevalent among the respondents with the secondary education. A similar opinion was expressed by oncological patients (19). In addition, more than half of the respondents with the secondary education believed that the purpose of informed consent was to protect medical staff from likely claims of patients (19). The assessment of the attitude of the patients from the mental health care institution in the country showed that more of them believed the procedure was necessary to protect the patient's rights than to protect physicians (20). More than half of the questioned pregnant women were satisfied with the application form of informed consent, i.e., signing of a medical sheet. Similar findings were obtained in the Cardiology Department of Bluhm Cardiovascular Institute, the United States. Information in that medical facility was provided in oral, written, and visual forms. The obtained results revealed that the use of the written form was the most favorable for the application of patient's informed consent (22).

More than half of the questioned pregnant women read the text of the informed consent before signing it. The rest of them said they lacked time to get familiar with the text. The findings of a survey conducted in one of Kaunas (Lithuania) mental health care establishments in 2009 also suggested that more than half of the respondents reported to have read all the forms of informed consent provided in the health care establishment (23). The survey of oncological patients revealed slightly different results suggesting that more men than women reported to have not at all read the forms of informed consent provided to them in the hospital. Those who had not read the text of informed consent later appeared to be dissatisfied with the health-related information provided to them (19).

Both the present and earlier surveys demonstrate that the participation of patients in their treatment process is growing year by year and that patients are satisfied with the procedure of giving informed consent (19, 22, 23).

Conclusions

The majority of the pregnant women were satisfied with the procedure of giving informed consent applied in the inpatient health care institution. This encourages not only patients to seek the information about their health condition, but also health care specialists to communicate with patients in an understandable manner.

Statement of Conflict of Interest

The authors state no conflict of interest.

Nėščiųjų požiūris į informuoto paciento sutikimą

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Raktažodžiai: nėščiosios, pacientų teisės, informuotas sutikimas, stacionari pagalba.

Santrauka. Informuoto paciento sutikimo esmė – informuotas ir pagrįstas paciento sprendimų priėmimas.

*Tyrimo tiksla*s. Įvertinti nėščiųjų požiūrį į informuoto paciento sutikimo taikymą stacionarią pagalbą teikiančioje gydymo įstaigoje.

Metodika. Atlikta anoniminė 304 nėščiųjų anketinė apklausa (atsako dažnis – 84 proc.) Lietuvos sveikatos mokslų universiteto Akušerijos ir ginekologijos klinikos Akušerijos skyriuje.

Rezultatai. Beveik visos nėščiosios (98 proc.) teigė žinančios, jog turi teisę į informaciją apie savo sveikatos būklę. Daugiau kaip 90 proc. nėščiųjų nurodė, kad buvo patenkintos gydytojų akušerių ginekologų suteikta informacija, kurie informaciją apie jų sveikatos būklę suteikė dažniau ir suprantamai nei akušerės (p<0,001). Informuoto sutikimo pasirašymo procedūra buvo patenkintos 237 (77,9 proc.) nėščiosios, nors daugiau kaip pusė apklaustųjų teigė, kad ši procedūra reikalinga gydytojams apsidrausti. Informuoto sutikimo tekstą, po kuriuo pasirašė, skaitė 230 (75,7 proc.) nėščiųjų.

*Išvado*s. Beveik visos apklausoje dalyvavusios nėščiosios žinojo, jog turi teisę į informaciją apie savo sveikatos būklę ir buvo patenkintos informuoto sutikimo pasirašymo procedūra gydymo įstaigoje.

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