

The Level of Satisfaction from Nursing Care and Social Support of Organ Transplant Patients

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34

Abstract

Objective: It was planned to investigate the satisfaction levels of organ transplant patients in terms of social support and nursing care and also to determine the relation between these two items.

Materials and Methods: The descriptive study was conducted with patients (n=140) who accepted to answer the research questions at a University Hospital Organ Transplantation Clinic. While collecting the data; question form related to identifying information of the patient, Newcastle Satisfaction with Nursing Scales and Multidimensional Scale of Perceived Social Support Questionnaire were used.

Results: The mean age of the patients was 38.89±11.80. It was seen that 64.3% of patients were women, 73.6% liver transplants, 26.4% kidney transplants. Patients Multidimensional Perceived Social Support Scale mean score was 69.25±7.21, also experiences about Nursing Care Scale mean score was 75.41±2.27 and Nursing Satisfaction score mean score was found to be 71.73±3.05. There is no statistically significant correlation between Social Support Scale total score and nursing care related experiences Scale total score (R=0.087, P=0.305) and Satisfaction Scale total score (r=0.012, p=0.891).

Conclusion: Level of satisfaction from nursing care and social support of organ transplant patients were found to be at a good level.

Keywords: Social support, nursing care, satisfaction, organ transplantation

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Received: 07.02.2018 **Accepted:** 09.03.2018

Presented in: This study was presented as oral presentation at the 8th Congress of European Operating Room Nurses Association, Rhodes Island, Greece from the 4th to the 7th of May 2017.

Cite this article as: Yeşilyaprak T, Pekpazar İ, Dolgun E, Yavuz Van Giersbergen M. The Level of Satisfaction From Nursing Care and Social Support of Organ Transplant Patients. *Turk J Nephrol* 2019; 28(1): 34-7.

INTRODUCTION

Organ transplantation is taking a part of an organ or whole organ from live donor or cadaver and transporting it to the patient under circumstances in which the organ cannot correspond to vital functions (1). Nowadays, as a result of improvements in medicine, technology, and organ transplant experiences, many transplantations are performed, and satisfactory results are achieved (2-4). According to the Turkey Statistics Institution in 2014, 2924 kidney transplantations and 1212 liver transplantations are performed (5).

Organ transplantation is described as a new start for end-stage illness patients. Facts, such as medicines

used for pre-transplantation, frequent controls, effort given to accept a new organ as his or her, disruption of body entirety, and change in the family roles, may lead to problems, such as depression, anger, and guiltiness. Post-transplantation patients physically feel alright, go back to work and school life, and also the patient's life quality increases; however, some psychological problems may occur. The support that the patients receive from their surrounding after transplantation is particularly important (6). Social support makes it easy for the patient to adapt to the change. Strong social support provides prevention of self-confidence and blocks damaging personality. Inadequate social support increases



addiction levels and decreases the usage of coping mechanisms. It also causes hopelessness in patients (6-8). Social support, qualified nursing care decreases complication levels and provides a second social support for the patients (8).

In health services, patient’s satisfaction is described as the difference between the expected care and the provided care. Patient satisfaction provides the patient to be in accordance with the care plans, decreases re-hospitalization and hospitalization period, and also provides a positive feedback for the unit (9).

The aim of the present study was to investigate the level of satisfaction from nursing care and social support of organ transplant patients and also to identify the relationship between these two facts.

MATERIALS AND METHODS

The descriptive study was performed in the Organ Transplantation Clinic of a research university between March 31, 2016 and August 31, 2016. Inclusion criteria for patient were inpatients, and out patients, and the sample included 140 patients who have agreed to enroll in the study. During data collection, a personal questionnaire composed of 12 questions (Newcastle Satisfaction Scale and Multidimensional Scale of Perceived Social Support) was used.

Personal questionnaire: It is a 12-questioned form composed of questions related to the sociodemographic features of the patients and pre-descriptive organ transplantation questions. It is created by scanning different types of sources.

Newcastle Satisfaction Scale: This is a scale developed by Thomas and friends in 1995 in England in order to identify the satisfaction level of the patients. This scale is composed of two parts: Experiences with Nursing Scale (ENS) and Satisfaction with Nursing Care (SNS).

The scales were adapted for the Turkish population by Uzun (10). Cronbach’s alpha was 0.75 for the ENS, whereas Cronbach’s alpha was 0.94 for the SNS.

ENS is a 7-point likert-type scale aiming to evaluate the nursing care services during the hospital stay and is composed of 26 questions. In this scale, 15 items were asked with positive, and 11 items were asked with negative expressions. During scoring, the expected points from negative items were collected in other direction starting from high points. After adding all the item points, the points were diverted to 100 and evaluated from 100. A total score of 100 shows that the experiences about nursing care are at high level (10).

SNS is a likert-type scale aiming to evaluate the satisfaction of patients with the nursing care during their stay and is composed of 19 items. After collecting all points of the items, the scores are converted to 100, and evaluation is performed. A total score of

Table 1. Distribution of patients according to sociodemographic properties

Sociodemographic properties	N	%
Gender		
Female	90	64.3
Male	50	35.7
Marital status		
Married	91	65
Single	49	35
Education level		
Literate	24	17.1
First school	51	36.4
Middle school	35	25.7
University	29	20.7
Total	140	100

100 indicates that the satisfaction about nursing care is at high level (10).

Multidimensional Scale of Perceived Social Support: Patient’s perception of social support scale was developed by Zimet, Dahlen, and Farley in 1988. Turkish validity and reliability studies were performed by Eker and Arkar on healthy people and patient groups (11). In 2001, the scale was reviewed, and validity and reliability studies were performed (11). This is a 7-point likert-type scale composed of 12 items to determine the social support levels. It is composed of three groups related to the source of support. These are family, friend, and a special person. Subscale points are calculated by adding the points of every subscale and by adding all subscale points, and the total score of the scale is measured. A high point indicates that the social support is high. The subscale points are between 4 and 28, and the total score of the scale is between 12 and 84 (11).

In order to perform the study, written permission was obtained from Ege University Nursing Faculty Ethics Committee. Written permissions were obtained from Ozge Uzun who has performed Turkish validity and reliability tests for Newcastle Satisfaction Scale and from Haluk Arkar for Multidimensional Scale of Perceived Social Support. Verbal permissions were obtained from the patients.

Statistical Analysis

Collected data were transferred to a computer by the researcher. Data were analyzed using The Statistical Package for the Social Sciences (SPSS) for Windows 16.0 (SPSS Inc., Chicago, IL, USA) statistical program in terms of number, percentage, average, and Pearson correlation analysis.

Table 2. Distribution of patients according to transplantation story

Transplantation story	N	%
Transplantation organ		
Liver	103	73.6
Kidney	37	26.4
Donor type		
Live	101	72.1
Cadaver	39	27.9
Live transplantation donor		
Mother	29	20.7
Father	21	15
Sibling	26	18.6
Others	25	17.9
Cadaver	39	27.9
Presence of transplantation beforehand		
Yes	32	22.9
No	108	77.1
Total	140	100

Table 3. Patients' Multidimensional Scale of Perceived Social Support mean score

	Lowest	Highest	Mean	SD
Total Multidimensional Scale of Perceived Social Support point	52	78	69.25±0.6	7.21
Sublevels				
Family	18	28	24.22±0.21	2.50
Friends	16	27	22.52±0.23	2.81
Special relations	15	27	22.50±0.24	2.89

Table 4. Newcastle nursing satisfaction scale mean score

	Lowest	Highest	Mean	SD
Nursing care scale	67.03	81.32	75.4±0.19	2.26
Satisfaction from nursing care scale	63.16	78.95	71.72±0.25	3.04

RESULTS

Table 1 shows the distributions of patients' sociodemographic properties. The youngest patient was 19 years old, and the oldest was 63 years old. The average age of the patients was 38.89±0.99 years.

Table 2 shows the distribution of patients according to transplantation story.

The mean score of Multidimensional Scale of Perceived Social Support was 69.25±0.6. This study result, mean of social support scale-related family issues was 24.22±0.21; mean of friends issues was 22.52±0.23; and mean of special relations issues was 22.50±0.24 (Table 3).

Table 4 shows that the mean nursing care point is 75.4±0.19, and the mean nursing care satisfaction is 71.72±0.25.

There is no statistically meaningful relationship between social support scale total score and nursing care scale total score ($r=0.087$, $p=0.305$) and satisfaction scale total score ($r=0.012$, $p=0.891$).

DISCUSSION

The aim of the present study was to investigate the level of satisfaction from nursing care and social support of organ transplant patients and to define the relationship between these two. The age average was 38.89±0.99 years, and the number of women was higher. In studies similar to this one, there are similarities between age average, marital status, and education level (4, 12). The number of women is higher than that of men. By contrast, in the study by Kacmaz, Unsal Barlas, and Yatkin, the number of female patients is lower than that of male patients (4, 12). In Bayhan's study, marital status and education level are parallel to each other, and female-to-male ratio is close to each other (13).

It was found that 2/3 of transplantations were from live donors, 72.1% of donors were family members, and with the 3/4 ratio, the most frequent transplantation organ was the liver. Different from other countries, organ transplantation sources in our country use live donors as primary sources (4, 12, 13).

In the present study, it is found that the most frequent donor is the mother (20.7%). Our country still has a traditional family structure. Organ requirements are primarily obtained from family members, and healthy parents and children are the primary organ donors. The findings of other studies are parallel (4, 6, 9).

It was seen that the mean score of Multidimensional Scale of Perceived Social Support was 69.25±0.6. In a study performed by Tan et al. in which they studied hemodialysis patients, the mean score was 59.3±8.1. In the studies performed by Yilmaz and Ozkan (14), it is stated that the patients in surgical clinics have higher social support mean score. In Arslantas's study, perceived social support mean score of surgical and internal clinic patients is 53.49±21.31. It is seen that the mean score of studies is mostly high. In the study, it is determined that perceived social support mean score is relatively higher than other studies. It can be thought that the reason of patients' having high social support is family care given to organ transplant patients. When

the subscales are investigated, family subscale mean score is 24.22±0.21, friends subscale mean score is 22.52±0.23, and special relations subscale mean score is 22.50±0.24. In Okcaoglu and Tan's (6) studies, it was also found that most of the support is given by the family. If the patients are with the family during the care period, the social support can be more; in addition, as a result of chronic disease, going to hospital frequently may cause less social activities and may lead to higher family support (4).

Adaptation to the organ and increase in life quality during surgical procedure are also related to the nursing care in the clinic. Nurses are the health providers to whom the patients come face to face most frequently. Hence, the base of patient satisfaction is made of patient-nurse association (15). When the patients' mean satisfaction of nursing care is investigated, it was found as 71.72±0.25. The other studies related to the patient's nursing satisfaction levels were found as 76.61±15.06 (15) and 72.52±16.63 (16). Patient's satisfaction is related to the given care, their experiences, and the perception of the illness, and it is important in terms of the given nursing services (15, 16).

CONCLUSION

There were no differences between social support and satisfaction levels of patients. However, it was found that patient's satisfaction levels were high in terms of social support and given nursing care. It can be suggested that cooperation with families may increase social support.

Ethics Committee Approval: Ethics committee approval was received for this study from the ethics committee of Ege University School of Nursing (2016/105).

Informed Consent: Verbal informed consent was obtained from patients who participated in this study.

Peer-review: Externally peer-reviewed.

Author Contributions: Concept - T.Y., İ.P., E.D., M.Y.v.G.; Design - T.Y., İ.P., E.D., M.Y.v.G.; Supervision - E.D., M.Y.v.G.; Data Collection and/or Processing - T.Y., İ.P.; Analysis and/or Interpretation - T.Y., E.D.; Literature Search - T.Y., İ.P.; Writing Manuscript - T.Y., İ.P., E.D., M.Y.v.G.; Critical Review - M.Y.v.G.

Conflict of Interest: The authors have no conflicts of interest to declare.

Financial Disclosure: The authors declared that this study has received no financial support.

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