

Verbal Communication with Unconscious Patients

João F. F. L. Simões †, Luis M. T. Jesus ‡ and David Voegeli ††

† Escola Superior de Saúde da Universidade de Aveiro (ESSUA), Aveiro, Portugal; e-mail: jflindo@ua.pt

‡ Escola Superior de Saúde da Universidade de Aveiro (ESSUA), and Instituto de Engenharia Electrónica e Telemática de Aveiro (IEETA), Aveiro, Portugal; e-mail: lmtj@ua.pt

†† School of Health Sciences, University of Southampton, Southampton, UK; e-mail: d.voegeli@soton.ac.uk

The importance of using verbal communication in the care of critically ill patients has long been known (Elliot and Wright, 1999). Both qualitative (Baker and Melby, 1996) and quantitative (Holeckova, et al., 2006) studies have shown evidence of the benefits of effective communication. Increasing numbers of patients report their experiences. The unconscious patient has a considerable need for information and support, so verbal communication can provide orientating and meaningful sensory input to these patients. Information received by the unconscious patient may assist in reducing stress, can help patients preserve self-identity and self-esteem and reduce social isolation.

This study aimed to characterise and standardise verbal communication that critical care nurses and families use with unconscious patients. It also aimed at building a stimulus message to be used with unconscious patients, to examine if the effects of familiar and unknown voices would be significantly different (blood pressure, pulse, oxygen saturation level, temperature, glycaemia level, EEG and ECG values were monitored as evidence of auditory perception).

The verbal communication of critical care nurses and patients' families, as reported in the literature, was thoroughly analysed, including references related to verbal communication by the patients' family and intensive care nurses. Results were used to build the stimulus message, which was further refined with the cooperation of a group of experts (SLTs and psychologists). The stimulus message consists of three parts: presentation and orientation, information and functional assessment, and stimulation. The most significant person, whose voice we recorded, was selected using a sociometry test.

The standard speech stimulus developed has shown to facilitate the communication with the unconscious patients as assessed by the proposed physiological signals. Therefore, it is concluded that formal support systems and continued education of nurses about the benefits of verbal communication is deemed necessary.

References

- Baker, C. and Melby, V., 1996. An investigation into the attitudes and practices of intensive care nurses towards verbal communication with unconscious patients. *Journal of Clinical Nursing*, 5, pp.185-192.
- Elliot, R. and Wright, L., 1999. Verbal communication: what do critical care nurses say to their unconscious or sedated patients. *Journal of Advanced Nursing*, 29(6), pp.1412-1420.
- Holeckova, I.; Fischer, C.; Giard, M.-H.; Delpuech, C. and Morlet, D., 2006. Brain responses to a subjects's own name uttered by a familiar voice. *Brain Research*, 1082, pp.142-152.