

Decisional Regret Following Ventilation Tube Insertion

Jillian N. Printz BA BS¹, Shreya Thakur², Michele M. Carr DDS MD PhD FRCSC³

¹Pennsylvania State University, College of Medicine, Hershey, PA, ²University of Pittsburgh, Pittsburgh PA, ³Department of Surgery, Division of Otolaryngology – Head & Neck Surgery, Pennsylvania State University, College of Medicine, Hershey, PA

Introduction

The decision to have a child undergo ventilation tube (VT) insertion can be problematic for parents. This is an elective procedure, with the potential for the instigating factor - middle ear effusions and recurrent otitis media - to resolve spontaneously. The purpose of this study is to evaluate Decisional Regret (DR) in parents who made the decision to have VT placed in their children's ears and to look for evidence of increase in DR for parents whose children undergo multiple sets of tubes, have complications, or who have prolonged follow-up.

Methods

This was a survey study involving all consenting consecutive parents presenting in an otolaryngology clinic with children who had VT in place. The DR scale is a 5-item questionnaire using a Likert scale for responses; a higher number indicates higher level of regret. A score of ≥ 26 corresponded to moderate regret.

Results

Of 210 respondents, 83.3% were mothers. The children involved had a mean age of 5.2 years and 63.3% were male. Mean number of years since first VT insertion was 1.12 with a range of 0.04 to 9.28 years. 70.5% had a regret score of 0, with mean score 6.98 (95% CI 5.11-8.85). Scores were significantly higher for parents who presented their child on the day of the inquiry with an ear complaint such as otorrhea (15.52, 95% CI 7.67-23.37, $p=0.004$).

Results

Parents whose children had a history of reflux had significantly lower regret scores than parents whose children did not have a history of reflux (3.33 versus 7.89, $p=0.007$). Parental regret was unrelated to patient age, other comorbidities, indication for initial tube insertion, hearing status on the day of inquiry, number of sets of tubes, number of visits for otorrhea, number of prescriptions given for eardrops, number of clinic visits, or length of follow-up.

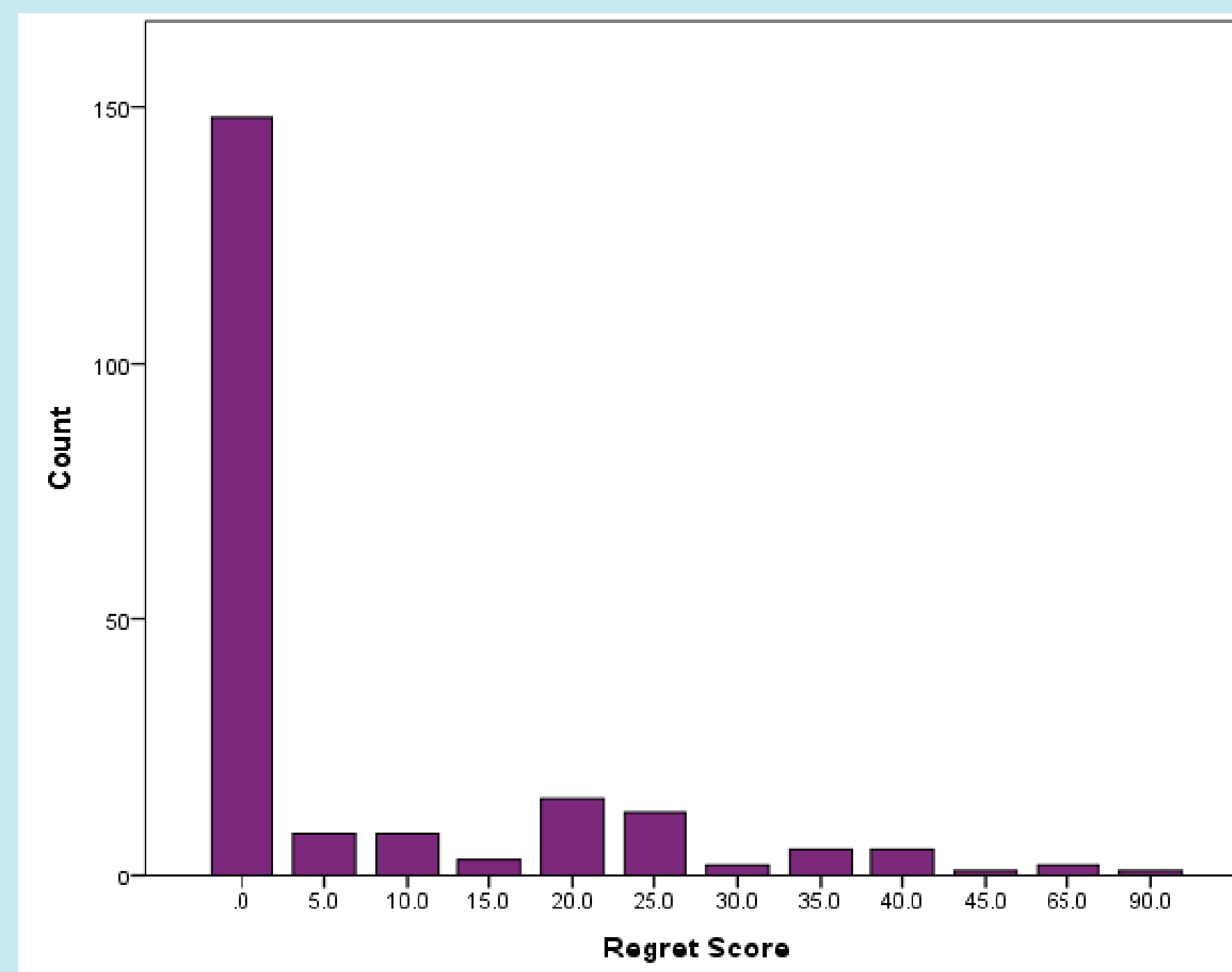


Figure 1: Regret Scores

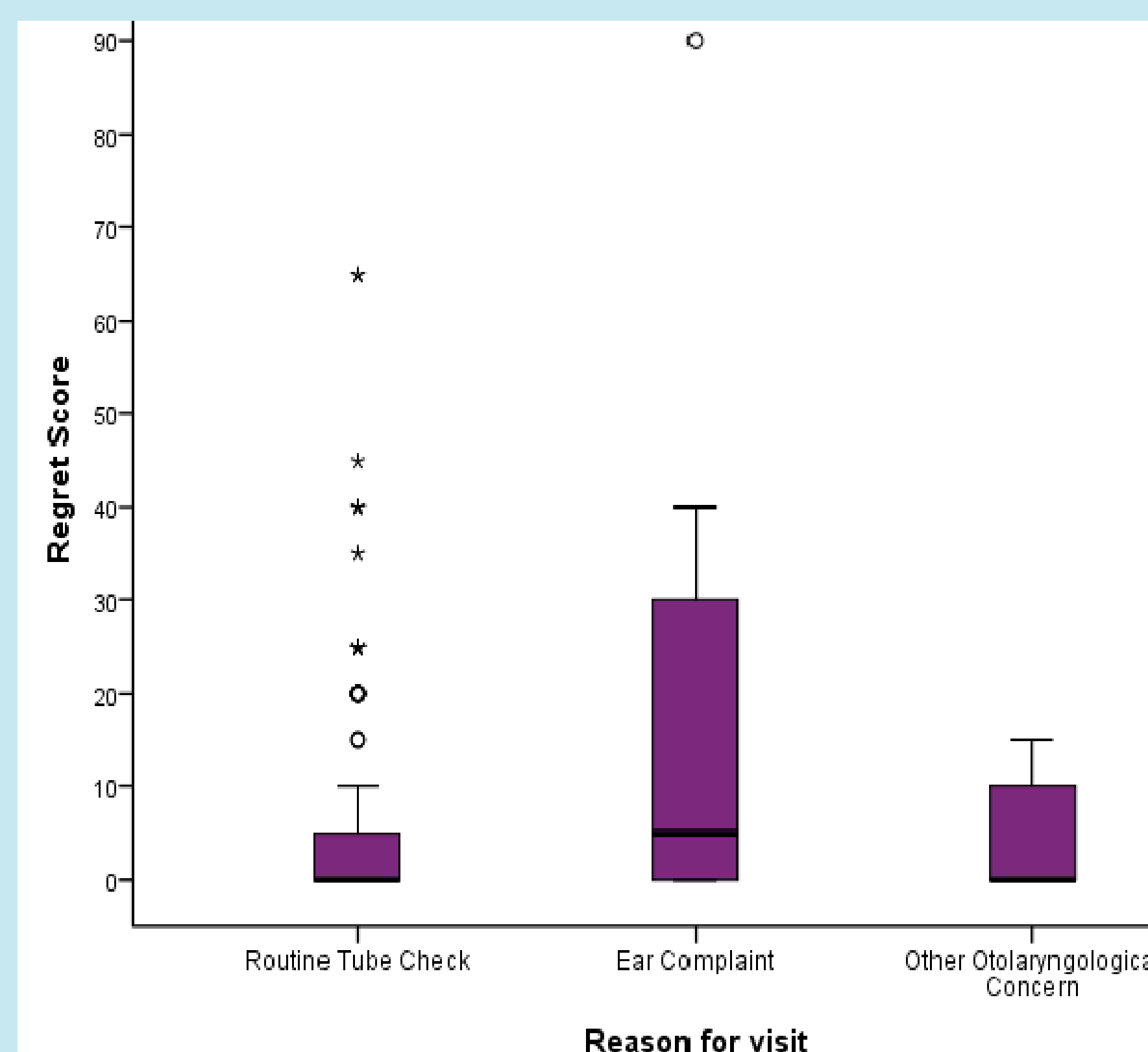


Figure 2: Regret Scores versus Reason for Current Clinic Visit
Asterix = 2 patients
Open circle = 1 patient

Discussion

There are many other factors that contribute to how satisfied, or dissatisfied, patients are after a medical decision. The limited research on DR in the healthcare field suggests that if symptoms in children persist post-operatively, parents experience more regret. VT insertion is associated with low parental DR, even if several sets of tubes are placed, unless the child is currently experiencing otorrhea or another ear complaint.

Conclusions

Post-VT otorrhea is common – 14% of our group had otorrhea on the day of the survey - and merits research attention. Clinicians need to emphasize parental education regarding otorrhea after VT insertion in order to control this aspect of patient dissatisfaction.

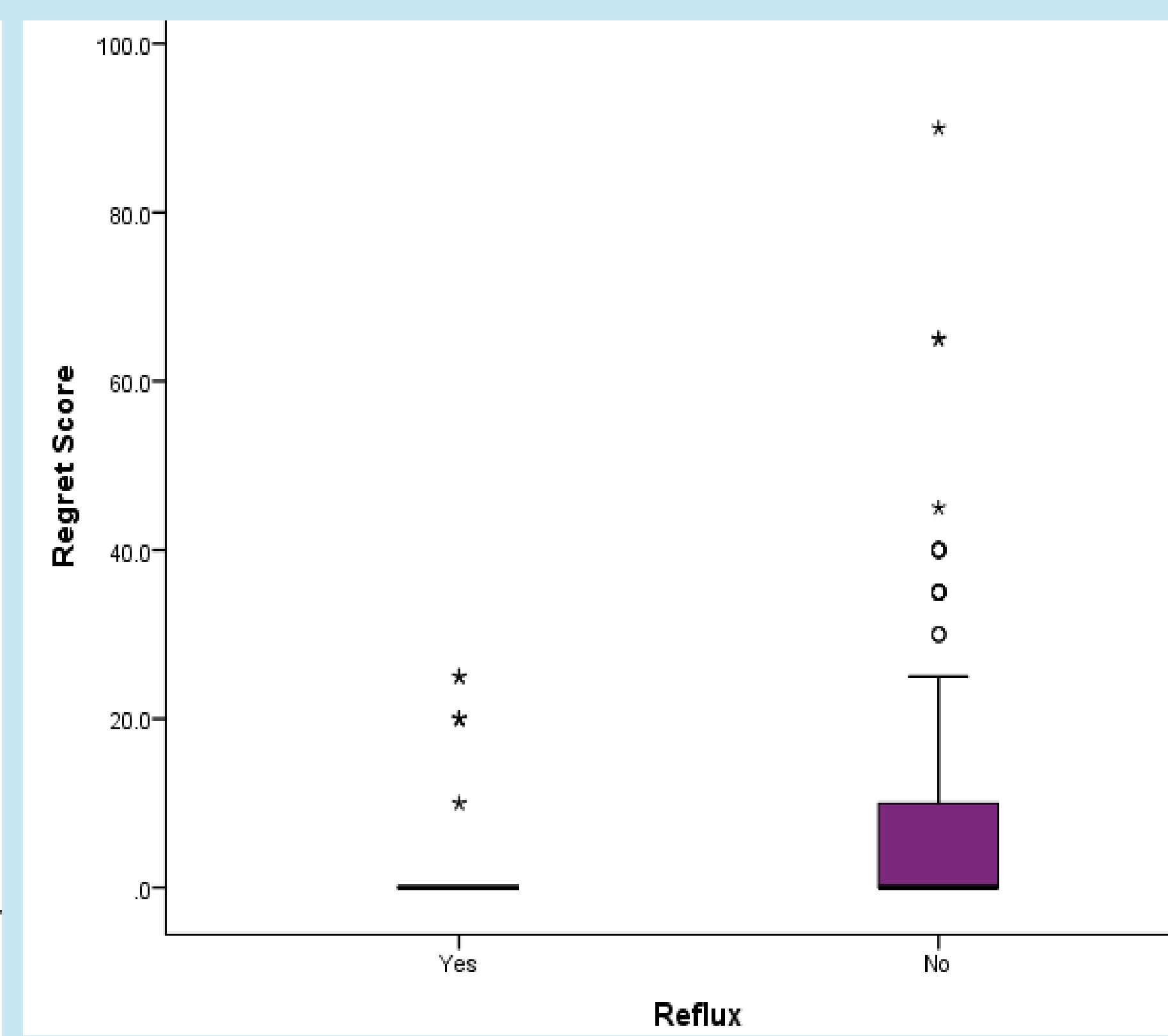


Figure 3: Regret Scores versus Reason for Current Clinic Visit
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