



Lived experience of lower limb amputation patient in Bangladesh

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ABSTRACT

Amputation is a surgical procedure by which a part or the whole of a limb or lower limb is being removed. Consequences of lower limb amputation can change in one's personal life, affecting the individual's well-being, autonomy and body-image including psychological impact, adjustment to amputation and social support. The aim of this study is to explore the lived experience of lower limb amputation patient in Bangladesh. A phenomenological qualitative research design was carried out among 15 participants with lower limb amputation who were admitted and follow up visited at National Institute of Traumatology and orthopedic rehabilitation (NITOR). Participants were selected for interview by using a purposive sampling technique. Data were collected by using interview guide to achieve comprehensive information related to lower limb amputation. Data were analyzed by using the process of content analysis. The results focus on- the following four themes, mentally depressed, difficulties in adjustment, coping mechanism and expectation of social support. Experience of lower limb amputation the study found the various reactions, emotional changes and physical discomfort after amputation. Nurses should have a deep understanding on coping strategies for amputees; provide them valuable support to adjust their emotions, and developing confidence to lead their lives.

INTRODUCTION

Amputation is a surgical procedure by which a part of limb or the whole of a limb is being removed (Knezevic et al., 2015). The removal of a part or multiple parts of the lower limb is called lower-limb amputation. Amputation of Lower Limb (LLA) is often performed for a variety of reasons including to remove locally unresectable tumor, or ischemic, infected, necrotic tissue (Razak et al., 2016). It brings severe social, psychological and economical impact on both amputees and their families. Consequently, it decreases the amputee's quality of life and some of them accept the occupation as beggars (Knezevic et al., 2015)

Generally amputation results in poor physical function, physical role performance, social function, vitality, general health, and more pain

compared to population norms and it also manifested by the consequential loss of the function, change of the distribution of body mass and psychosocial disorders (Feinglass et al., 2012 ; Knezevic et al., 2015). Frequent consequences of lower limb amputation can changes in one's personal life, affecting the individual's well-being, autonomy, body-image which let them to feel social discomfort. These consequences to limb loss will depend on how the individual experiences the amputation (Senra et al., 2011). And that can influence the amputee's quality of life (Knezevic et al., 2015)

The amputation effects on impairment of activity, and decrease general happiness which negatively impact on health and well being (Razak et al., 2016). Three broad aspects focus on the amputee's live experiences such as psychological impact, the adjustment to amputation and present physical

condition, and social support (Liu et al., 2010). In addition, amputation can change in a person's sense of body-appearance, image of self, and a person's satisfaction with life (Saradjian et al., 2008). Lived experience in this study was operationalized as what they feel about themselves after amputation as a tragic event in their lives.

In Bangladesh there are a few data are available on lived experience of lower limb amputation patient. The findings would contribute in nursing education, practice and research as baseline information. Nurses play an important role in caring for and supporting amputees, and also understand their needs, and provide care for them from hospitalization to discharge (Xiugan and Yuru, 2019). It also helps community health nurse to arrange counseling program to provide support to amputees for increasing their quality of life.

Considering the above fact the present study is aimed to explore the lived experience of lower limb amputation patient in Bangladesh.

METHODS

Study Design

A phenomenological qualitative research design was used to explore the lived experience of lower limb amputation patient in Bangladesh.

Participant

Participants were selected for the interviews by using purposive sampling technique based on their willingness and availability of their time and who were able to provide rich information about lower limb amputation.

Data collection

The research proposal was approved from the Institutional Review Board of National Institute of Advanced Nursing Education and Research (NIANER), Mugda, Dhaka, Bangladesh and the Institutional Review Board (IRB) of Bangabandhu Sheikh Mujib Medical University (BSMMU) Shah bag Dhaka, Bangladesh.

Data analysis

The interviews were transcribed and content analysis approach was used. The interviews were transcribed verbatim in the Bengali language by translator and the researcher. All transcribed data were verified repeatedly listening to the audio tapes. All transcribed data were read until familiarity of data in order to achieve a sense of the whole picture of data. Then the transcribed data have translated into English by the English expert and researcher.

RESULTS

Socio-demographic characteristics of the participant

Demographic background of the Lower Limb Amputation patient is given in Table 1. Fifteen Bangladeshi Lower Limb Amputation patients participated and their ages ranged from 18 to 42 years, with a mean age 32.53 ± 6.621 of years. All of them were Muslim (100%), while 13.3% had no formal education. Their monthly average family income was 10.66 thousand BDT. Most of them were employed 66%. Most of them were living with family. The majority (86.7%) reported that they were dependent on other.

Table 1: Socio-demographic characteristics of the study participants (N-15)

Variables	Categories	f	%
Age	M=32.53, SD=6.62; Min=18; Max=42		
Gender	Male	10	66.67
	Female	5	33.3
How many days are amputated	M=45.80; SD37.15; Min=10; Max=150 days		
Religion	Islam	15	100
Education	Illiterate	2	13.3
	Primary	8	53.3
	Secondary	2	13.3
	Higher secondary	3	20
Monthly income	Mean=10666; Min=5000; Max=30000.		

Occupation	Employed	9	60
	Unemployed	4	26.7
	Business	2	13.3
Family type	Joint family	10	66.67
	Nuclear family	5	33.3
Dependent	Yes	13	86.7
	No	2	13.3
Marital status	Married	11	73.3
	Unmarried	4	26.7

Lived experience of lower limb amputation patient

The results focus on- the following 4 themes, mentally depressed, difficulties in adjustment, coping mechanism and expectation of social support. These are described as follows:

Mentally depressed

During the interview process asked to participants how they felt about amputation. More than half of them stated that amputation had some negative impact such as feeling of being a burden and unimportant to others. After amputation, participants feel depressed, imposed many inevitable restrictions, and they even regretted the decision to amputate their limbs. Regarding this issue one participant stated that- *"I can't describe this grief story. No one wants to lose one's wealth. Like others, I also did not want to amputee my foot"* (P5).

Along with his opinion another participants also mentioned that

"It is not a matter of feeling normal for anyone as it is difficult for everyone." (P1)

Another Participant expressed that, *"I felt bad when I heard that I have to cut off my leg. There was no solution as doctor said that the leg must cut off."*(p7).

Difficulties in adjustment

During the interview process asked to participants how they adjust their present situation after cut off their legs. According to this findings participant lost their independent movement due to amputation. Most of them mentioned that they

have lost their independency forever. Some of them have been facing big challenges to survive and adjust their new lives along with these physical disabilities which might let them to struggle in future. Regarding this theme participant stated that -

"I used to live a normal life when I had legs. There was no problem then I use my university every day. There was no struggling in life. Now there is a lot of struggling after cutting off the leg. It is not possible run my life without struggling." (p2)

Regarding this issue one participant stated that *"Today, I am paralyzed. Everyone can move but I cannot. I feel heartbroken when I feel about my foot"* (P3)

Along with his opinion another participants also mentioned that *"Since I lost my leg we lead a misery life. I have nothing to say about it."* (P7).

Another Participant expressed his feeling that, *"What else do I have to do as I have to suffer after cutting legs? I feel very sad because legs are the important organ of the body."*(P9).Regarding this issue one participant state that *"I feel worse now. I feel like passing away when my legs are being crashed"* (P6).

Coping mechanism

Most patients had positive coping mechanisms to overcome and establishing significant roles in life which meant participant needs to adjust their minds, happiness, and try to maintain their interactions with others. Relating this issue one participant mentioned that,

"There was no feeling in my mind that my legs were being cut off. I just wished to survive." (Participant P1)

Along with his opinion another participants also mentioned that

"My parents cried and felt worse. When I realize that my older parents support me so I should not be broken down, I have started to console them"... (Participant 10)

Another participant stated that,

"I wasn't fit enough even before amputee my foot. But, I feel quite good now." (P5).

Some of the amputees explain that, whatever happened was Gods doing and nothing could be done about it. One participant mentioned that *"Allah has taken the things of Allah. If Allah wants to take more, then I have to give."(P1)*

Along with his opinion another participants also mentioned that *"Allah has a desire so I have an accident. Can't set foot anymore. I need to be cut off. I have more trouble. Alhamdulillah. It is desire of Allah."(P15)*

Expectation of social support

Most of the participant expressed that they received insufficient social support, and few participant were happy with the support they received from their family, which was a helpful resource to adjust their live. Support from family and friends were also described by participant during interview. According to the theme one participant stated that,

"My parents are everything for me. They are my world, my inspiration."(P10) Along with this statement another participant state that, *"Alhamdulillah, I have got enough. My friends and family are with me. My relatives visit me and take care of me though they remain busy with their job."(P2)*

Another participant also mentioned that, *"Only my parents are taking care of me."(P9).*

Against this query some participant mentions that they got insufficient support from their relatives and friends. Regarding these issue one participant expressed that, *"I have not got any support. "No one unless you own one. If we are not in crisis, we cannot recognize the people that who is my friend or enemy."(P12).*

Along with this statement another participant state that *"No one helps me. The neighbor does not help. No one does not ask for money. My father used to beg. He can't even pay" (P14).*

DISCUSSION

The findings are discussed based on the objectives of the study. This study aimed to explore the experiences of patient with lower limb amputation at selected hospital in Bangladesh. The discussion of results is presented below.

Mentally depressed

Mentally depressed was the first and of the most important theme for this study. In this study more than half of participants expressed that after amputation the negative mental state that always hammered on their thought regarding how to survive in future and seeking helps from others people. This finding is similar to the existing study that conducted in Taiwan (Liu et al., 2010). This study explored that lower limb amputees experienced badly mental depression that generated from their perceptions about other people who might seemed them as social burden and could not be treated as normal people. A participant states that after amputation the leg always gives him pain and pain could not relieved by suppository. In this study a participant mentioned that it is painful experience because no one wants to amputated his leg. Similarly, a study found that participants expressed their feelings of sadness, shock and surprise (Senra et, al., 2012).

Difficulties in adjustment

Findings showed that patients faced lots of problems after amputation. More than half of participant expressed that adjustment to amputation was difficult and difficult to accept their present physical condition. Due to lower limb amputation, participant physical movement ability was impaired, slowed down their daily activities and participant also lost their independence. This finding was Consistent with a study, the study revealed that amputees faced loss of physical function, carrying out activities of daily living, lost their independence, hampered social interactions, and identity (Horgan and Mac Lachlan, 2004). One participant expressed her worries about losing her independence. These findings are consistent with the previous studies that people with more severe physical disability and less independence had lower levels of self-esteem and negative body image (Liu et al., 2010).

Coping mechanism

Amputee's and their family's requires major adjustment, to limb loss. This study found that some amputees coped well with the condition as expected and this was supported by a study from Taiwan that lack of proper coping strategies could lead to psychological breakdown and affect to manage their present physical condition (Liu et al., 2010). In This current study found that some participant reported that comparing their own situation with other and they believed that their recovery was better than them. The participant believed that their situation was willed by Allah and expressed their thanks to their Almighty Allah for granting them new life rather than cessation from this World. This finding was also consistent with a previous study (Amoah et al., 2018) that described their participants had thanks to their Great creator for save their lives and had adjusted with daily life.

Expectation of Social support

Support from family and friends had a positive impact on amputees. In this current study found that access to family support was important for amputees. These findings are consistent with the previous study from Ghana, They found that family members provided adequate support such as financial support, family support, management support, etc. (Amoah et al., 2018; Senra et al., 2011). A similar study also mentioned that family members provided favorable physical, psychological and economic support to amputees, and helped them to carry out daily activities in the process of adapting to the new life (Ligthelm and Wright, 2014).

Limitation

The study was limited by a small size of interviewees, relatively limited time frame. Setting was only one hospital which may flaws to generalize these findings. Female participant felt hesitates to provide information.

Recommendation

The findings indicate that future longitudinal research in this area is necessary with a larger and

more diverse sample. More studies are needed to compare the lived experience patient with lower limb amputation. There was not much research available regarding the lived experience patient with lower limb amputation in Bangladesh.

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