

The Experience of Waiting for Bariatric Surgery During the COVID-19 Pandemic Among Individuals with Severe Obesity

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Backgrounds

Severe Obesity:

BMI greater than 35 kg/m²
In 2016: rapid increase of 455% in severe obesity over 30 years.²
In 2018: 25% of Quebec adults lived with obesity.⁷
In 2022: 30% of Canadian adults lived with obesity, which affected women more.⁸

Bariatric Surgery:

Aims to reduce food intake and/or nutrient absorption.
Limited access to bariatric surgery: only 0.58% of individuals with severe obesity in Canada undergo surgery each year.¹

Waiting Time:

Average waiting time in Quebec: 3 years²
Prolonged further by the COVID-19 pandemic.⁶
Prolonged waiting significantly impacts patients' physical, psychological, and social well-being.

Few qualitative studies worldwide have focused on individuals' experience of waiting for bariatric surgery.

Objectives

- Explore experience of uncertainty during the wait for bariatric surgery.
- Identify adaptation mechanisms used to cope with uncertainty.
- Understand the factors influencing these adaptation mechanisms.

Conclusion

- ✓ The prolonged waiting time for bariatric surgery contributes to heightened uncertainty.
- ✓ Uncertainty impacts both psychological and physical health.
- ✓ The coping strategies were shaped by various individual and contextual factors, which reflect dimensions consistent with Roy's adaptive modes.
- ✓ The need for structured nursing interventions during the waiting period is strongly emphasized.

Findings

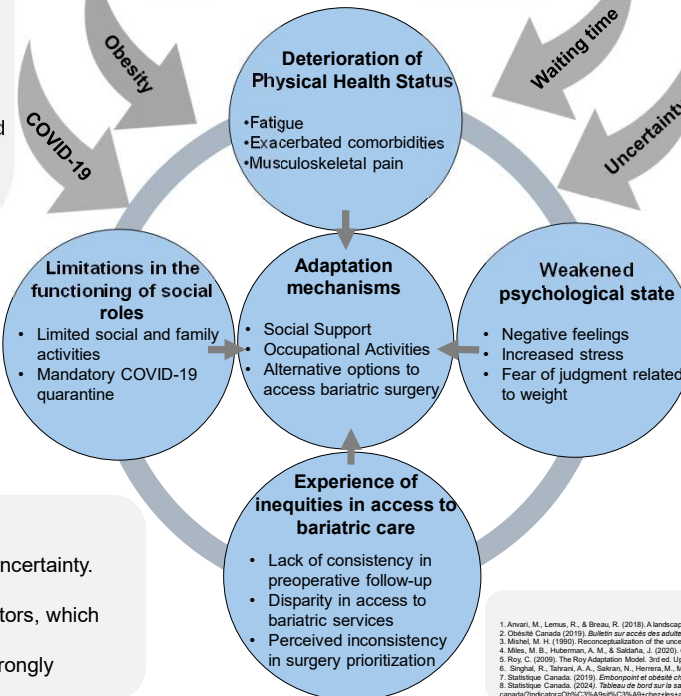
Participants	Woman	Awaited for surgery	Already operated	Comorbidities (3 & +)	Waiting Time (3 y & more)
11	9	8	3	3	7

Antecedents of Uncertainty

- Lack of information
- Unpredictability of surgery date

Appraisal of Uncertainty

- Threat
- Opportunity



Study Approach

Research design:

Descriptive Qualitative Study

Theoretical Framework:

Mishel's Uncertainty in Illness Theory³

Roy's Adaptation Model⁵

Study Sample:

Individuals awaiting bariatric surgery during the COVID-19 pandemic (Quebec)

Inclusion Criteria:

Adults awaiting or recently having undergone bariatric surgery

Exclusion Criteria:

No revision or secondary bariatric surgery

Recruitment:

Convenience sampling via social media (Facebook)

Data Collection:

Focus groups and semi-structured interviews via Zoom

Data Analysis:

Descriptive thematic analysis based on Miles & Huberman⁴

Implications for Nursing

- Nursing Practice:** Support individualized care in managing uncertainty.
- Education:** Promote awareness of the psychological impact of prolonged waiting.
- Research:** Suggest directions for nursing care in contexts of uncertainty.
- Administration:** Acknowledge waiting periods as critical moments requiring structured nursing follow-up.
- Policy:** Emphasize the importance of equitable access to bariatric care and the nursing role in early support.

References

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