

RELATIONSHIP BETWEEN PREOPERATIVE CAFFEINE CESSATION  
AND PREOPERATIVE COMFORT

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**PURPOSE:** Caffeine is the most commonly consumed central-nervous-system stimulant worldwide. For those who consume coffee or other caffeinated beverages on a regular basis, missing morning caffeine can lead to withdrawal symptoms in as early as eight hours. A routine practice is to instruct patients to refrain from eating and drinking eight hours prior to surgery. This means that regular caffeine consumers are likely to pass into the time that withdrawal symptoms appear. Caffeine withdrawal is known to cause physical symptoms and patients who consume caffeine daily may demonstrate some symptoms preoperatively. It has not been demonstrated, however, that preoperative caffeine withdrawal influences the patient's broader experience of comfort in the preoperative period. Kolcaba's view of comfort is more than simply the absence of symptoms. She has developed a tool measuring a holistic view of comfort in the perioperative period. The purpose of this study is to investigate the relationship of caffeine cessation and comfort in the preoperative period.

**METHOD:** This study is part of a larger study of comfort in the perioperative period. This will be a convenience sample of 100 participants undergoing general anesthesia who will be in hospital for  $\leq 23$  hours. Kolcaba's Perianesthesia Comfort Questionnaire and a Comfort Visual Analog Scale will be administered, in addition to a demographic questionnaire which will include usual caffeine consumption and time of NPO status. Data collection will occur 24 hours postoperatively.

**FINDINGS:** Descriptive statistics will be computed on all variables; a Pearson's r correlation will be computed for average daily milligrams of caffeine consumed prior to NPO status and scores on the Kolcaba Perianesthesia Comfort Questionnaire.

**DISCUSSION:** Nurse anesthetists are the patients' lifeline to comfort in the perioperative period. While specific symptom management has been studied in the anesthesia literature, comfort, as a holistic concept, has not. Indeed, the term comfort is not commonly used in this body of literature. The results of this study will help focus nurse anesthetists on comfort as more than the absence of physical symptoms.