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## Anxiety in Physicians and Nurses Working in Intensive Care Units in Yasuj,s Hospitals /Iran

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### Abstract

Intensive care unit is one of the stressful environments for its staff, especially physicians and nurses. This study was objective to determine anxiety in physicians and nurses working in intensive care units in Yasuj,s hospitals in Iran. This research is an intervention study conducted in Yerevan city in 2009. The number of participants in this study is 150 which are randomly selected. In this study 120 nurses and 30 specialists participated as the working in the intensive care unit of Yasuj,s hospitals in Iran. In the study, a 10-question demographic questionnaire, 20-question situational anxiety, 20-question personality anxiety Berger is used. After codification, the questionnaires Results indicate that average score for the situational anxiety of the nurses has been 46.96, average score for the situational anxiety of physicians has been 39.40 and that average score for the personality anxiety of the nurses has been 40.96, average score for the personality anxiety of physicians has been 36.73. This study provides valuable insight into the actual and perceived stressful experiences of critical care nurses, thus contributing to the ongoing effort to reduce burnout in this population.

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### INTRODUCTION:

Stress was first defined in the 1950s, with the description of the general adaptation syndrome as a state where several systems of the organism move away from their normal resting conditions due to a non-specific agent, which causes stress through the activation of a chain of reactions, due to the release of catecholamine (Bianchi ERF,2000). Stress could be defined simply as the rate of wear and tear on the body systems caused by life . That it occurs when a person has difficulty dealing with life situations, problems and goals (Stranks J W.,2005, Videbeck S L.,2007). Stress has physical, emotional, and cognitive effects. Although everybody has the capacity to adapt to stress, not everyone responds to similar stressors exactly the same (Timby BK<sub>a</sub>,2008). Stress and burnout are major factors that nurses have to deal with often while in their work environment. Nursing involves activities and interpersonal relationships that are often

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stressful. Stress management techniques proposed have varied across a wide spectrum of approaches, ranging from managing the work environment to reducing external sources of stress to managing the individuals' intrapersonal factors. (Firth-Cozens J. And Payne RL,1999)

Nursing Care for clients who are experiencing high levels of anxiety can be stress provoking for nurses (White L.,2000). Stress is considered to be one of the main themes in the research for last two decades and a significant growth observe in researchers' interest as a concern to both employers and employees (Hochwarter W. A.et al,2007).Occupational stress in the healthcare area is associated to specific situations, such as problems with co-workers, ambiguity and function conflicts, the work-home double shift, pressure from superiors according to the individual's perception and changes undergone within the context of the occupation. These situations may be important sources of stress (Mendes R. Et al 1991- Stacciarini JMR and Trócoli BT. O,2001). Coping has been viewed as a stabilizing factor that may assist individuals in maintaining psychosocial adaptation during stressful events. Thus, the actual reaction to an environmental event may be as important as the event itself (Cavalheiro AM,2003). Stressors can be social, physiological or environmental origin (Mimura, P. Griffiths,2003). Nursing research has emphasized the utility of a multidimensional format for stress management, accounting for the multidimensional nature of the stress response (Bianchi ERF,2000). The practice of the nursing profession occurs mostly in hospital environments, demanding more involvement from the professional. In patients suffer considerably because of this situation. Being away from home, from work, and the lack of information about what is happening and what will happen to him/her causes an intense emotional overload. It is up to nurses to provide him/her with the necessary comforts for recovery (Middlebrooks J.S., Audage N.C.,2010). Wherever notice to above we were doing stress in nurses and physicians that who works in intensive care units Yasuj's Hospitals

**Method & Materials:** This cross-sectional study utilized a questionnaire to obtain information about the health care worker's job content and psychological stress. Physicians and Nurses are 10 wards (intensive care unit) in 4 hospitals of Yasuj City in Iran were the study group of this cross-sectional study. The study was performing between 2009 –2011. At the time of the study 106 participants that there were 76 nurses and 30 physicians are working in 16 intensive care unit hospitals in Yerevan. They were asked to respond to 20 items situational questionnaires with Likert-scale responses (i.e."Never", "seldom", "Often" and "Most of the time") and they were asked to responses to 20 items personality questionnaires (i.e."Never", "Sometimes", "Often" and "Most of the time"). Demographic variables including gender, age, marriage and type family, working hours per days, working hours per month were included in the analyses.

### Result:

The findings from data in Iran suggest that the average age for nurses is 30 and for physicians are about 39 the number of participants in this study were 75 people in case group, 60 nurses and 15 physicians, 75 people in control group, 60 nurses and 15 physicians. The average age of subjects has been 38.75 in case group and 39.7 in control group.

Table 1: distribution frequency and compare mean scores situational anxiety between physicians & nurses in Armenia

Situational Anxiety Groups	Number & Percent	Mean	STD Deviation T-V	Sig	
Nurses	76(71.70%)	46.96	7.36	5.399	0.000
Physicians	30(28.30%)	39.40	4.22	5.399	0.000

Finding of this table showed that mean scores situational anxiety in nurses were 44.59 and mean scores situational anxiety in physicians 39.40. T-test showed between both mean are significant (p= 0.000).Therefore can take result between physicians & nurses group about of situational anxiety, there is different.

Table2: distribution frequency and compare mean scores personality anxiety between physicians & nurses in Armenia

Personality Anxiety Groups	Number & Percent	Mean	STD Deviation T-V	Sig
Nurses	76(71.70%)	40.96	7.48 2.731	0.002
Physicians	30(28.30%)	36.73	8.03 2.731	0.002

Finding of this table showed that mean scores personality anxiety in physicians and nurses were 44.59 and mean scores personality anxiety were 44.32. T-test showed between both mean is significant (p= 0.064).Therefore can take result between physicians & nurses group about of personality anxiety there is different.

**Discussion:**

This is the first study in Yasuj,s Hospital in Iran to investigate occupational anxiety in nurses and physicians. Almost all nurses and physicians in state belonging to intensive care units wards were included as our target population. The level of situational anxiety experienced at work by nurses (M=46.96), is higher than that experienced by physicians (M=39.40), and level of personality anxiety experienced at work by nurses. (M=40.96), is higher than that experienced by physicians (M=36.70), in extreme cases, long-term anxiety or traumatic events at work may lead to psychological problems and be conducive to psychiatric disorders resulting in absence from work being able to work again. The results of the study showed that human service workers experience high level of anxiey (in nurses was higher).Anxiety and crises are inevitable in every one’s life. Human beings experience stress early, even before they are born. A certain amount of anxiety is normal and necessary for survival; the studies conducted by study that by Hsin-Chuan Shen et. al. in your study with title Occupational Stress in nurses in psychiatry institutions in Taiwan were done showed that occupational anxiety was associated with young, widowed, divorced, separated ,high psychological demand and threat associated at work(Hsin-Chuan Shen,2005) and Sehlen S. et al.( Sehlen S,2009) in their study with title Job stress and job satisfaction of physicians, radiographers, nurses and physcists working in radiotherapy workplace environments have a negative impact on anxiety levels and the satisfaction of radiotherapy staff that also reveals similar results in this study. We concluded that nurses and physicians in intensive care units are under significant anxiety related to work factors. The healthcare work environment as a source of overwork and anxiety has been implicated in today's nursing shortage. The healthcare work environment as a source of overwork and anxiety has been implicated in today's nursing shortage.

**Conclusion:**

There is a necessity to teach proper methods of coping with anxiety to the physicians and nurses Community as well as the necessity for supportive services .When under anxiety, people find it difficult to maintain a healthy balance between work and nonworking life. At the same time they may engage in unhealthy activities, such as smoking drinking and abusing drugs. All employers

should carefully consider the systems that they have in place for assessing, preventing and otherwise managing work anxiety.

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