

## Media Release

### Chiefs of Staff, News Directors

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## Rural Clinical School helps Mersey nurses research post-colonoscopy pain

It's a touchy subject. But when a Mersey Community Hospital surgeon expressed surprise at the pain experienced after his own colonoscopy, two resident nurses took note.

What followed was the first-ever nurse-led research undertaken at the hospital, in collaboration with the University of Tasmania, and findings that will provide reassurance to colonoscopy patients.

Clinical nurse educators Elissa Shaw and Anne Jong (also an acute pain management nurse) were inspired to embark on a research project after attending a highly motivational workshop in 2009 aimed at encouraging nurses to get involved in research.

Taking into account their areas of expertise and interest (peri-operative, surgical and acute pain management) and the hospital's caseload (the MCH endoscopy suite performs more than 3000 procedures a year), they decided on a topic after one of the hospital's general surgeons, Dr James Roberts-Thomson, commented on how surprised he was to experience considerable discomfort two days after undergoing a colonoscopy.

The nurses found no previous research had ever looked at how much pain patients experience more than 24 hours after a colonoscopy.

Colonoscopy is a procedure that uses a thin, flexible camera to check for abnormalities or disease in the lower intestine or colon, generally performed under deep sedation.

Up to one in three people in Tasmania will have a colonoscopy for screening or diagnostic purposes to provide a visual diagnosis of ulcers and polyps, and allow for a biopsy or removal of suspected colorectal cancer lesions.

The nurses decided to review just how much discomfort patients endured in the three days after their procedure and to see if there were any obvious factors associated with experiencing pain after a colonoscopy.

They took their idea to University of Tasmania Rural Clinical School junior research fellow Heidi Behrens who had long been a link on collaborative work between the Tasmanian Health Organisation - North West and the University, and she agreed to be their mentor.

“It was wonderful to be able to help nursing staff experience the satisfaction of improving clinical practice as part of their everyday work, extending themselves and adding extra scope to their role other than just treating patients,” Mrs Behrens said.

After more than two years of planning, gaining ethics approvals and designing all of the documentation needed, the trio set about gathering data over a six-month period by inviting colonoscopy patients to fill in a survey in the three days after their procedure. Strong community support led to a very high response rate.

The good news, especially for anyone nervously awaiting a colonoscopy, was that the project showed that the majority did not experience much, if any pain or even discomfort.

And those who did experience significant pain found it was usually due to some other factor, with very few needing further investigation. Pain also wasn't associated with diagnosis of diverticulosis, inflammatory bowel disease, cancerous lesions or polyp removal.

Young people in general reported more discomfort than older people, and women experienced more than men. And while the study found very little discomfort was experienced by patients using air to inflate the colon, the research has supported a changeover to carbon dioxide which is known to reduce post-colonoscopy discomfort even further.

RCS co-director Dr Lizzi Shires said that the pain after colonoscopy research demonstrates that the University can support nurses and clinicians to undertake important research to improve patient care in a regional centre.

“One in 12 people will develop bowel cancer and colonoscopy forms an important part of the screening and diagnosis. Just knowing that so little discomfort is actually experienced could encourage more people to come forward for screening and that in turn could save lives,” she said.

The research team is aiming to produce an information sheet to go out to general practitioners outlining the colonoscopy procedure, giving the research results that show there is very little pain involved in the procedure, and encouraging patients to take the opportunity to have a colonoscopy bowel screen.

On Thursday at the Australian College of Operating Room Nurses (ACORN) conference in Melbourne Miss Shaw presented the research paper *The Light at the End of the Tunnel: Results from a Study into Post-Colonoscopy Pain* and on Saturday Mrs Jong presented the paper *Unity and Solidarity: The Tale of Two Nurses Working Collaboratively to Produce Quality Clinical Research*.

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