Analysis of bedside entertainment services' effect on postoperative physical activity.

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Background/Objective

- The Patient Power programme was launched by the government in England in 2000.
- Aim: ‘To provide a personal telephone and television for each patient in hospital’.
- Today over 300 acute hospitals offer BES in the UK.
- Their effect on post operative patient mobility has not been explored.
- Aim: to compare the level of postoperative physical activity and length of in-hospital stay of patients undergoing cardiac surgery depending on whether they had access to BES or not.

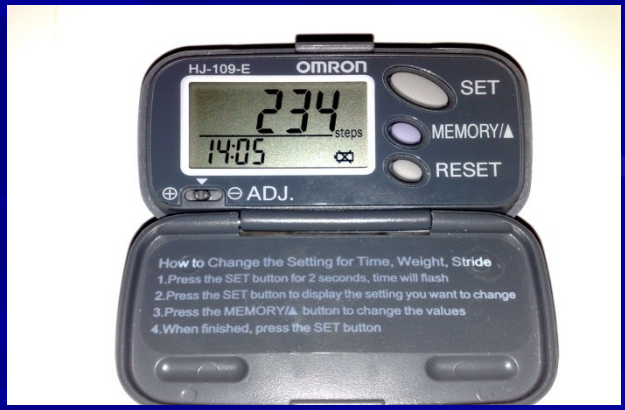
Patients/Methods

- From January - June 2007, 100 patients requiring elective cardiac surgery were randomized to receive access to BES (52 patients) or not (48 patients).

Patient details

	TV On	TV Off
N	52	48
Age (Mean)	63.5	65.6
M/F	35/17	33/15
Operation CABG/Valve	31/21	30/18

- Pedometers were used to quantify postoperative physical activity.



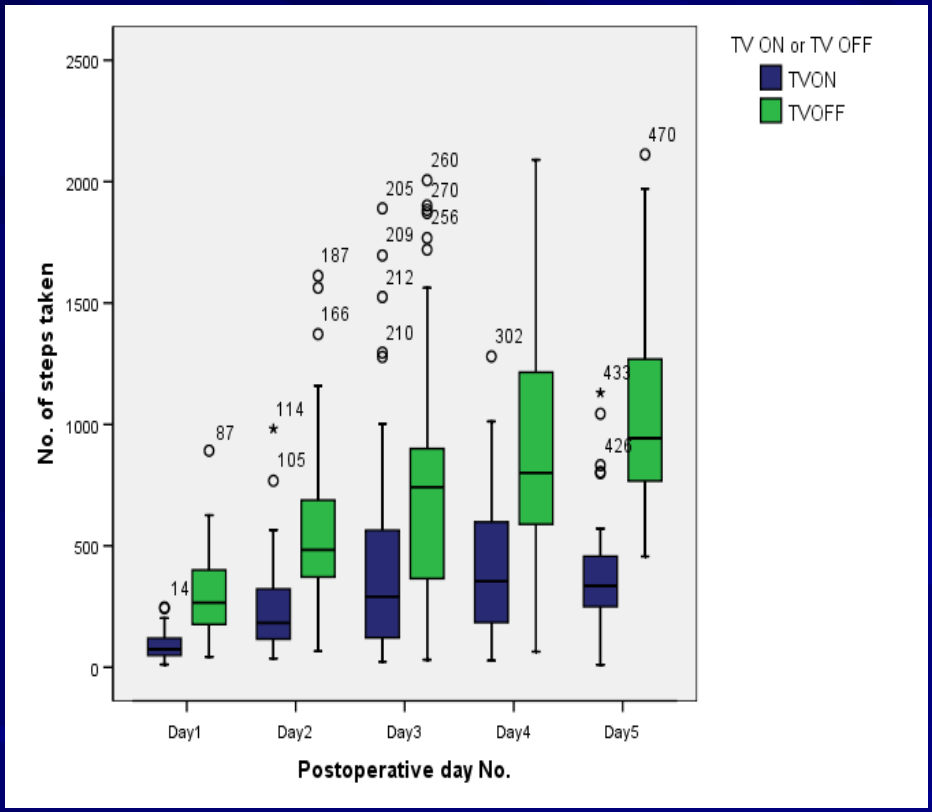
No of steps walked

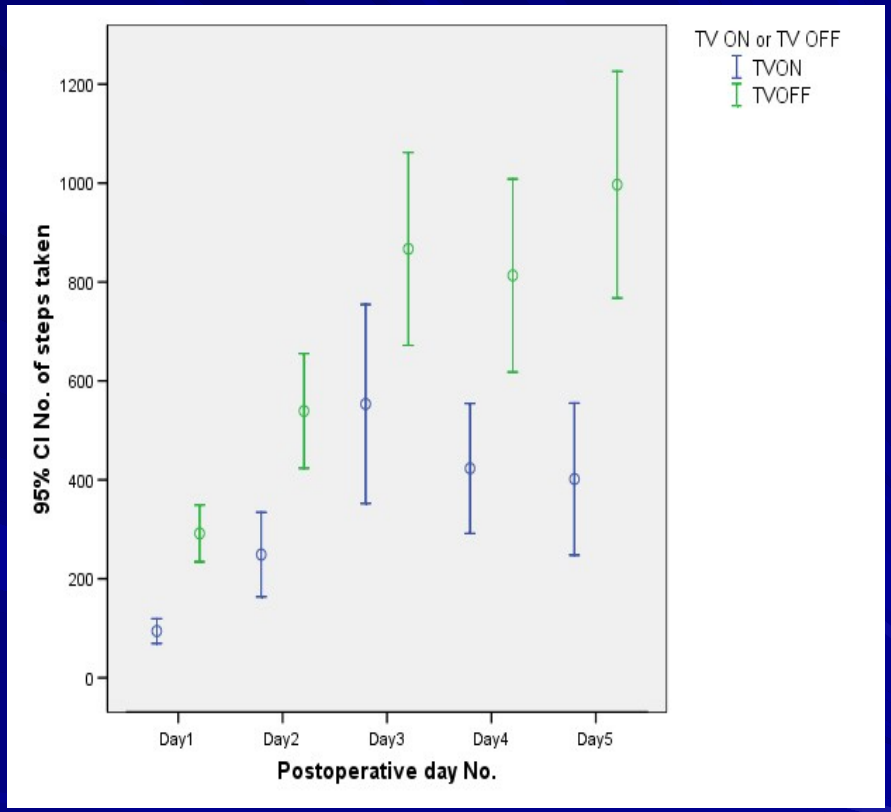
	TV On N=52	TV Off N=48	p
Day 1	88	298	<.001
Day 2	248	552	<.001
Day 3	438	787	<.001
Day 4	414	923	<.001
Day 5	411	1102	<.001

Length of stay (days)

	N	Mean	SE	p
TV On	52	6.40	.09	<.05
TV Off	48	6.00	.12	

Results





Boxes show median with interquartile range; whiskers give the range.
Circles denote outliers, asterisks denote extremes.

Error bars show 95% confidence intervals comparing the two groups for each post operative day.

Conclusion/Recommendation

- We have demonstrated that the bedside entertainment systems may have an adverse effect on post cardiac surgery patient ambulation and may contribute to an increased in hospital stay.

- Get them moving and they will get going.
- Alert patients on the adverse effects of immobility.