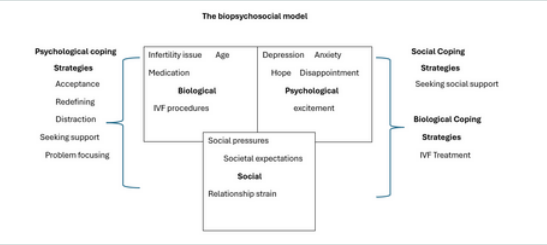


MEDICAL WAITING PERIODS: IMMINENCE, EMOTIONS AND COPING

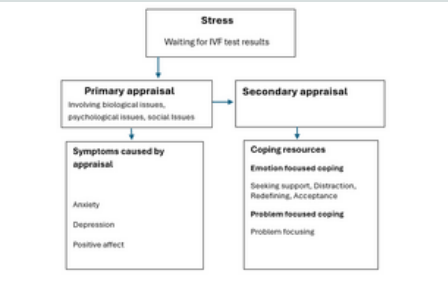
Boivin, J., & Lancaster, D. (2010). Medical waiting periods: Imminence, emotions and coping. *Women's Health*, 59-69.

BIOPSYCHOSOCIAL MODEL



The Biopsychosocial model shows the elements that impacted the participants psychosocial wellbeing. Coping strategies were used by participants, although their effectiveness are unknown.

COPING THEORY MODEL



Coping theory model, showing cause of stress, primary and secondary appraisal, appraisal outcomes and coping resources that were monitored.

References

Fogarty, C., & Cronin, P. (2008). Waiting for Healthcare: A Concept Analysis. *Journal of Advance Nursing*, 463-471.
Gerrity, D. (2001). A biopsychosocial theory of infertility. Sage, 151-158.
Lazarus, R., & Folkman, S. (1984). Stress appraisal and coping. New York: Springer.
Osuna, E. (1985). The Psychological Cost of waiting. *Journal of mathematical psychology*, 82-105.
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BACKGROUND

Many medical procedures require an individual to take varying tests depending on their condition. These tests often have a period of waiting for results to come back. The outcome of medical tests could potentially be negative, which can cause individuals to become anxious and uncertain. The stress for individuals as stated by Osuna (1985) is said to accumulate from the moment waiting for results starts. The individual can do nothing to change test outcomes, which could potentially have negative consequences for the individual and their family. This can cause a sense of powerlessness, causing anxiety, depression and stress (Fogarty & Cronin, 2008). IVF is a procedure to support individuals with fertility issues to have a baby. It can be a long process that has a waiting period before being able to take a pregnancy test to find if IVF has been successful (Gerrity, 2001). Individuals can experience anxiety and depression as well as positive effects during this process and can use various coping mechanisms for their psychosocial wellbeing which can be explored with the biopsychosocial model (Bjornsen-Raming,2024)

OBJECTIVE

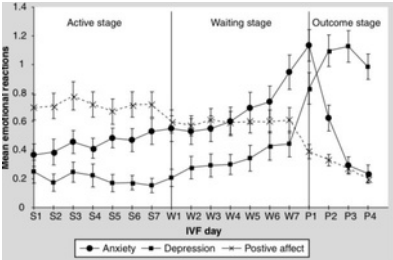
To better understand the psychological processes individuals have whilst going through IVF treatment, whilst waiting for IVF test results and post receiving IVF test results.
To better understand the use of coping mechanisms such as seeking support, distraction, problem focusing, redefinition and acceptance in relation to psychological wellbeing whilst undergoing an IVF cycle.

METHODOLOGY

Participants : 61 women with a mean age of 33.28 years
Inclusion criteria: Women accepted on to an IVF treatment plan that went on to complete it. Women who spoke and understood English sufficiently so as to complete the study materials, Women who were willing to share pregnancy outcomes.
Data collection: Implemented an experimental design collecting quantitative data, was collected daily using a record keeping chart measuring anxiety, depression and positive effects, rated on a scale 0-3. 0 indicated no emotional response and 3 indicated the greatest emotional response. Stone and Neale's daily coping measure, used to indicate coping mechanisms used by participants on a scale 0, not used, to 3, used a lot. Participants also gave information about dates when they receive medical interventions such as blood tests, scans and medications. Participant's data was collected over an 18 day period, seven days during treatment, seven days waiting for results and four days post results.

Results : The effect of waiting on anxiety, depression and positive affects

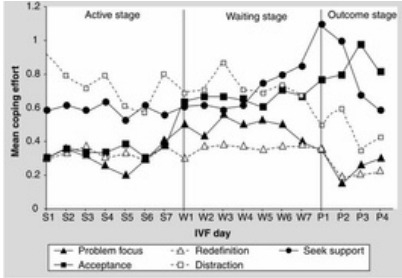
The results showed a clear trajectory of emotional experience at each stage. The results showed that during the seven day treatment stage, participants had higher positive affect and lower anxiety and depression levels. Participants anxiety levels progressed throughout the seven day waiting period and then declined after the result of the pregnancy test was received. Participants depression levels rose through out the IVF cycle. Depression peaked post test date Positive effects declined throughout the seven day waiting period and then dropped significantly post test day.



Graph shows participant levels of positive affect, depression and anxiety, during IVF stages of treatment, waiting and post results

Results regarding participant coping mechanisms to manage psychological effects of waiting

The results showed that participants used various coping mechanisms through out each stage of IVF cycle. During the treatment stage individuals mainly sought support and used distraction techniques. During the waiting period, seeking support and distraction were mainly used although strategies used were less clearly defined at this stage, with a raise in all coping strategies. During the test result stage participants mainly used acceptance, seeking support declined at this stage.



The graph above shows the level of coping during the treatment stage, waiting stage and post-outcome stage

Strengths and limitations

.This study used longitudinal data, tracking the participants moods and coping strategies whilst they experienced them, meaning there was no contamination of recall bias.
.The study was quantitative. A mixed design study could have explored individuals cognitions about their IVF experience and given a clearer understanding on how individuals used coping mechanisms and how they directly influenced participants psychosocial wellbeing, as well as potentially giving a better understanding as to why participants levels of depression raised a few days prior to test results.
.The rise in depression was stated to be due to people appraising imminent events as stressful but this could be considered as not directly relating to depression.
.The study does not represent the women who did get pregnant in the last four days of observation as only 15% of women become pregnant and the mean score used in data analysis does not reflect their psychosocial wellbeing at this time.
.The data used was collected in 1995-1997, the analysis was carried out in 2010

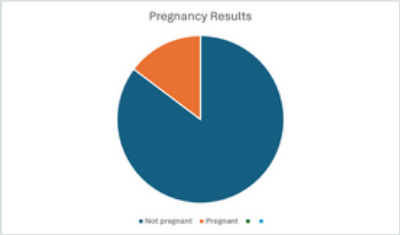
CONCLUSION

The experience of waiting was shown to have a clear emotional trajectory for women undergoing IVF treatment. Individuals levels of anxiety and depression rise during waiting periods closer to test results day and positive affects decline. Women mostly used support and distraction as coping strategies during treatment and waiting periods. The waiting period also showed women use more coping strategies to try and manage rising levels of anxiety and depression. During post test results women used seeking support less meaning alternative support systems could be researched further. Future research may benefit in exploring the effects of each coping mechanism on anxiety, depression and positive affect.

INTERVENTIONS

Future support for individuals undergoing IVF should consider the different stages of the process and the emotional response that each stage elicits to give tailored support.

Future support tools should focus on incorporating social support and distraction techniques.



Pie chart shows that only 9 participants from 61 received positive results for pregnancy.