

Anxiety before surgery



"I approached my fears intensively, totally directly and upfront."

I had to have the operation because I had problems with my bowel movements. At first I thought the blood in my stool was from haemorrhoids. I often had haemorrhoids in the past. I had to have an operation for this. That was my first thought.

The doctor found that there were haemorrhoids but there was more. It needed to be explained. So he checked with his finger into the bowel and felt something. If you can feel something with the finger it is in the lower part of the bowel and not in the upper part. And then I had the thought: "What does that mean - 'I feel something there'?"

The doctor said that he had to make sure that it is nothing malignant. I told him then in his office: "That has to be removed. The operation needs to happen as quickly as possible." I had the feeling that I have to get rid of it quickly. After that everything went very quickly, until the routine blood tests were done. They found hidden blood. This meant that there had to be another step. The practice immediately made me an appointment with an internist for a colonoscopy. We got an appointment within the week. I wasn't all that concerned. It was my wife who was worried.

Then I had the colonoscopy. The doctor said he took a polyp and sent it to the pathology laboratory. He thought that it didn't look good. He hinted that it could be a tumour, maybe a few - actually two of them.

When we got home on the evening we got the diagnosis, then we just hit rock bottom. We cried a bit. But I went to the gym that evening. I could overcome my fears well by getting very active. I went to the gym, and then the thoughts just went away. I was not very anxious then. I could cope with my anxiety because I was active. The next day I was back at work and worked as usual.

I had already said in the doctor's office: "That has to be removed. The operation needs to happen as quickly as possible." I had the feeling that I wanted to get rid of it quickly. It didn't take long. I think we had the consultation on Wednesday and on Monday I was in hospital. The professor operated on me once already and I had confidence in him.

I did not inform myself about the topic at all. I didn't know what would happen next. The only thought I had was that I must get rid of it.

Of course there were fears, too. I wasn't afraid of the cancer, though, but mostly of the anaesthetic ... I didn't

know what the doctor was going to do and whether I would need to go into intensive care.

Now I realise that my wife had taken care of my anxieties during the week before the operation. She gave me a sedative. I still had the jitters before the anaesthesia, though. You always hear a lot about it. It is funny that I was afraid of the anaesthesia and not about my life after the operation, I didn't give that any thoughts ...

Before the operation the professor gave me the standard form to fill out before the operation. In my case it wasn't just the anaesthesia but possibly a colostomy. That's the first time I saw what a colostomy looks like. The doctor was an excellent surgeon. He showed me what would happen and where the artificial bowel opening would go. He did that really well.

I approached my fears intensively, totally directly and upfront. The last time I had to have a cry was on the Saturday before going to the hospital. Usually I play sport on Saturdays and I said good bye to my team mates. I had a cry. It was going to be a serious operation ...

Before the operation I didn't feel anything. I had a sedative to calm me down. If I hadn't had a sedative then I would have been up all night with my head full of thoughts. My wife was anxious, though. She is still worried. We faced the fears together. It depends on how you approach the topic. You should talk about it and try to find something positive in every situation.

ACKNOWLEDGEMENT

These real-life stories were gathered during interviews with patients who generously shared their experiences with us. We are very grateful to these interview partners. All of them have given their permission for these stories to be published here.

The opinions and comments in these stories are the opinions of individuals. They are not necessarily shared by IQWiG and are not intended to serve as recommendations to help people make decisions.

Glossary

diagnosis

The term diagnosis (from the Greek word *diagnosi*: “distinguishing”) is used to mean the identification and naming of an illness or a disease. A diagnosis is usually made by evaluating the medical history, symptoms and test results. The tests include both comprehensive physical examination and blood tests or examinations using medical instruments such as ultrasound or x-ray.

Sources

The German Institute for Quality and Efficiency in Health Care (IQWiG)

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You can find a list of the evidence and other scientific literature on which this information is based at [**www.informedhealthonline.org**](http://www.informedhealthonline.org)

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