

The experience of claustrophobia in continuous positive airway pressure therapy

Patricia A. Dettenmeier Saint Louis University, School of Nursing



INTRODUCTION

- Obstructive sleep apnea (OSA) affects 18 million Americans
- Untreated OSA is a major cause of heart attack, heart failure, arrhythmias, stroke, premature death, peri-operative complications
- Continuous positive airway pressure (CPAP) is the mainstay therapy
- Claustrophobia impairs ability of some to use CPAP

RESEARCH QUESTIONS

- What is the meaning of claustrophobia in people with OSA?
- What are the bodily sensations of claustrophobia in people with CPAP?
- How have childhood and adult experiences impacted claustrophobia in people with CPAP?
- How do claustrophobic people cope with the challenges of using CPAP?

PHILOSOPHICAL BACKGROUND

- Healthcare is dominated by the mechanical model of the body; the lived body experience is disregarded
- Diagnosis of OSA and treatment with CPAP disrupts the patient's world and the lived body
- Effective use of CPAP requires skillful use for the machine to withdraw into the background.
- Claustrophobia may interfere with skillful use of CPAP

STUDY DESIGN

Inclusion criteria

- Age 18-90, Community dwelling
- Diagnosed with sleep apnea via prior polysomnogram
- Prescribed CPAP, may be intolerant
- Subjective claustrophobia
- Ability to read and speak English, complete questionnaires and draw a picture

Exclusion criteria

 Moderate or severe cognitive impairment and cannot complete interviews or questionnaires

CLAUSTROPHOBIA

fear of enclosed spaces

DEMOGRAPHIC QUESTIONNAIRES

- Baseline demographics (age, gender, height, weight, race, household income)
- Likert type scale for anxiety, depression, claustrophobia (range 0-10)
- Adverse Childhood Experiences (ACES) (range 0-10)
- Beck Anxiety Inventory(BAI) (range 0-63)
- Claustrophobia Questionnaire and added CPAP specific items (CLQ) (range 0-196)
- Epworth Sleepiness Scale (ESS) (range 0-24)
- Patient Health Questionnaire-9
 (PHQ-9) (range 0-27)

METHODOLOGY

Interpretive phenomenology: semi-structured interviews

- Interview 1- claustrophobia and embodiment
- Interview 2- OSA and CPAP
 - Drawing-what claustrophobia feels like

Data analysis

- Triangulation of data with interviews, drawing and questionnaires, member checking
- Review interviews and field notes for Themes,
 Exemplars, and Paradigm cases

PRELIMINARY RESULTS

- 4 Subject interviews before July 30, 2018
- **Demographics**: Non-working Caucasian females, ages 44-68, Income \$0-75,000
- Questionnaires (subject range)
- Anxiety (0-10), Depression (1-10), Claustrophobia (5-10), ACES (1-7), BAI (18-62), CLQ (26-133), ESS (6-19), PHQ-9 (10-24)
- Significant claustrophobic triggers
 - CPAP mask, crowds, sequential compression stockings, MRI, straitjacket
- Embodiment-how claustrophobia feels
 - Palpitations, sweating, chest tightness, feel like suffocating, lightheaded
- Preliminary themes
 - Life altering events
 - "I have to be sedated for MRI."
 - "I can't believe I have sleep apnea."
 - Altered bedtime routine
 - "I dread going to bed and put it off as long as possible."
- Escape
 - "I need to get away."