

# Amputees' Perceptions of what Nurses should Know about Mirror Interventions

Wyona M. Freysteinson, PhD, MN  
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# Acknowledgements

## o Co-researchers

- ❖ Lisa Thomas, MS, CNS, CRRN
- ❖ Denika Douglas, PhD, Licensed Psychologist
- ❖ Amy Sebastian-Deutsch, DNP, APRN, CNS, AOCNS
- ❖ Tania Celia, MSN, RN, PhD candidate
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# Objectives

- o Explore experiences of viewing self in a mirror after amputation of a limb.
- o Explore the way in which nurses may introduce mirrors to individuals who have recently suffered an amputation of a limb.

# Boston Marathon Bombings

o April 15, 2013



# The Problem

- There are no evidence based practice guidelines regarding the mirror-viewing experience to guide nurses in assisting individuals who have had an amputation.

# Study Purpose

- o Generate a description of the mirror experience following a limb amputation and the trajectory of that experience over time.
- o Brainstorm together with study participants potential clinical mirror interventions. We asked:
  - ❖ *What do nurses and other healthcare professionals need to know about the mirror?*

# Methodology

- o Ricoeur's hermeneutic phenomenology
- o Snowball sampling
- o Four semi-structured audio-taped focus groups
- o 9 women & 8 men
- o 19-73 years
- o 3 upper limb loss
- o 14 a lower limb loss



# Data Analysis

- o Researchers and participants met in a final focus group to validate the findings.



# Structural Analysis

- o Mirrors are essentially everywhere. One cannot help but see oneself in a mirror.
  - o *It (the mirror) sits at the end of my hallway. I can't help but see it. Susan*
  - o *In gyms, workout rooms, in the bedroom....we have another mirror...again it's not full length...but I can go ahead and when I'm standing far enough away from it....and I'm holding my crutches... I can see my stump there....decorating mirrors. Joseph*

# Structural Analysis

- Mirrors are rare in healthcare facilities
  - *Well my daughter brought up a mirror to the hospital. Jake*
  - *I just used my mom's mirror to look at the stitches. Ted*
  - *I would get my compact (foundation makeup) mirror out of my purse and put it there (incision) to see for redness or white pus. Anne*



# Structural Analysis

- o Healthcare professionals do not discuss mirrors.
- o *The hospital personnel didn't provide an opportunity to look in a mirror....I felt like they were leaving it up to me to bring it up...to say OK I want to see what I look like vs. hey ....let's go ahead and prepare. Sarah*

# Mirror Viewing Trajectory

- o A cyclical journey of becoming familiar with a new body:
  - Mirror Shock
  - Mirror Anguish
  - Recognizing Self
  - Acceptance: A New Normal

# Mirror Shock

- o It was so surreal that I was not feeling anything...it took me a long time to feel sad about this. Danielle*

# Mirror Anguish

- o Mirror Anguish is an umbrella term for the feelings of horror, deformity, shame discouragement, and sadness, as one views a “different” body.



# Mirror Anguish

*I can remember the first time I ever looked in a mirror...I was doing physical therapy to learn how to start working with this hand.....I hadn't ever really realized that there were full length mirrors there as you walk in....I looked and was completely devastated. I remember just immediately crying and I thought wow this is horrible. This is bad, bad news. Jackie*



# Recognizing Self

- After an amputation focusing on self in the full length mirror seems to be necessary in order to become familiar with a new body.
- *I think for me it became real ...when I actually look at myself in the mirror...it hits you. You realize that my leg is no longer there. Mary*

# Recognizing Self

- o I think seeing yourself (in the mirror)...you would be able to accept it sooner and easier as opposed to just looking down and it's not there...almost beating it into your head.*

*John*

# Focusing on Positive Thoughts

- o It seems to be a common theme that at some point amputees tend to begin to focus on other parts of their body rather than the missing limb.



- *I decided well if that part of me wasn't going to look great the rest of me was going to look friggin' awesome. Jackie*

# Acceptance: A New Normal

- *I think one of the signs of acceptance is being able to see yourself (in the mirror) more. Jessica*
- *I'm not insecure anymore....By looking at yourself in the mirror...(you think) this is me.  
Paul*



# Nursing Mirror Interventions

# Why Introduce the Mirror?

- o To avoid surprise mirror viewings
- o Patients need to be aware of a) mirrors in elevators, physical therapy departments, lobbies, and b) highly reflective surfaces.



# Why Introduce the Mirror?

- o I would just like to ...be informed...be prepared about what the experience might be like and that other people have a similar experience because until this day, it never really occurred to me this might be a shared experience that people have when they go through this type of trauma. I just thought it was me having these issues. I don't know why...it never occurred to me that this is just a normal part of the process but...I just felt like it was about my body image issues, about me not that it was part of the process. Karen*

# Why Introduce the Mirror?

- *I'm thinking if I had been introduced to it (the mirror) earlier I would feel some of my negativism would have subsided. Anne*



# Who Should Introduce the Mirror?

- o It can't be an item to check off a list of things to do.
- o It should be presented by/with a person who has rapport with the individual.



# How Should Mirrors be Introduced?



*Ease them into it... say “we’ll be by in an hour or two”....That gives them the opportunity to say no, hell no...don’t bring it in...I’m not ready. Or they may be curious right way and say bring it in. John*

*That will give you an insight into their brain...how they’re dealing with it and if they need a different type of help first. Susan*

# How Should Mirrors be Introduced?

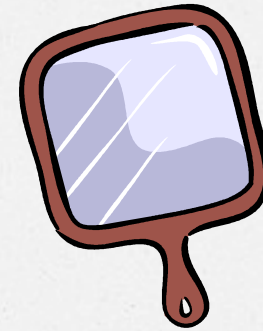
- o I think it shouldn't have been a public event (in a therapy room). Jessica*
- o I know it's going to be hard because someone may not agree to look at themselves in the mirror. It takes time and encouragement. Paul*

# How Should Mirrors be Introduced?

- o Prepare patients that there is a range of reactions to the experience, in a matter of fact way.
  - *You may be surprised...you may be shocked...you may not like it...you may not be willing to recognize the person that you see ...but I think that preparation can take away the shocking feeling and make it better.*

*Elaine*

# Mirror Size



- o Begin with small mirrors.
- o Small mirrors are used to assess for skin breakdown at the prosthesis site and to aid in the assessment of incision sites for signs of infection.

# Mirror Size



*Viewing your amputated limb in a small mirror seems to be a totally different experience from seeing your whole body (including the amputated limb) in a larger mirror. Danielle*

# Mirror Size

- *You want more of the big picture. John*
- *I would go straight for the larger mirror. Karen*
- *I think it's important for you to get a full body-sized image ...because if you just have a small mirror...your brain will focus on your residual limb not... this is my body. Mike*

# How Should Mirrors be Introduced?



- o Offer the patient an opportunity to view self in a large mirror.
- o Offer the patient a choice. “Would you like me to stay with you or I can leave you alone?”



# Family & Loved Ones

- o The mirror viewing experience may be difficult for the family and loved ones.
  - *My Mom...wouldn't let me get into looking at the mirror. Mike*
  - *She (my Mom) would allow me to look at myself in the mirror...but I think it was really hard for her to accept it as well as for me. Mary*

# Family & Loved Ones

- o Well I think they should go there (mirror education). I was married briefly but that was one thing I never liked. I hated to be in the bathroom at the same time with him....I hated that. I didn't like seeing myself in the mirror...and him...it didn't bother him but it bothered me. Sarah*





# When to refer to a Psychologist

- Comorbid conditions
  - Post-traumatic stress disorder
  - Drug or alcohol abuse
  - Mood or anxiety disorder
- Refusal to look in mirror or persistent avoidance of mirror

# Potential Benefits

- o Nurses know the shock and anguish that may be associated with initial mirror viewings are emotions that may lead to safety issues.

# Potential Benefits

- o When nurses offer a mirror, patients enter into the experience with the knowledge, at a minimum, that *my nurse seems to understand what I am going through*.
- o When nurses share the knowledge that the mirror experience can be difficult due to the emotions any individual may have, patients know they are *not alone* in this experience.

# In Conclusion

- Body image is essentially an unexplored field.



- Further research is needed in order to develop effective nursing mirror interventions.

# Contact Information

- o Wyona M. Freysteinson, PhD, MN  
Associate Professor,  
Nelda C. Stark College of Nursing  
Texas Woman's University,  
Houston, Texas  
Sigma Theta Tau Nurse Faculty  
Leadership Scholar

o [wfreysteinson@twu.edu](mailto:wfreysteinson@twu.edu)