Prevention of Post Intensive Care Syndrome in Spouses with SAF-T Intervention
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Purpose
The purpose of this study is to:
• determine effect size of the Sensation Awareness Focused Training (SĀF-T) intervention on Post Intensive Care Syndrome (PICS) in Family Members, specifically spouses, and
• explore if the effect of SĀF-T and sleep/rest are related.

Background
• Critical illness is a family crisis.
• Family distress in response to critical illness does not disappear after intensive care unit (ICU) discharge.
• Society of Critical Care Medicine identified a cluster of complications (ongoing anxiety, depression, and posttraumatic stress disorder [PTSD]) as Post Intensive Care Syndrome (PICS) that commonly occur in both family members and ICU survivors.

Review of the Literature
• Evidence in the literature suggest higher stress levels are experienced by spouses and surrogate health decision-makers in the ICU environment, which increases their risk for PICS.
• PICS psychological impairment is higher and persists longer in family members than in adult ICU survivors.
• SĀF-T intervention uses saccadic eye movements to rapidly eliminate negative biological sensations of stress.
• Management of daytime stress may also improve nighttime sleep/rest and further reduce risk of PICS.

Methods
• Randomized controlled trial
• Sample (n = 10) are spouses of mechanically ventilated, critically ill patients randomly assigned to either intervention or control group
• SAF-T intervention - 15 minute assisted stress reduction technique using side-to-side eye movements & coaching by trained research staff over first 3 days in ICU
• Sleep/rest measures via wrist actigraphy over first 3 days in ICU
• 4 assessment time points (pre test/post test and 2 follow-ups)

Results
Study enrollment is complete. Results will be made available following the completion of data collection and data analysis.

Conclusion
Family interaction can have a significant impact on the experience of critical illness. The results of the study are expected to add new knowledge on the feasibility and practicality of providing interventions for spouses of critically ill patients, during the early ICU admission period, as well as feasibility of longitudinal follow-up measures post hospital discharge.

Clinical Implications
PICS is an emerging, growing problem with a larger aging population and increased rate of ICU survivorship. Family-centered interventions, started early in the ICU stay, may improve outcomes for spouses of critically ill, mechanically ventilated patients.

Figure 1. SAF-T Intervention

Table 1. Key Variables and Measures

<table>
<thead>
<tr>
<th>Concept</th>
<th>Measures</th>
<th>Data Collection Time Points</th>
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<tbody>
<tr>
<td>PICS-F</td>
<td></td>
<td>Study Day 1 Study Day 3 Study Day 30 Study Day 90</td>
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<tr>
<td>Symptoms of Anxiety</td>
<td>Hospital Anxiety and Depression Scale (HADS)</td>
<td>*</td>
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<tr>
<td>Symptoms of Depression</td>
<td>Impact Event Scale (IES)</td>
<td>*</td>
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<tr>
<td>Symptoms of PTSD</td>
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<tr>
<td>Stress</td>
<td>Perceived Stress Scale (PSS)</td>
<td>*</td>
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<td>Sleep/Rest</td>
<td>Actigraphy (continuous over a 3-day period in ICU)</td>
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<td>Behavior Function</td>
<td>NIH Toolbox Emotion Battery</td>
<td>*</td>
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<tr>
<td>Demographic Characteristics</td>
<td>Age, race, ethnicity, sex, history of PICS-F conditions, level of education, &amp; distance of hospital commute</td>
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