

Towards Spirituality After Coronary Artery bypass grafting: A Hermeneutic Phenomenological Study

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Mohammad Abbasi¹, Nooredin Mohammadi^{2*}, Alireza Nikbakht Nasrabadi³, Mina Gaeni¹

¹ School of Nursing and Midwifery, Qom University of Medical Sciences, Qom, Iran.

² School of Nursing and Midwifery, Nursing Care Research Centre, Iran University of Medical Sciences, Tehran, Iran.

³ School of Nursing and Midwifery, Tehran University of Medical Sciences, Tehran, Iran.

Abstract

Background and Objectives: Patients are oriented towards spirituality after coronary artery bypass grafting (CABG). The aim of this study was to explore the patients' spiritual experiences after CABG.

Methods: This qualitative study was conducted using hermeneutic phenomenology. 11 participants (7 males and 4 females) were interviewed in Tehran Heart Center Hospital in 2013 using maximum variation along with purposive sampling methods. The interviews were recorded and then converted to texts word for word. The texts were analyzed using van Manen six-step method.

Results: The main theme of the contents which were experienced by the participants was spirituality and its sub contents were: trust in God, Supplicating to the Prophet and Imams, and accepting the will of God.

Conclusion: The findings showed that the participants who had undergone surgery on coronary artery bypass grafting had a rise in spirituality. They took advantage of spirituality to handle their problems. Using the research findings, members of the treatment team, especially nurses, can use this study to advance care planning and to train patients and their families better.

Keywords: Coronary Artery Bypass Grafting, Qualitative Study, Spirituality.

***Correspondence:** Should be addressed to Dr. Nooredin Mohammadi. **Email:** nooredin.mohammadi@yahoo.com

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Introduction

Spirituality is the essence of all human beings (1). Considering the very breadth of this concept, people have taken into account different definitions of spirituality. Spirituality has been deemed to be the meaning of life. It is the coordinator between an individual and self, as well as God, others, and nature. And for the sake of completeness, it makes the personality perfect and integrates all aspects of life together (2-4). Besides, spirituality is very effective for an individual to adjust to critical conditions and life-threatening events (5). Diseases, especially life-threatening ones, are also counted among critical and serious conditions. In this regard, Momen Nasab quoted from Seaward (2012), "each critical condition or crisis is in fact a spiritual crisis for an individual" (6). Coronary artery disease is the most common cause of death in Iran (7). It is a

stressful and life-threatening experience for people (8). In addition to the physical problems of heart disease, patients experience a mental health condition such as fear, anxiety, depression, and lack of confidence and worry about future (9). Psychological disorders such as fear of sudden death, fear of recurrent myocardial infarction (10), anxiety (11), depression and doubt (12) were reported after cardiac events. Falahi Khoshknab et al. (2009) gave a verbal account of patients' experiences regarding "living under a shadow of fear" and "living with restrictions" after cardiac failure (13). Momen Nasab et al. (2012) stated that cardiac patients reported near-death experiences. Patients came to the conclusion that their situation deteriorated after myocardial infarction and near-death experiences were described by them. Due to the vital importance

of heart to the human being, something during or after a heart attack brings to people's mind the probability of death (6).

Many methods are available for treating heart diseases. The coronary artery bypass grafting (CABG) is the most effective among them (14). Coronary artery bypass surgery is a stressful experience for all patients (15). Shafipour et al. stated that the experiences of patients after CABG are like these feelings: "A lethal threat at the crossroads", "finding a way to stay alive" and "a forced compromise with the situation" (16). Due to the serious condition of patients after CABG, the treatment teams often pay attention only to the physical aspect of patients and psychological, social and spiritual aspects of human beings are neglected from time to time (17). And hence all aspects of human beings including the spirituality should be considered as a whole, relating these aspects to treatment outcomes. Regarding the paucity of studies in the domain of spirituality and the importance of spiritual health in the setting of CABG and also considering the need of assessing individuals' real world from different angles, which should be based on authentic and accurate criteria to provide the effective practices and procedures in the qualitative studies, this research was performed using the approach of naturalism. Thus, the actual events, opinions and experiences in different fields were checked throughout the time of the study. The goal of this study was to determine the spiritual experiences of patients after CABG.

Methods

This qualitative study was performed with the hermeneutic phenomenological approach using van Manen method. The hermeneutic (interpretive) phenomenology as a methodical approach aims to detect and interpret the structures and participants' lived experiences. The hermeneutic phenomenology interprets, analyzes, and explores the intended phenomenon and a deep understanding of the lived experiences is set to be achieved in this process (18). In this study the intended phenomenon is the CABG with regard to patients' spiritual experiences. To understand the spiritual experience of these patients, it is

appropriate to use phenomenological approach to explore their real world. It is thus that van Manen six-step method was conducted as a practical guideline in this study. van Manen stated that a researcher's interest to the nature of a phenomenon was the first step in a study. van Manen paid attention to the spiritual experience phenomenon of patients suffering from CABG when he was working as a clinical nurse. Accordingly, the second step was the targeted selection of participants from among people referred to the outpatient clinic of Tehran Heart Center Hospital. The participants in this study were 11 patients (7 males and 4 females). The first selection criterion was the patients' own experience of CABG for at least six months and it was a matter of interest to all participants of the study. People with mental problems and physical ailments such as severe heart failure and shortness of breath were not included in the study. To obtain data, semi-structured face to face interviews were done. The interviews were between 55 to 70 minutes. The interviews began with a general question about the CABG experience. By not breaking the silence, the researcher allowed the participants to express their real experiences. In cases where further explanation and understanding were needed, the researchers asked questions such as "Can you explain this more?", "What did you mean by this expression?". Third, it was contemplation and reflection on the themes that were inherent in describing the phenomenon. Using thematic analysis, the researcher determined the main themes of life phenomena dealt with CABG, at this stage. Given that, van Manen proposed three analyses of holistic approach, selective approach, and detailed approach. It should be noted that the researcher used holistic and selective approach.

The researcher read the texts several times to obtain a comprehensive understanding of data when they were received from the participants. The major concept of the text as a whole arose by careful consideration. By focusing on the question of "what could be extracted from the text", the researcher wrote his overall understanding of the text. Using selective and detailed approach, the participants' lived experiences of CABG were extracted from the

contents of texts including sentences, phrases, and words even by way of connotation. For this purpose, each interview was separately and carefully read word for word. A word, phrase, or sentence that seemed to be related to the participants' lived experience of CABG was written on a column and each page. Then, according to the semantic and conceptual similarity, it was placed in a separate category and a concept was given to it. The fourth step of van Manen was about the art of writing and rewriting. At this stage, the goal was to attain a strong description of the life phenomenon regarding CABG. The fifth step was to maintain a strong relationship with the phenomenon. At this stage, the main question of the research was considered for a whole part to ensure that the study not to be kept out of the course of action; hence, the process perpetuated the strong link with the phenomenon. van Manen's last step

was to rebalance the relationship between the parts and the whole. Using selective and holistic approach and considering the main question of the research, van Manen performed the ongoing review of the parts and the whole at this stage. Furthermore, to ensure the validity of this study, an effective communication based on trust was established with the participants of this study. Transcripts were given to the participants after analyzing the interview. Also, the research team along with several observers evaluated the process of study step-by-step and they gave corrective feedback.

This study is part of the researcher's nursing PhD dissertation. It was approved by Tehran University of Medical Sciences Ethics Committee (90. D.130 .2654). By presenting the letter of introduction for performing his study, the researcher obtained the permission which was received from the relevant authorities. By introducing himself to the participants, the researcher received a whole oral and written informed consent from them. The researcher committed himself to keep personal information strictly confidential.

Result

11 participants (7 males and 4 females) were interviewed. The average age was 59.6 ± 2.55 years old with a history of coronary artery

bypass grafting for two to 13 years. After analyzing data, spiritualism showed itself predominantly as the main themes in this study. The contents of the themes included the Sub-themes of "trust in God", "Supplication to the Prophet and Imams", and "the acceptance God's Will".

Spiritualism

Participants of this study stated that they tended to be more oriented towards spirituality after CABG. Spirituality deeply affected their lives and that brought radical reform to their life style. The participants claimed that in the face of difficult circumstances after surgery, they became closer to God and the Imams (peace be upon them) at every moment of their life. They stated their religious beliefs in the form of themes such as trust in God, Supplicating and the acceptance of God's Will (Table1).

Table 1 Extracted themes and sub-themes

Theme	Sub-themes	Concepts
Spiritualism	Trust in God	Hope in God
		The invocation to Absolute Power
		Entrusting your ways and efforts to God
	Supplication	Supplicating to the Prophet and Imams while facing with problems
		Distributing charitably
		Making a request for help to the Imams
	Acceptance of God's Will	Acceptance of God's will
		Being happy to please God
		God is First and last and His Hand Makes all issues

Trust in God

In this study, participants declared that they became closer to God after CABG and they had asked for His help in difficult conditions. They also found inner peace by trust in God and their difficulties and hardships were more endurable. In addition, they concluded that only trust in God and the help of His Absolute Power would always open doors, making a way for them to go forward. A participant said, "I always appeal to God in difficult situations and recite verses that I have learnt by heart. I read and review a passage of them" (participant 6). In this regard, another participant said, "it keeps me thinking of God. I was praying and had a vow to help the poor ... just entrusting myself to God. I would

say thank God Who gave me a second life” (Participant 11). The other participant said likewise, “I’d left everything to God. Life wasn’t a matter of importance to me. My property, wife, and children did not matter. I just kept praying to God” (Participant 9). In regard with trust in God, a participant said:

My family encouraged me to go Tehran and to undergo surgery on my heart ... In God I put my trust and confidence. Now whatever I want to do, I’ll place my trust in God, no matter what happens. In God I’ve gone Tehran to visit doctors because I know that they are mediums and whatever He wants will happen (participant 1).

Participant 8 said, “After a very difficult operation, I asked God for help and thank God, my conditions have been resolved.”

Supplicating to the Prophet and Imams

All participants of the research resorted to the help of the Prophet and Imams in difficult conditions and on different occasions after their surgery. A participant said about supplication, “I’ve prayed and supplicated for solving my life problems all the time. In fact, every time I had a problem or wanted something, I would appeal to God and had a vow to help the poor... We are Shiite in any way” (Participant 6).

Asking the Imams to make du’aa’ (supplication) for our problems, the other participant said, “A problem came up after my surgery and that problem was solved by resorting to the Imams” (Participant 11).

Acceptance of God’s Will

After CABG, The participants concluded that everything is in the Hands of God and affairs are done with God's Will; hence, they were in the state of continuing to live with their consent, satisfaction and hope for a brighter future. Regarding the acceptance of God’s Will, a Participant said:

It is the first and the last surviving Hands. He knows what to do, thank God we came here ... I had a surgery and thank the treatment team for that operation and the rest ultimately depends upon God’s Will (Participant 11).

The other participant continued likewise:

It was God's will when I had survived. If you could see me ..., Nobody believes that they could see me alive one more time, I faded out ...

Now that I am alive is God’s Will. And I’m well satisfied with God’s Will. His Will is going to occur in any way (Participant 8).

Discussion

The main objective of this study was to explore, describe and interpret the patients’ spiritual experiences after CABG. It uncovered rich insights into this phenomenon and the themes derived from the patients’ words have manifested themselves in the study. In fact, these themes were answers to these questions that what the spiritual experiences of patients were after CABG. Regarding patients’ spiritual experiences, the participants answered these questions in the form of "spiritualism" after CABG. This spiritualism had several sub contents including trust in God, asking the Prophet and Imams to make du’aa’ (supplication), and acceptance of God’s Will.

All participants of this study pointed out the role of religious beliefs for enduring a great deal of complication and hardships after CABG. Many studies have shown that patients resorted to their religious beliefs in the face of adversity and problems (16, 6). It can be stated that spiritual approach would increase after a heart attack and then after coronary artery bypass grafts surgery in these kinds of patients (19,20). Given that spirituality and culture have a close relationship with each other (21) and considering the Islamic culture of Iran and its Shia majority (20), the participants endured harsh conditions after CABG, resorting to their religious beliefs.

The first sub content of this study was to trust in God. With respect to life-threatening condition after CABG, the participants did fully trust God's Power in order to preserve their life better. They recited and reviewed verses of the holy Quran and Imams’ sayings, putting their hope in the glory of God. It was a disease that they fully entrusted to Him. By doing supplication, they transformed themselves into an understanding of God’s Power and that put their mind at rest. All participants referred to this verse of the holy Quran:

“verily the remembrance of God put people at ease”

They stated that this particular sort of inner peace, tranquility, and trust had helped bring happiness and assistance for them. That is, they were easily adapted to the situation and their problems by appealing to the Quran and Imams.

All participants affirmed the usefulness of supplicating to the Prophet and Imams (peace be upon them) while facing with problems. They followed supplication (Dua) and overcome their problems.

In many studies, many references have endorsed these points that there are relationship between spiritual, physical, and mental health and the capability to coping with a disease. Koenig suggested that people who had stronger religious beliefs could cope better with stressful life event that they found themselves trapped in it (22).

Rassool believed that there was a relationship between spirituality and healing diseases (23). Ebadi et al. expressed the psychological role of religious beliefs in better understanding of life events and continued, "Religion can create a sense of hope, a feeling of being close to others, emotional peace, opportunity, self-comfort, a true intimacy with God, and helping solve the problem effectively" (24). Also, Jacobs-Pilipski et al. showed the role of spirituality and religion as an important factor in coping with life stressors. (25).

In regard with religious belief, it seems that nurses should be aware of spiritual care in taking care of patients. Nurses can pave the way for spiritual care of the patients to accelerate the healing process of diseases.

This study has several limitations that they have restricted the use of findings. Participants were Iranian Muslim patients in this study which cannot be generalized to other countries and religions. Moreover, the experiences of cardiac patients after CABG have only been used to identify the concept of spirituality. Consequently, it limits the generalizability of the findings to other heart diseases. Hence, it is recommended that a study should be conducted in conjunction with spiritual experiences in other types of heart diseases. Besides, this study should be done with religious minority patients in Iran to contribute for development of knowledge regarding this concept.

Conclusion

According to the results of this study, it can be concluded that spiritualism affects patients' lives by giving them true meaning of life and death after CABG. It can explore and provide a course of action to counter with spiritual tensions caused by heart diseases and surgical operations. Considering the interpretive approach in this study, it is necessary for researchers to develop a model for effective spiritual intervention. It should be sensitive to religious and cultural differences too. All participants made a positive endorsement of spiritual care; hence, the demand for spiritual care should be considered in planning the nursing education and in-service training programs of nurses. The health system must make nurses ready for providing spiritual care services. Also, it should pave the way for clergymen to participate in this project to derive a benefit from their spiritual forces latent in this stratum of society. On condition that it happens, this policy causes patients to regain their health sooner and can provide a unique opportunity to develop the spiritual care education of nurses.

Conflict of interest

The authors declare no conflict of interest.

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