A Lack of Knowledge and a Fear of Food Triggers Suffering in Patients with a History of Acute Diverticulitis: An Interpretative Phenomenological Analysis

Eberhardt, Fiona; Jenkins-Chapman, Julie; Nucera, Romina; Dalwood, Phoebe; Canavan, Russell; Marshall, Skye

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Corrupted diet-disease knowledge and fear of food trigger suffering in patients with a history of acute diverticulitis

An interpretative phenomenological analysis

skye_marshall@bond.edu.au; @DrSkyeMarshall

Introduction

The inpatient dietary management for acute diverticulitis routinely includes dietary restrictions despite a lack of evidence for this approach.

The lack of qualitative research prevents understanding the patient experience, which is a barrier to providing patient-centred care.

Findings

Participants' described experiencing a phenomenon we have called the "fear of food framework"; which sits within a context of "corrupted diet-disease knowledge" and is triggered by a "fear of food".

Purpose

To understand the impact of dietary restrictions for the management of acute diverticulitis on patient experience.

Methods

Four semi-structured in-depth face-to-face interviews were conducted with adult patients admitted to a public hospital in South East Queensland, Australia, for acute, uncomplicated diverticulitis treatment. All participants had experienced acute diverticulitis previously, with the first episode ranging from 6-months to 30-years ago.

Interviews were analyzed following the interpretative phenomenological analysis (IPA) framework.

Cycle recommences with increased fear of food

"I'm more dubious [about food] now... I'm going to work harder"

Dietary restrictions

"I'm very careful with foods that I do eat, I'm a bit nervous"

Loss of culture

"we..had Christmas, my husband kept telling me 'you can't eat that'"

Internal locus of control

"I've just got to deal with it...It's your[own] fault you're in here"

Outcome: Psychological pain

"they're not the one suffering"

Trigger: Fear of food

Food was used as a vehicle of blame and causality for the unknown aetiology of diverticulitis occurrence

Social stigmatization

"they [friends] laugh at me"

Diet "failure"

"after I had the food yesterday that's when I had the big pain"

Vulnerability and burden

"The doctors said I can only have clear fluids obviously its common practice with the disease"

Corrupted diet-disease knowledge
patients, family, health professionals