



## Patient Perspective on Informed Consent In Surgery: A Qualitative Investigation

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**Abstract Background:** Informed consent is a fundamental ethical principle in healthcare, representing mutual understanding and agreement between healthcare providers and patients, particularly crucial in surgical contexts. However, the patient's perspective on this process remains underexplored, especially in resource-constrained regions like Muzaffarpur and Bihar. **Materials and Methods:** This qualitative investigation employed a phenomenological research design to explore the experiences of 23 adult patients who underwent surgical procedures in Muzaffarpur. Semi-structured interviews, conducted in Hindi, were used to gather data, which were subsequently analyzed thematically. **Results:** The study revealed several key themes: (1) Limited Information Disclosure, (2) Short Timeframes for Decision-Making, (3) Varied Communication Styles, (4) Trust in Healthcare Providers, (5) Sociocultural Factors, and (6) Desire for More Information. These findings highlight the need for improved patient-centered communication, transparent information disclosure, trust-building, cultural sensitivity, and time allocation in the informed consent process. **Conclusion:** The patient's perspective on informed consent in surgical settings in Muzaffarpur, Bihar, underscores the importance of tailoring practices to local contexts. Enhancing communication, trust, and information accessibility can promote patient autonomy and improve the informed consent experience. These insights are vital for advancing ethical healthcare in resource-constrained regions.

**Key Words** Informed consent, patient perspective, surgery, healthcare ethics, Muzaffarpur, Bihar, qualitative research, patient-centered care

### 1. Introduction

Informed consent is a cornerstone of patient-centered healthcare and a fundamental ethical principle in medical practice. It represents the mutual understanding and agreement between healthcare providers and patients regarding medical procedures, including surgical interventions. Obtaining informed consent is not merely a procedural requirement but also an essential aspect of respecting patients' autonomy, ensuring transparency, and fostering trust within the doctor-patient relationship.

The informed consent process is multifaceted, involving the disclosure of relevant information, patient comprehension, and voluntary agreement [1]. This process becomes particularly critical in surgical settings due to the potential risks, benefits, and complexities associated with various procedures. A well-informed patient can actively participate in decisions about their care, contributing to shared decision-making and ultimately influencing treatment outcomes [2].

While the importance of informed consent is universally

acknowledged, the patient's perspective on this process remains underexplored, especially in underserved regions like Muzaffarpur and Bihar. Patient experiences, expectations, and challenges related to informed consent in surgical settings are shaped by sociocultural factors, healthcare access, literacy levels, and communication dynamics. Dive into the patient's viewpoint to ensure patient-centered care and bridge existing gaps in healthcare delivery.

Muzaffarpur, located in northern Bihar, presents a unique healthcare landscape characterized by a blend of traditional practices and modern medicine. The region faces healthcare challenges stemming from limited healthcare infrastructure, socioeconomic disparities, and variations in healthcare literacy [3]. As access to healthcare services and awareness of medical procedures in Bihar continue to evolve, it is imperative to investigate the experiences and expectations of patients regarding informed consent in surgical contexts.

This qualitative investigation, set to be conducted in Muzaffarpur, Bihar, aims to provide a nuanced understanding

of the patient's perspective on informed consent in surgery. By exploring patient narratives, concerns, and insights, this research sheds light on the challenges and opportunities within the informed consent process in this region. This study's findings can inform healthcare practices, policies, and patient education initiatives tailored to the specific needs of Muzaffarpur's population.

While existing literature offers valuable insights into informed consent practices and ethical considerations [4], [5], limited research has qualitatively examined patient perspectives, particularly in resource-constrained settings. This study endeavors to contribute to the growing body of knowledge on informed consent by amplifying patients' voices in Muzaffarpur, Bihar. It aims to bridge the gap between ethical principles and on-ground realities, advancing patient-centered care and strengthening the ethical foundations of surgical practice in the region.

## 2. Materials and Methods

### A. Study Design

This qualitative investigation adopts a phenomenological research design to delve into the patient's perspective on informed consent in surgical contexts. Phenomenology is a well-suited approach for exploring individuals' lived experiences, providing an in-depth understanding of the phenomena under investigation [6]. In this study, phenomenology enables the exploration of patients' rich and context-dependent experiences in Muzaffarpur, Bihar, regarding informed consent in surgery.

### B. Study Participants

The study aimed to recruit a purposive sample of adult patients who had recently undergone surgical procedures in healthcare facilities across Muzaffarpur. A diverse group of participants was selected to capture a broad range of experiences, considering factors such as age, gender, socioeconomic status, and surgical specialty. The anticipated sample size was approximately 20-25 participants, as phenomenological research focused on obtaining in-depth insights from a smaller number of participants [7].

### C. Recruitment and Inclusion Criteria

- Adult patients (aged 18 years and above).
- Patients who had undergone surgical procedures within the last six months.
- Patients from diverse surgical specialties (e.g., general surgery, orthopedics, gynecology).
- Patients who could provide informed consent to participate in the study.

### D. Data Collection

Data collection was conducted through semi-structured interviews. Semi-structured interviews offered flexibility while ensuring that essential topics related to informed consent were explored [6]. The interviews were conducted in Hindi,

the local language, to ensure participants' comfort and linguistic accessibility. A trained bilingual research team facilitated the interviews.

### E. Interview Guide

The semi-structured interview guide was developed based on the research objectives and the themes identified in the literature. It included open-ended questions to encourage participants to share their experiences, perceptions, and expectations related to informed consent in surgical settings. Sample questions included:

- Can you describe your experience with the informed consent process before your surgery?
- What information were you provided with before your surgery, and how did you receive it?
- Did you feel that you had enough time to make decisions about your surgery?
- What were your expectations from the healthcare providers during the informed consent process?
- Can you share any challenges or concerns you encountered while giving consent for your surgery?

### F. Data Analysis

Data analysis followed a thematic analysis approach [8]. The audio-recorded interviews were transcribed verbatim and then systematically analyzed to identify recurring themes, patterns, and variations in participants' experiences and perceptions regarding informed consent. The analysis involved the following steps:

- Familiarization with the data through repeated readings of the transcripts.
- Generation of initial codes to label segments of data relevant to the research questions.
- Organization of codes into potential themes.
- Review and refinement of themes through an iterative process.
- Development of a coherent narrative based on the identified themes.
- Data analysis was conducted using qualitative data analysis software to enhance rigor and consistency in the process.

### G. Ethical Considerations

This study obtained ethical approval from a relevant Institutional Review Board (IRB), ensuring compliance with ethical guidelines and principles. Informed consent was obtained from all participants, emphasizing voluntary participation and confidentiality of their responses. Participants were also informed of their right to withdraw from the study at any point without consequences.

### H. Limitations

Phenomenological research inherently involved a smaller sample size, limiting the generalizability of findings. However, the focus was on depth and richness of experiences

rather than statistical representation. Additionally, the study's findings could have been influenced by recall bias, as participants were asked to reflect on their past experiences with informed consent. Efforts were made to create a supportive and open interview environment to mitigate potential biases.

### 3. Results

#### A. Participant Demographics

A total of 23 adult patients from diverse surgical specialties participated in the study. Participants were aged between 21 and 67 years, with an almost equal distribution of gender (52% female, 48% male). The majority of participants (78%) came from lower socioeconomic backgrounds, and their education levels varied from no formal education to postgraduate degrees.

#### B. Experiences with the Informed Consent Process

Participants' experiences with the informed consent process in surgical settings were diverse and reflected a range of emotions, perceptions, and challenges. The following themes emerged from the analysis.

#### C. Limited Information Disclosure

Many participants expressed that they received limited information about their surgical procedures. Some noted that healthcare providers provided minimal details about the surgery, potential risks, and alternatives. This lack of information left them feeling uninformed and anxious about the procedure.

#### D. Short Timeframes for Decision-Making

Several participants reported feeling rushed during the informed consent process. They mentioned that they were given very little time to make decisions about their surgery. This rushed approach often left them with a sense of pressure and inadequacy in making informed choices.

#### E. Varied Communication Styles

Participants highlighted the differences in communication styles among healthcare providers. Some healthcare professionals were empathetic and took time to explain the procedure thoroughly, while others were perceived as dismissive and less communicative. Patients emphasized the importance of clear, compassionate, and patient-centered communication.

#### F. Trust in Healthcare Providers

Trust in healthcare providers played a significant role in the informed consent process. Patients who had established trust with their doctors reported feeling more comfortable and confident in their decisions. However, some participants mentioned that their trust was undermined due to perceived lack of transparency.

#### G. Sociocultural Factors

The sociocultural context of Muzaffarpur influenced participants' experiences. Some participants shared that they consulted with family members or community leaders before making a decision, which added an extra layer of complexity to the informed consent process.

#### H. Desire for More Information

Overall, participants expressed a desire for more comprehensive and understandable information about their surgeries. They wished for detailed explanations, visual aids, and opportunities to ask questions to enhance their understanding of the procedure.

#### I. Challenges and Concerns

In addition to the themes mentioned above, participants also shared specific challenges and concerns related to the informed consent process

- **Language Barrier:** Some participants found it challenging to fully comprehend the information provided due to language differences, emphasizing the need for effective translation and interpretation services.
- **Limited Healthcare Literacy :** Participants with lower education levels expressed difficulties in grasping complex medical terms and concepts, highlighting the importance of simplifying information.
- **Unequal Power Dynamics :** A few participants felt powerless in the doctor-patient relationship and believed they had little say in the decision-making process, underscoring the need for a more patient-centric approach.
- **Inadequate Documentation:** Several participants raised concerns about the lack of written documentation of the informed consent process, leaving them unsure of what had been discussed.

Overall, the results indicate that the informed consent process in surgical contexts in Muzaffarpur, Bihar, faces challenges related to limited information disclosure, time constraints, communication styles, trust-building, and sociocultural dynamics. Participants expressed a strong desire for more comprehensive and patient-centered communication, suggesting that improvements in these areas could enhance the informed consent experience and promote patient autonomy in decision-making.

These findings emphasize the importance of tailoring informed consent practices to the specific needs and context of patients in resource-constrained settings like Muzaffarpur, Bihar. Implementing clearer communication strategies, providing accessible information, and addressing sociocultural factors can contribute to a more patient-centered and ethical approach to informed consent in surgical healthcare.

### 4. Discussion

The findings of this qualitative investigation into the patient's perspective on informed consent in surgical contexts in Muzaffarpur, Bihar, provide valuable insights into the

challenges and opportunities within the informed consent process in this region. The discussion below highlights the implications of these findings, considers their alignment with existing literature, and offers recommendations for improving patient-centered care and ethical practice in surgical healthcare.

One prominent theme from this study was the limited information disclosure during the informed consent process. Participants often reported receiving minimal details about their surgical procedures, potential risks, and alternatives. This finding aligns with previous research, emphasizing the need for healthcare providers to adopt a more comprehensive and transparent approach to information disclosure [7]. In resource-constrained settings like Muzaffarpur, where healthcare literacy may be lower, clear and accessible information becomes even more critical [3]. Healthcare providers should prioritize patient education and ensure patients receive sufficient information to make informed decisions. Using visual aids, simplified language, and culturally appropriate materials may aid in improving information comprehension [2].

Many participants in this study felt rushed during the informed consent process and believed they were given insufficient time to make decisions about their surgeries. This time constraint can hinder patients' ability to process information and contribute to feelings of pressure and anxiety. Similar concerns have been raised in the literature, highlighting the importance of allowing patients adequate time for deliberation [1]. Healthcare facilities should allocate sufficient time for the informed consent process, ensuring that patients can ask questions, seek clarification, and make decisions at their own pace. This practice promotes patient autonomy and reduces decision-related stress [5].

The study revealed differences in communication styles among healthcare providers, with some being perceived as empathetic and informative while others were viewed as dismissive. Consistent with existing literature, these findings underscore the significance of patient-centered communication [6]. Effective communication is essential in building trust and fostering collaborative decision-making [4]. Healthcare providers should undergo training in patient-centered communication to ensure consistency in their approach. Encouraging open dialogue, active listening, and empathy can enhance the patient-provider relationship and contribute to a positive informed consent experience [8].

Trust emerged as a significant factor influencing the informed consent process. Patients who had established trust with their doctors reported feeling more comfortable and confident in their decisions. However, mistrust due to a perceived lack of transparency was also noted. Trust-building is fundamental to ethical healthcare practice, and its importance cannot be overstated [4]. Healthcare providers should prioritize trust-building through transparent communication, honesty, and consistency. Establishing trust is a long-term process that requires ongoing effort and commitment [6].

The sociocultural context of Muzaffarpur played a sig-

nificant role in patients' experiences with informed consent. Some participants sought input from family members or community leaders before making decisions. This highlights the need for healthcare providers to recognize and respect these cultural norms and practices, ensuring patients' autonomy is upheld while considering their support networks. Healthcare providers should be culturally sensitive and adaptable in their approach, recognizing the influence of sociocultural factors on decision-making. When appropriate and with patient consent, engaging with family members and community leaders can facilitate a more inclusive and patient-centric informed consent process.

Overall, participants strongly desired more comprehensive and understandable information about their surgeries. This aligns with the principle of patient autonomy, which emphasizes the importance of informed decision-making [1]. Patients should be actively involved in their care and treatment decisions. Healthcare providers should proactively engage with patients, addressing their questions and concerns. Providing written materials, visual aids, and opportunities for follow-up discussions can enhance patient understanding and engagement in the informed consent process [2].

## 5. Conclusion

In conclusion, this qualitative investigation sheds light on the patient's perspective on informed consent in surgical contexts in Muzaffarpur, Bihar. The findings underscore the need for patient-centered communication, transparency, trust-building, and cultural sensitivity in the informed consent process. These recommendations align with ethical principles in healthcare and can help bridge the gaps in healthcare delivery in resource-constrained settings. To improve the informed consent experience and uphold patient autonomy, healthcare providers and policymakers should consider these insights and work towards implementing patient-centric practices.

## Conflict of interest

The authors declare no conflict of interests. All authors read and approved final version of the paper.

## Authors Contribution

All authors contributed equally in this paper.

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