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Introduction

Ketamine infusions have gained attention as a treatment for patients living with chronic pain, particularly in cases where other conventional therapies have failed to provide adequate relief. As a dissociative anesthetic, patients remain conscious during ketamine infusions, and may experience psychotomimetic effects during the infusion. The aim of the multidisciplinary patient ketamine education sessions is to: address patient anxiety and apprehension, manage treatment expectations, allow informed decision making and enhance treatment outcomes. The initiative is delivered by a team which includes registered nurses, psychologists and pain physicians for patients and their care partners. The multidisciplinary team approach to patient education for ketamine infusions at Toronto Western Hospital aims to improve patient outcomes and experiences. By providing comprehensive education, empowering patients, and fostering collaboration among healthcare professionals, this initiative aims to optimize the delivery of care and promote patient-centered practice.

Methods

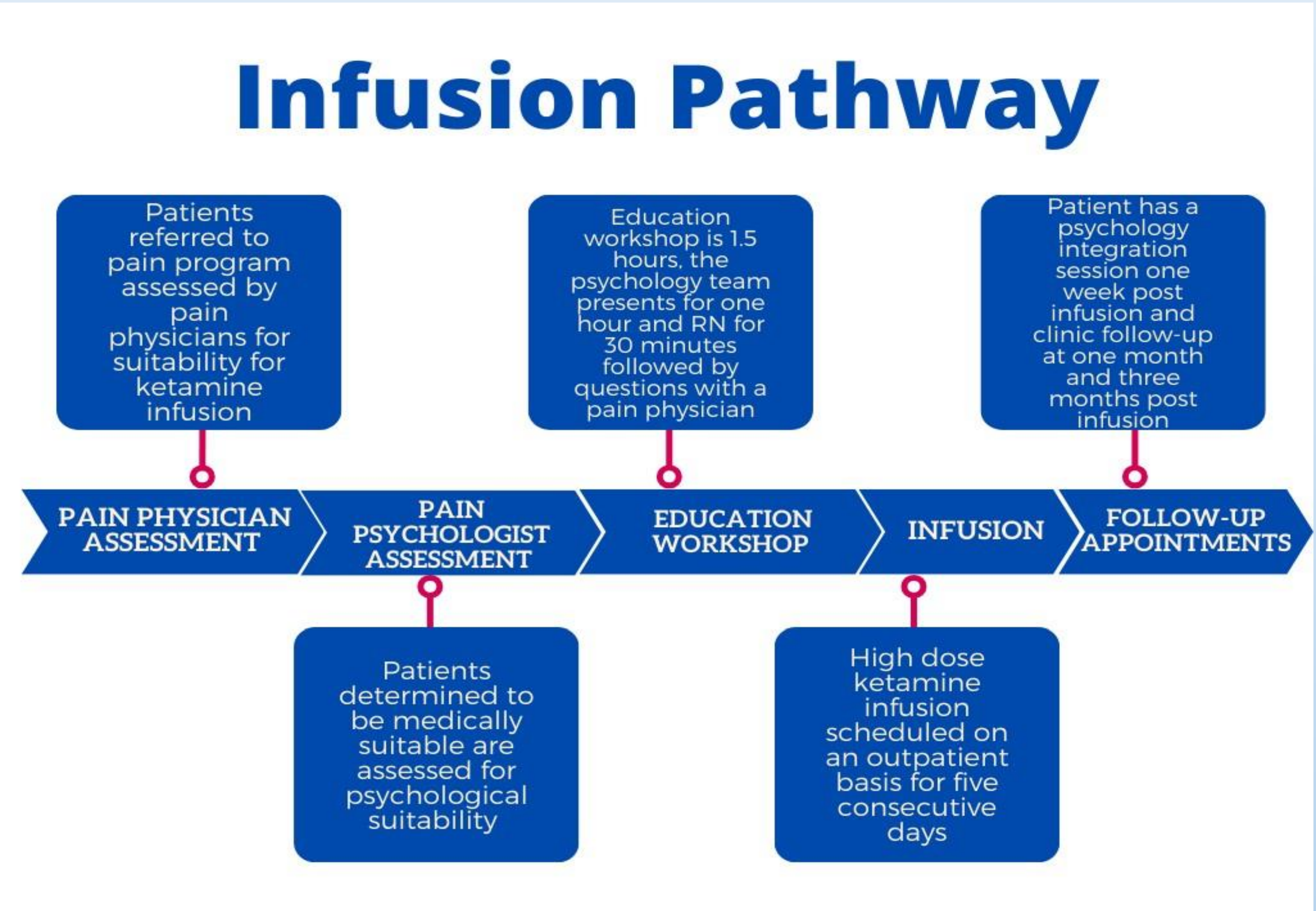
Bimonthly education sessions are held for patients and their care partners who are scheduled to receive ketamine infusions for chronic pain. The team developed evidence based educational materials that cover various aspects of ketamine infusions: mechanism of action, potential benefits and side effects, logistics, and expectations of the infusion experience. Feedback is collected from the patients and caregivers after attending the education session in the form of a workshop evaluation. Questions in the evaluation address content, understanding, delivery and interaction with the presenters.

MULTIDISCIPLINARY TEAM KETAMINE INFUSION EDUCATION BY TORONTO WESTERN HOSPITALS COMPREHENSIVE INTEGRATED PAIN PROGRAM

Results

From April to September 2023 there have been 10 multidisciplinary patient ketamine education sessions for 48 patients and 16 care partners. 47 attendees completed the post education session workshop evaluation. Currently we’ve observed a highly favorable reception to the educational sessions, with almost all questions garnering an almost 100% response rate.

Figure 1. Infusion Pathway



Of the 64 patients and care partners who attended the multidisciplinary ketamine education workshop, 47 completed the post education session workshop evaluation. The results can be seen in figure 2.



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Figure 2. Post education session workshop evaluation results

	Question	n	Responses	
1	The presentation clearly explained how the ketamine infusion works to relieve chronic pain	47	Yes 46(98%)	No 1 (2%)
2	Did the presentation answer all of your questions about the risks of the ketamine infusion and your role in decreasing those risks?	47	Yes 46(98%)	No 1 (2%)
3	I am aware of the resources that I can access and the people I can contact if I have questions or concerns about the ketamine infusion	47	Yes 47(100%)	No 0 (0%)
4	The post infusion instructions were well explained	47	Yes 46(98%)	No 1 (2%)
5	Did the presenters answer all of your questions to your satisfaction about what to expect during ketamine infusion?	47	Yes 47(100%)	No 0 (0%)
6	I have made a psychology comfort and coping toolkit to assist me during ketamine infusion?	47	Yes 41 (89%)	No 6 (11%)
7	I understand that learning good psychological skills is an important part of pain management and that I can maximize my approach to managing my pain and mental health in the post ketamine infusion psychology integration session?	47	Yes 47 (100%)	No 0 (0%)
8	I have more resources (e.g. mobile phone apps, websites) that I can access on my own to help me with coping tools, such as mindfulness?	47	Yes 47(100%)	No 0(0%)
9	I have a better understanding of how chronic pain impacts physical function?	47	Yes 46(100%)	No 1 (0%)

Discussion

The Ketamine education session evaluation can help improve the quality and content of the session while empowering the attendees. Patient- and caregiver-centric feedback is essential to enhancing the ketamine infusions for pain and removing barriers to its success. The team plans to incorporate a post infusion evaluation in the new year to determine retrospectively if patients felt they were prepared for their infusion.