ABSTRACT MP83-07: EFFECT ON EXPECTED AND PERCEIVED PAIN OF TRANSRECTAL ULTRASOUND GUIDED PROSTATE BIOPSY IN ARABIC MEN GIVEN MEDICAL INFORMATION IN ARABIC

Brittany Milliner DO, Joshua Palka DO, Aubrey Allen DO, Nivedita Dhar MD

Detroit Medical Center, Detroit, MI

INTRODUCTION
- There has been an increase in the number of Arabic-only speaking men in Metro Detroit – a population that, historically, has had low prostate cancer screening rates
- Communication between Arabic-speaking patients and non-Arabic-speaking healthcare staff can be improved by using a professional interpreter and Arabic written medical information (AWMI)

OBJECTIVE
Demonstrate that providing Arabic written medical information (AWMI) to Arabic-only speaking men could reduce expected and actual pain of ambulatory transrectal ultrasound guided (TRUS) prostate biopsy

METHODS
- Records from 60 Arabic-only speaking males aged 45-72 with elevated PSA who underwent ambulatory TRUS prostate biopsy from a single urologist between January 2015 to December 2018 were analyzed
- Patients completed the pain grading before and after reading the AWMI and after the TRUS prostate biopsy (Fig 1)
- Pain was graded on an Arabic written Likert visual analog scale (VAS) (Fig 2) where 0 = no pain and 10 = excruciating pain
- The pain scores were evaluated for significance with the use of the Student t test and the Pearson correlation coefficient.

RESULTS
The overall mean VAS score was 4.74 ± 1.51 (range 2-9) before reading AWMI, 3.24 ± 1.57 (range 2-8) after reading AWMI, and 2.18 ± 1.53 (range 1-7) after TRUS prostate biopsy (p < 0.05), as shown in Table 1

Table 1: VAS Scores Before and After AWMI, After TRUS prostate biopsy

<table>
<thead>
<tr>
<th>Point of Pain Assessment</th>
<th>Mean VAS Score</th>
<th>Range of VAS Score</th>
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<tbody>
<tr>
<td>Before AWMI</td>
<td>4.74 ± 1.51</td>
<td>2-9</td>
</tr>
<tr>
<td>After AWMI</td>
<td>3.24 ± 1.57</td>
<td>2-8</td>
</tr>
<tr>
<td>After TRUS Prostate Biopsy</td>
<td>2.18 ± 1.53</td>
<td>1-7 (p &lt; .05)</td>
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CONCLUSIONS
- There was found to be a reduction of VAS scores after providing AWMI to Arabic-only speaking males
- VAS scores for TRUS prostate biopsy were lower than those before and after AWMI
- Our results suggest that the use of AWMI may lower the expected and actual pain of an ambulatory TRUS prostate biopsy

LIMITATIONS
Our study had a small sample size and did not utilize a control group

FUTURE DIRECTIONS
- Further research is needed to identify obstacles, improve access, and provide quality care for this vulnerable population

REFERENCES