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**Elaboration of a questionnaire assessing preoperative expectations: Comparison of patient candidates for deep brain stimulation and epilepsy surgery**Michalina Radomska<sup>1</sup>, Joao Flores Alves dos Santos<sup>2</sup>, Kerstin Weber<sup>2</sup>, Pierre Burkhard<sup>2</sup>, Martial Van der Linden<sup>1</sup> and Alessandra Canuto<sup>3</sup><sup>1</sup>University of Geneva, Switzerland<sup>2</sup>Geneva University Hospitals, Switzerland<sup>3</sup>NANT Fondation, Switzerland

**Statement of the Problem:** Clinical studies in Epileptic Patients (EP) successfully treated with temporal lobectomy have identified a range of psychosocial postoperative maladjustments. Such postoperative issues have also been reported in patients treated with Deep Brain Stimulation (DBS). Researchers have suggested that pre-surgery unrealistic or unspecific expectations may lead to adverse outcomes, despite significant improvements in objective measures. Although various assessments of expectations have been used, there is no validated tool clearly focusing on expectations or hopes related to surgical treatment for neurological diseases. The main purpose of this study was thus to develop an instrument assessing pre-surgery expectations/hopes and to explore its psychometric properties across two clinical populations: Patients undergoing epilepsy surgery and patients qualified for the DBS.

**Methodology:** The Treatment Hope and Expectations Questionnaire (THEQ) were elaborated following a thorough review of relevant literatures. It consists in 22 statements exploring four expectations domains (daily living activities, mental and physical health, psychological wellbeing, social-relational life). Each domain is assessed on 3 subscales: Realistic expectations, hopes and current state (control measure). The THEQ was completed by 30 DBS and 30 EP before the planned surgery.

**Findings:** The THEQ had good psychometric properties. Paired t-tests conducted on realistic expectations and hope total scores (i.e., cross-domains) revealed that both EP and DBS patients reported significantly higher hopes than realistic expectations. Moreover, the two groups were characterized by high expectations and hopes for the mental and physical health domain. Nevertheless, DBS patients had significantly higher expectations and hopes for the social-relational life domain as compared to EP. By and large, DBS patients' expectations and hopes were more attuned towards psychological or interpersonal improvements as compared to EP.

**Conclusion:** DBS and EP endorsed different preoperative expectations, which may affect their adherence to treatment and their postoperative satisfaction. Hence, the THEQ may help clinicians anticipating postoperative adjustment issues.

**Biography**

Michalina Radomska has completed her Master's degree in Clinical and Cognitive Psychology from Faculty of Psychology and Educational Sciences at University of Geneva, Switzerland. She is currently working as an Assistant and Clinical Psychologist in Psychopathology and Cognitive Neuropsychology Unit at University of Geneva. She is also pursuing her PhD in Psychology in the field of psychological outcomes of deep brain stimulation for Parkinson's disease. Her main research interest lies in the understanding of the relationship between preoperative expectations and postoperative psychological adjustment in PD patients.

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