

The effect of postoperative early mobilization on healing process and quality of life following radical cystectomy and ileal conduit: A randomized prospective controlled trial

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Abstract

Aim: This study was conducted to evaluate the effect of postoperative early mobilization in patients who underwent radical cystectomy (RC) and ileal conduit in terms of healing process and QOL. **Methods:** This multicenter prospective randomized controlled study was conducted with 40 patients who were randomly divided into two groups. The intervention group was mobilized within the first 16 hours postoperatively in accordance with the mobilization procedure which determined according to literature. Data were collected using the case report form, HADS and SF-36 QoL scale. **Results:** Postoperative hospitalization, duration of narcotic analgesic administration, first oral food intake, flatus, defecation and NG tube termination time were shorter in the intervention group. In the control group blood glucose and pulse values were higher after mobilization. SF-36 physical function, physical role difficulty and general perception of health were higher in intervention group at the postoperative first and third month ($p < 0.05$). **Conclusion:** Our study showed that early mobilization contributed to the healing process positively and improved the quality of life in the patients who underwent radical cystectomy (RC) and ileal conduit surgery. **Keywords:** Early Mobilization, Radical Cystectomy, Ileal conduit, Quality of Life, Convalescence

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Figure 1. Mobilization Suitability Assessment Guide.pdf available at <https://authorea.com/users/400884/articles/513175-the-effect-of-postoperative-early-mobilization-on-healing-process-and-quality-of-life-following-radical-cystectomy-and-ileal-conduit-a-randomized-prospective-controlled-trial>

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Figure 2 . Mobilization Application Procedure.pdf available at <https://authorea.com/users/400884/articles/513175-the-effect-of-postoperative-early-mobilization-on-healing-process-and-quality-of-life-following-radical-cystectomy-and-ileal-conduit-a-randomized-prospective-controlled-trial>