

建構癌末病人疼痛護理標準及成效評值 Development and Evaluation of the Effectiveness of Nursing Standards for Pain Management for Cancer Patients

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摘要

雖疼痛是癌症中最普遍、也是病人及家屬最關注的症狀之一，但由於大多護理人員對疼痛之知識、態度是不足的，以致無法即時作疼痛處置。所以，本研究期望建構「癌症疼痛護理標準」，以提升護理人員對癌症病人之疼痛照護品質。本研究設計為兩組介入前後比較，以中部某區域教學醫院之癌症病人與護理人員為研究對象。另以簡單隨機方式選取五個綜合內科病房中之一個病房為實驗組及另一病房為對照組。資料以結構式問卷及訪談收集，並以描述性統計包括次數分配、百分比、平均值、標準差，推論性統計包括 t 檢定、卡方檢定或 Fisher's exact test 及共變數分析比較兩組介入後成效差異。本研究共收集 70 位癌症病人，實驗組與對照組各 35 位，兩組病人之基本屬性在介入前無差異($p>.05$)。經疼痛護理標準介入後，實驗組癌症病人之疼痛程度、整體對生活之影響程度及等待藥物處置的時間均小於對照組病人，而對疼痛處置之滿意度與護理人員運用非藥物處置的方法、告知疼痛控制之重要性比率、疼痛程度評估記錄之一致性及完整性則高於對照組，但其中對生活影響程度，除行走能力、睡眠、生活樂趣等變項無差異外，其他變項兩組皆達統計上之顯著差異($p<.05$)。本研究結果發現癌症疼痛護理標準之介入，對癌症病人疼痛之控制是具成效的，亦確實能指引臨床護理人員對癌症疼痛之評估、處置及紀錄之完整性。同時，亦能降低病人之疼痛程度及提升癌症病人對疼痛護理之滿意度。

Abstract

Although pain is one of the most common symptoms of cancer and an important issue for care of both patient and family, most nurses' knowledge and attitudes are inadequate. Therefore, the purposes of this study were to develop nursing standards for pain management to improve nurses' assessment and skills in managing cancer pain, to relieve the patient's pain, and to reduce patients' daily side-effects. The study design was comprised of two groups for pre- and post-intervention comparison. Subjects included cancer pain patients and nurses and from a district hospital in central Taiwan. A simple randomization was used to select one unit as experimental group and one for control group from among five medical units. Data were collected through questionnaires and interviews, and analyzed by descriptive analyses such as number, percentage, mean, standard deviation, inferential analyses such as Chi-square or Fisher's exact test, and

analysis of covariance (ANCOVA). Seventy patients participated in this study, with 35 patients for each group. However, no significant demographic differences were found between the two groups and before intervention. After implementation of pain management standards, the pain intensity, the overall pain affect on general activity and mood, and the waiting time for pain medications were less for patients in the experimental group than for in those of control group. In contrast, patients' satisfaction, the frequency of non-pharmacological approaches to pain management, the rate of communicating to patients about the importance of pain control, and the consistency and completeness in documenting pain intensity were higher for subjects in the experimental group than for those in the control group. However, except for walking, sleeping, and happiness, all other variables showed significant differences between groups. The findings of this study indicated that the implementation of nursing standards in pain management is effective, can serve as a guide for nurses to assess and manage patients' pain and to improve the completeness of documentation. Meanwhile, patient's pain intensity can be reduced, and satisfaction can be increased.