# 影響 C 型肝炎病患就醫因素之探討一以台北市某醫學中心爲例

## **Factors Influencing Health-seeking Behavior of Chronic Hepatitis C**

### Patients – Example of a Medical Center in Taipei City

### 中文摘要

本研究依據健康信念模式,探討影響C型肝炎患者採取定期返診追蹤行為的相關因素,研究結果希能提供相關單位在制訂肝炎防治政策時參考。本研究是以自填式結構性問卷為研究工具,問卷係依據本研究的研究目的、研究架構、相關文獻、及臨床專家提供經驗研擬而成。本研究採橫斷式調查研究設計,研究對象來自台北市某一醫學中心在民國93年1月1日至95年12月31日期間,在該院腸胃科門診診斷為C型肝炎之病患,有效樣本為516人。研究人員在民國96年2月1日至4月15日期間進行問卷施測,合計回收393份,回收率為76.2%。所得研究資料以描述性統計、t檢定、單因子變異數分析、皮爾森積差相關分析、以及複迴歸分析等方法進行分析。重要研究結果如下:

影響 C 型肝炎病患過去採取就醫行為的重要解釋變項包含:研究對象之教育程度、工作型態、過去一年家庭的年收入、初次被診斷為 C 型肝炎的肝功能指數、及醫師第一次告知為 C 型肝炎時研究對象當時的年齡,以及健康信念中的自覺 罹患 C 型肝炎的預後、自覺採取就醫行為的障礙、及採取就醫行為的相關線索 和經驗,其解釋力達 45.8%。

而預測 C 型肝炎病患未來可能採取就醫行為重要解釋變項則包含:性別、教育 程度、工作型態、過去一年家庭的年收入、初次被診斷為 C 型肝炎的肝功能指 數、及醫師第一次告知為 C 型肝炎時研究對象當時的年齡;以及健康信念中自 覺罹患 C 型肝炎的嚴重性、自覺採取就醫行為的障礙、及採取就醫行為的相關 線索和經驗,其解釋力則為 27.8%。

根據本研究的結果顯示,C型肝炎病患的健康信念和社會人口學因素確實會影響 其定期就醫行為。基於本研究發現,建議1.加強民眾對C型肝炎的認知;2.加 強衛生教育宣導管道;3.擴大C型肝炎治療試辦計畫給付條件;4.減免C型肝 炎病患定期篩檢的部分負擔費用5.對弱勢族群建立就醫管道;6.強化醫生在教 育民眾的角色功能,期望藉此研究發現能提供政府當局未來制定相關醫療防治政 策時參考。

#### 英文摘要

This research investigates the related factors which influence the regular follow-up behavior of hepatitis C patients, based on the health belief model. The research results may serve as a reference to the authority in forming policy on hepatitis prevention. This research employes a structured questionnaire which is composed according to the research purposes, research frame work, related references, and experiences provided by clinical experts. The research approach is a cross-sectional wethod. The research subjects are patients who were diagnosed as hepatitis C in the gastroenterology outpatient department of a medical center in Taipei, starting January 1, 2004 to December 31, 2006. There were 516 valid samples. Questionnaires were sent out during February 1 to April 15, 2007, and 393 questionnaires were returned. The response rate was 76.2%. The methods used to analyze data include descriptive statistics, t test, one-way ANOVA, Pearson correlation analysis, and multiple regression analysis. Major research results are as follows.

The significant independent variables which influence the past health-seeking behavior of hepatitis C patients include the education level, work style, household annual income of the previous year, liver function index when the subject was first diagnosed as hepatitis C, the subject's age when first informed affected with hepatitis C by a physician, and the perceived susceptibility, perceived barriers of action, and cues to action of the health belief model. Total variances explained are 45.8%. The significant independent variables which predict possible health-seeking behavior of hepatitis C patients in the future include gender, education level, work style, household annual income of the previous year, liver function index when the subject was first diagnosed as hepatitis C, the subject's age when first informed affected with hepatitis C by a physician, and the perceived severity, perceived barriers of action, and cues to action of the health belief model. Total variance explained are 27.8%. This research results show that the health belief of hepatitis C patients and social demography will affect hepatitis C patients' behavior. Based on the research findings, the following suggestions are made and may serve as a reference to the authority in forming policies on medical prevention. 1. To enhance the public's cognition to hepatitis C. 2. To enhance the promotion channel for health education. 3. To expand the payment condition to the trial plan of hepatitis C. 4. To reduce the periodical screening co-payment for hepatitis C patients. 5. To build the medical channel for minority groups. 6. To enhance the medical doctors' role in educating the public.