不同磷酸濃度酸蝕牙釉質後

中文版自覺口腔健康衝擊量表之評估及其初步應用

The assessment and preliminary survey of a Chinese version of oral health impact profile

中文摘要

研究目的：對中文版口腔健康衝擊量表（Oral Health Impact Profile, OHIP），進行信效度評估，實地進行口腔健康狀況評估，驗證中文版量表的臨床實用價值，並且以中文版口腔健康衝擊量表，探討影響口腔健康相關生活品質的因素。研究方法：本研究為橫斷式研究，將經過前譯、後譯、專家審定以及前測之中文版口腔健康衝擊量表為工具，以立意取樣，面對面訪談的方式蒐集資料。收案來源來自三個地方：前往台北醫學大學附設醫院牙科部健檢或是就診之病患（N＝95）、前往參加台北醫學大學附設醫院牙科部與社區合作之巡迴社區健檢之民眾（N＝245），以及位於台北市區，公辦民營之老人安養護中心（N＝60，用以再測信度之測定）。除量表內容外，另檢測受試者口腔健康行為、口腔健康情形以及自覺口腔健康狀況。研究結果：中文版口腔健康衝擊量表內部一致性 Cronbach’s α，以七個範疇計算數值為 0.862，以 14 項題目計算，數值達 0.882，屬於高信度；再測信度方面，以七個範疇計算，ICC（Intra-class Correlation Coefficient）為 0.86，以 14 項題目計算，ICC 數值達 0.835。以 Pearson 積差相關係數計算量表七個範疇間之相關性，其 Pearson γ 達 0.3 以上，彼此之間達顯著相關 ($P<0.01$)。以 one way ANOVA 及 t-test 計算，自覺口腔健康狀況與量表各範疇以及總分有顯著相關（$P<0.01$）；有無配戴活動假牙，與量表功能限制、生理限制、殘障（$P<0.05$）範疇以及量表總分有顯著相關（$P<0.01$）；Eichner index 分類與量表功能限制、身體疼痛（$P<0.05$）、生理限制、殘障（$P<0.05$）範疇量表總分有顯著相關（$P<0.01$）。以 Pearson 積差相關係數計算連續變項相關性，缺牙數目與功能限制、生理限制、殘障範疇以及量表總分有顯著相關（$P<0.01$）。結論：中文版口腔健康衝擊量表在信度及效度的表現上，為一穩定有效的量表。而缺牙數、有無配戴活動假牙以及 Eichner index，對於受試者主觀的感受，直接的反映在口腔咀嚼功能不適上，故在量表結果上反映出與生理功能有關的結果。

英文摘要

Purpose：This study is to assess and evaluate the Chinese version of Oral Health Impact Profile, to validate the measure, to verify the practical value of the measure and to discuss the factors effecting oral health related quality of life with this measure.Material and Method：This study is cross-sectional study. With purposive sampling, we collected the data by face-to-face interview with the Chinese version of oral health impact profile which has been through forward translation, back translation, committee discussion and pilot test. The data source were from three places：1. the patient heading to Taipei Medical University Hospital dentistry department for dental check up or dental treatment（N＝95）; 2. the citizen heading to community health examination held by Taipei Medical University Hospital dentistry（N＝245）; 3. the elderly in the elderly homes（N＝60, for test-retest reliability）.Besides the questionnaire, we also examined the oral health behavior, oral health status, and perceived oral health status. Result：The Cronbach’s α of the Chinese version of oral health impact profile is 0.862 calculated with seven dimensions and 0.882 calculated with fourteen items. As respect of test-retest reliability, the intra-class correlation coefficient（ICC）is 0.86 calculated with fourteen items and 0.835 calculated with seven dimensions. As respect of the relationship between the seven dimensions, with the Pearson correlation, the Pearson γ of all the dimension are above 0.3, which shows significant relation（$P<0.01$）. Calculated with one way ANOVA and t-test, the perceived oral health status is significant correlate with the subscale of seven dimensions and the total scale of the measure. Wearing removable partial denture or not is significant correlate with the dimension of functional limitation, physical disability, handicap（$P<0.05$） and total scale of the measure（$P<0.01$）.The classification of Eichner index is significant correlate with the dimension of functional limitation, physical pain（$P<0.05$）, physical disability, handicap（$P<0.05$） and total scale of the measure（$P<0.01$）. The amount of teeth loss is significant correlate with the dimension of functional limitation, physical disability, handicap（$P<0.05$） and total scale of the measure（$P<0.01$）.Conclusion：The reliability and validity of the Chinese version of oral health impact profile reveals that it is a stable and effective measure. The amount of teeth loss, wearing removable partial denture or not and the classification of Eichner index show directly in the discomfort performing chewing function, as respect of the subjective feelings of the volunteer.