癌痛病患與護理人員對關懷照護行爲之評量: 與疼痛程度之相關 Cancer Patients' and Staff s' Ratings of the Caring Behaviors: Relationships to Levels of Pain

本研究採橫斷式及描述性相關研究、病患-護理人員配對(patient-nurse dyad)的研

中文摘要

究設計,目的在探討癌痛病患與護理人員對關懷照護行爲之評量與疼痛程度之相 關性調查,利用結構式問卷收集資料,採方便選樣,取台灣北部三家經行政院衛 生署八十九年度醫院評定等級爲區域等級以上的醫院,癌症病房及腫瘤病房單位 之醫院。共收集 50 對病患-護理人員配對,利用由 Cleeland(1990)學者發展的簡 明疼痛量表及 Larson(1984)發展的關懷照護行爲評估量表等結構式問卷收集資 料,所收集之資料,以平均數、標準差、百分比、獨立t檢定、配對t檢定、單 因子變異數分析及皮爾森相關分析等統計方式進行結果分析。 研究結果發現癌症疼痛經驗會中度至重度影響日常活動、睡眠問題和情緒困擾, 尤其以睡眠問題影響最大,而護理人員低估病患之疼痛程度及疼痛影響程度。 大部分癌痛病患認爲重要的關懷照護行爲以專業技術的執行能力爲主,期望護理 人員能準時給予止痛藥來緩解疼痛、知道如何注射及迅速回應病患的呼叫。而護 理人員認爲給予生理適切的照護爲最重要的關懷照護行爲。另外,病患認爲護理 人員知道何時呼叫醫師是很重要的,但與護理人員認知上相左。在不受限於疼痛 情況下,病患與護理人員也同樣認爲護理人員執行專業能力上是很重要的。 病患疼痛程度越高,期望護理人員能有能力去感受病患所承受的痛苦,並能預期 病患會經歷的過程作適當的處置。而疼痛影響各層面越高之病患,期望護理人員 給予的關懷照護行爲是以專業的技術及態度來解決疼痛所帶來的影響。而護理人 員認爲疼痛程度越高及疼痛影響病患各層面程度越高,多接近病患是護理人員重 要的關懷照護行爲,例如:準時給予藥物治療、迅速回應病患的呼叫等行爲。 本研究結果有助於瞭解癌痛病患與護理人員對疼痛程度評估之差異及對重要關 懷照護行爲之認知差異,並瞭解疼痛程度與護理人員關懷照護行爲之相關爲何, 可提供臨床實務及護理研究之參考,並建議若在臨床能加強系統式疼痛評估及設 立溝通過程,未來研究能介入溝通課程對護理人員提供有效的關懷照護之影響 力,將有助於護理人員更有效地深入瞭解癌痛病患對關懷照護之需求爲何。 關鍵詞:癌症疼痛、關懷照護、關懷照護行爲

英文摘要

By collecting survey data structurally, we focus this research on cross-sectional and descriptive study including patient nurse dyad research and is designed to probe into the evaluation of caring behavior between patients with cancerous pains and nursing persons as well as the investigation of pain degree suffered from patients relatively. By convenience sampling, we sample three hospitals in the north of Taiwan which

have been accredited as tertiary hospitals or hospitals of more higher level equipped with cancer ward and tumor ward units by the Department of Health, Executive Yuan in year 2000. We gather 50 pairs of patient-nurse dyad totally and use Brief Pain Inventory (BPI) invented by Cheeland (1990) and Caring Assessment Report Evaluation Q-sort(CARE-Q) developed by Larson(1984) to collect survey date structurally and analyze the results by traditional methods including the mean values, standard deviations, percentages, pair t test, Independence t-test, ANOVA and Pearson's Product-Moment Correlation.

We have found that cancerous pains will influence the daily life of patient and will cause the sleeping problem as well as the emotional disturbance with moderate degree to serious degree, especially the sleeping problem. Besides, the caring nurse intends to underestimate the pain degree and influence degree suffered from patients. Most patients with cancerous pains consider that the caring behaviors should be conducted professionally, and they also expect that the nursing persons could offer analgesics on schedule with good skills on injection and response to their calls immediately. Besides, patients also consider that it's very important for nursing persons to know when is the right time to call doctors though nursing persons have different points of view. If pain issues were not considered, both patients and nursing persons agree that it's very import for nursing person to conduct routine affairs professionally.

The more pain patients bear, the more expectation they would have on nursing persons to feel the same as they do and could take good care of everything by knowing what will happen routinely. The more extent of pain, the more they would expect nursing person to offer caring behavior professionally in order to solve their pains. Meanwhile, nursing persons consider the most important thing for patients suffered from higher degree of pain and wider extent of pain is to stay close to them, such as offering medication on schedule and responding to their calls immediately. The result of this research is contributive to make people understand more about the recognition difference of pain degree between patients with cancerous pains and nursing persons and could also be used as reference for clinic affairs and nursing research. We think that reinforce the clinic pain evaluation system, set up the communicational process and create the communication education for nursing persons to offer a more effective caring behaviors in the future research will help nursing persons understand more about what kind of caring behaviors that patients might need most.