

婦科門診更年期護理諮詢方案成效探討

Effectiveness of Nursing Counseling Program for Climacteric Women at a Gynecological Outpatient Department

中文摘要

在婦女親善就醫政策下，如何提供完善有效的婦科門診更年期衛教是門診服務是項重要的挑戰。本研究目的有三：一、了解婦科門診更年期婦女感受與健康資訊需求，二、建構方便、可近、符合需求之更年期護理諮詢方案，三、比較是否使用更年期護理諮詢方案對於婦科門診更年期婦女健康認知、醫療服務滿意度、就診次數及醫療費用之差異，四、分析不同基本屬性對婦科門診更年期婦女健康認知、醫療服務滿意度之影響。

本研究資料之收集分兩階段：第一階段以焦點團體會談法，收集婦科門診診斷為停經症候群之停經中、後期婦女之更年期感受、婦科就診衛教諮詢現況與期待，以及更年期健康資訊需求，並據以製成電話語音護理諮詢專線、衛教手冊與護理諮詢方案。第二階段以類實驗研究法，以婦科門診自然停經中、後期初次診斷為停經症候群婦女為對象。實驗組之更年期婦女提供更年期護理諮詢方案，對照組則採現有的衛教方式。在取得婦女同意參與研究後，即行健康認知、醫療服務滿意度前測，並於參加更年期分享座談會後 3 個月再行後測；同時配合病歷回溯收集更年期相關問題就診次數及醫療費用。收案期間 91 年 3 月至 11 月，共收案實驗組 26 位，對照組 38 位更年期婦女。以 Mann-Whitney U test、Wilcoxon signed ranks test 和 Spearman correlation、Kruskal-Wallis one way analysis 分析資料。

結果發現：更年期婦女之感受與健康資訊需求為建立正向的更年期感受、了解可能面臨的不舒服及其影響程度、更年期身心應有的預先準備、可採行的非荷爾蒙緩解之道、強化荷爾蒙補充療法的認知。更年期護理諮詢方案確能顯著提昇更年期婦女之健康認知與醫療服務滿意度，但對於更年期相關問題、就醫次數及醫療費用並未呈顯著降低，可能與追蹤評值時間較短僅 3 個月有關。另外，基本屬性中僅年齡與其醫療服務滿意度有關，其餘皆無顯著影響。此方案若再加強操作方便性，並擴大至社區婦女使用，就長期追蹤而言，將可降低更年期相關問題、就醫次數與醫療費用，未來對於婦女更年期生活品質與國內健保財務都將有所助益，值得推廣。

英文摘要

Under the policy of women friendly clinic, it is a challenge to provide a comprehensive and effective climacteric education at an outpatient department. The objectives were as follows. 1. to understand the perceptions and health information needs of climacteric women, 2. to establish a convenient, accessible, and fulfilling the women's needs of nursing counseling program, 3. to

compare the differences in satisfaction with health services, number of hospital visits, and costs between with and without using nursing counseling program for women at outpatient departments, 4. to analyze the effects between women demographics and health knowledge and satisfaction with health services. Data were collected from two stages. First stage, focus group interview method was used to collect data from peri- and post-menopause women related to their perceptions, future expectations, health information needs, and current status of education counseling program. The results of focus group were then used to set up a telephone nursing counseling hot line, to make education materials, and to establish a nursing counseling program. Second stage, the quasi-experimental design was used. Peri- and post-menopause women were selected as study subjects. A nursing counseling program was provided to women in experimental group, but not to women in control group. After consent forms were obtained from all women, then health knowledge and satisfaction with health service questionnaires were administrated as pre-test. After participating in climacteric sharing group in three months, women redid the health knowledge and satisfaction with health service questionnaires as post-test. Meanwhile, numbers of hospital visits related to climacteric and costs were collected from reviewing women's charts. The data collection period was from March to November of 2002. Twenty-six women were in experimental group and 38 were in control group. Data were analyzed by Mann-Whitney U test, Wilcoxon signed ranks test, Spearman correlation, and Kruskal-Wallis one way analysis.

The results indicated that climacteric women's perceptions and health information needs were positive climacteric perceptions, understanding the upcoming uncomfortable and affective degrees, preparations for mind and body, releasing uncomfortable methods, and enforcing the knowledge of hormone therapy replacement. The nursing counseling program did improve climacteric women's health knowledge and satisfaction with health services, but reduction was not significant in numbers of hospital visits related to climacteric and costs which may due to short period of three months follow-up. Besides, a significant correlation was found only between age and satisfaction with health service, but not for other variables. In conclusion, if the nursing counseling program could improve its operational accessibility and extend to community women, the number of hospital visits related to climacteric and costs could be reduced, and the quality of climacteric women and the finance of National Health Insurance coverage would be benefit in the long run.