

乳癌高危險群婦女遺傳諮詢需求之因素探討

Genetic Counseling Needs among High Risk Women of Breast Cancer

中文摘要

近年來乳癌遺傳學的蓬勃發展，使得乳癌高危險群婦女的乳癌遺傳諮詢需求遽增。本研究係探討乳癌高危險群婦女乳癌遺傳諮詢需求現況及其相關因素。為橫斷式研究設計，採立意取樣，針對 143 名乳癌患者之一級女性血親以結構式自擬問卷收集資料，研究參與率為 53%。

研究結果發現：(1) 六成的個案知道某些突變基因可能導致乳癌或聽過基因檢測，個案表示獲知乳癌遺傳訊息來源為護理人員者僅佔少數。高中以上、未婚、一級女性血親確立乳癌診時間二年以上及有其他癌症家族者知道這些乳癌遺傳資訊者較多。(2) 乳癌遺傳知識平均得分為 3.2 分 (SD=1.5)，顯示乳癌高危險群婦女對乳癌遺傳知識缺乏瞭解。年齡與乳癌遺傳知識呈負相關，高中以上、無宗教信仰、未婚、無子女、知道乳癌遺傳資訊、曾經與專業人員討論本身未來罹患乳癌可能性者的乳癌遺傳知識較高。(3) 44% 的個案認為自己罹患乳癌的機率與一般婦女相比是「低很多、比較低或一樣」的。八成的個案認為自己「有點可能」罹患乳癌，高估自己的罹患風險者多達 66%。35 歲以下、高中以上、無宗教信仰、無子女、一級女性血親確立乳癌診時間二年以上及有其他癌症家族史者乳癌風險認知較高。年齡、子女數與風險認知呈負相關，乳癌遺傳知識愈高其風險認知愈高。(4) 癌症憂慮平均得分 7.1 分 (SD=2.7)，顯示個案有中度癌症憂慮。乳癌遺傳知識與風險認知愈高其癌症憂慮程度愈高。(5) 乳癌遺傳知識和與專業人員討論本身未來罹患乳癌可能性有顯著相關 (OR=1.43; p=0.002)。個人基本資料，乳房篩檢或檢查經驗、乳房疾病史與癌症家族史，乳癌遺傳資訊、乳癌風險認知以及癌症憂慮等均與乳癌遺傳諮詢需求無顯著差異，但八成的個案表示需要乳癌遺傳諮詢。

為因應乳癌高危險群婦女之大量乳癌遺傳諮詢需求，應將癌症遺傳學納入正規護理教育課程及提供臨床與社區衛生護理人員癌症遺傳之在職教育，以強化護理人員癌症遺傳學知識與提供乳癌高危險群婦女適當的資訊與諮詢之能力。

英文摘要

Recent breakthroughs in genetics of breast cancer have had dramatically increasing the needs of genetic counseling among high-risk women of breast cancer. A cross-sectional design was conducted to examine genetic counseling needs and the associated factors among high risk women. A structured questionnaire was developed to collect data from a purposive sampling of 143 women whose first-degree female relative was diagnosed with breast cancer. Participation rate was 53%.

The findings of the study were as followed: (1). 60% of the study subjects aware of some mutant genes linked to developing breast cancer and heard genetic testing. Only few subjects cited source of information was from nurses. Above high school education, single, time since diagnosis of first-degree relatives above 2 years and self or relatives with other cancer history were more aware information about breast

cancer genetic. (2) The averaged score of genetic knowledge related to breast cancer was 3.2 (SD=1.5). That means high risk women lacked breast cancer genetic knowledge. Age was negatively associated with breast cancer genetic knowledge. Above high school education, non-religion, single, no children, awareness of genetic information, discussion with a health professional about breast cancer risk were associated with higher scores of knowledge related to breast cancer genetics scores. (3). 44% of subjects perceived their risk of developing breast cancer compared with general women were "very low," "lower," or "the same". 80% perceived they were likely to get breast cancer and 66% over-estimated their breast cancer risk. Ages under 35, above high school education, non-religion, no children, time since diagnosis of first-degree relatives above 2 years and have other cancer history were associated with higher risk perception. Age and numbers of children were negatively associated with risk perception. Higher breast cancer genetic knowledge was associated with higher risk perception. (4). The averaged summated breast cancer worry scores were 7.1 (SD=2.7). Which meant subject had moderate cancer worry. Higher breast cancer genetic knowledge and risk perception were associated with more cancer worry. (5). Breast cancer genetic knowledge was associated with discussion with a health professional about breast cancer risk (OR=1.43; p=0.002). None of demographic data, breast cancer screening experience, breast problem, other cancer history, information of breast cancer genetics, risk perception and cancer worry were associated with genetic counseling needs. 80% of subjects needed genetic counseling of breast cancer. High-risk women of breast cancer have great amount genetic counseling needs. "Cancer genetics" should be a part of curriculum for nursing education. Providing continuing education of cancer genetics for clinical and community nurses to improve nurse's cancer genetics knowledge and provide appropriate cancer genetics information and counseling skill for high-risk women.