

運用改良式都治策略照護模式於門診肺結核病患之成效探討

The Effectiveness of the Modified DOT Short Course Care Model on Patients With Tuberculosis at Outpatient Departments

中文摘要

論文名稱：運用改良式都治策略照護模式於門診肺結核病患之成效探討

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肺結核病是屬於高盛行率及高醫療利用之疾病，然在目前的醫療體制下，醫療院所要做都治策略有其困難，因所花費之人力、物力及財力是非常龐大的。因此本研究希望能建立一適合本國醫院門診之結核病患及符合病患及家屬需求之結核病改良式都治策略照護計劃，並比較門診肺結核都治策略病患與一般門診病患於疾病認知程度、服藥遵從性、就醫失聯率、完治率、服務滿意度之差異，以提升肺結核病患之服藥遵從性與照護品質。

本研究設計採兩組前後比較，以中部某兩家區域級醫院為研究場所，因擔心研究對象會互通疾病訊息，污染研究對象，故將 619 床之醫院做為實驗組；另一家 595 床之醫院做為對照組。實驗組採改良式都治策略照護模式，而對照組僅接受一般門診的照護模式。於實施照護方案前及後六個月，收集資料以比較不同照護模式之疾病認知程度、服藥遵從性、就醫失聯率、完治率及服務滿意度之差異。研究資料以 SPSS10.0 及 SAS for Window 9.1 套裝軟體處理，統計方法以描述性統計及卡方檢定、t 檢定、配對 t 檢定及 GEE Model 等進行資料分析。

本研究收案時間為 94 年 10 月 21 日至 95 年 5 月 31 日止，共收案 63 人，實驗組 32 人；對照組 31 人。研究對象中，性別以男性佔多數，共 40 人；佔 63.5%，年齡分佈以 60 歲以上者居多，共 33 人；佔 52.4%，教育程度以國小以下者居多，共 28 人；佔 44.4%，婚姻狀況以有配偶者居多，共 49 人；佔 77.8%，居住以住透天厝者居多，共 53 人；佔 84.1%，職業以無職業者居多，共 39 人；佔 61.9%，抽煙習慣以無抽煙者居多，共 46 人；佔 73.0%，以上變項均無顯著性差異($p > .05$)。在肺結核疾病認知程度方面：實驗組在改良式都治策略照護模式未介入前對疾病認知程度之平均得分為 76.88 分(總分為 100 分)，介入後提昇為 94.69 分，達統計上之顯著差異($p = .000$)；而對照組在改良式都治策略照護模式未介入前對疾病認知程度之平均得分為 74.19 分，介入後提昇為 81.29 分，亦達統計上之顯著差異($p = .001$)。在服藥遵從性、完治率方面，實施改良式都治策略照護模式之實驗組與一般門診之對照組在統計上未達顯著差異($p > .05$)。就醫失聯率方面，實施改良式都治策略照護模式之實驗組無失聯情形發生，而一般門診之對照組有 1 人失聯，失聯率為 3.22%。服務滿意度方面，實驗組對於服務滿意度之平

均總得分為 52.4 分（滿分 60 分）；而對照組之平均總得分為 48.2 分，兩組在統計上具有顯著差異($p = .019$)。

本研究結果發現改良式都治策略照護模式可提升門診肺結核病患之疾病認知程度與服務滿意度，故建議未來改良式都治策略照護模式在肺結核之照護上應廣為推廣，以提升結核病患者之照護品質。

關鍵詞：改良式都治策略照護、肺結核、門診、成效

英文摘要

Title of Thesis: The Effectiveness of the Modified DOT Short course care Model on patients with Tuberculosis at Outpatient

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Tuberculosis is a highly infectious disease and costly. However, under current Health care system, it is very difficult to implement Directly Observed Treatment, Short Course since it requires enormous manpower, resources, and financial investment. Therefore, the purposes of this study were to establish a Suitable DOTS for patients with tuberculosis in Taiwan, and to compare the differences in knowledge of tuberculosis, drug compliance, the percentage of discontinuity, and completion of treatment, and service satisfaction between patients with and without receiving DOTS.

The design was two groups pre-and post comparison. Subjects were chosen from two regional medical teaching hospitals in central Taiwan. In order to prevent any bias resulted from communications between groups, one hospital with 619 beds was selected as experimental group, and another hospital with 595 beds as control group. For patients who were in the experimental group received the Modified DOTS care and the control group was treated with routine care. Data were collected before and after six months of intervention . The differences of the knowledge of tuberculosis, drug compliance, the percentage of discontinuity and completion of treatment, and service satisfaction between two groups were then compared. Data were processed with SPSS 10.0 and SAS for window 9.1 and analyzed using descriptive statistics, chi-square, t-test, paired t-test, and GEE model correlation.

The results were shown as follows. There were 63 patients in total, with 32 from experiment group and 31 from control group. Data were collected from October of 2005 to May of 2006. Of these 63 patients, 40 were males (63.5%); 33

(52.4%) were 60 years old and above. 28 (44.4%) were only elementary graduates or below and 49 (77.8%) were married. 53 (84.1%) were living in town house and 39 (61.9%) were jobless. 46 (73.0%) were non-smoker. However, no significant differences were found between groups in the above mentioned variables ($p > .05$). For the experimental group, the average scores of the tests on the knowledge of tuberculosis for before-Modified DOTS and after-Modified DOTS were 76.88 , 94.69 respectively ($p = .000$). For control group, the average score was 74.19 before -Modified DOTs care and 81.29 after the treatment ($p = .001$). For drug compliance and rate of completion, the results from experimental group were better than that of control group with no significant difference was found ($p > .05$). For rate of discontinuity, no single case was found in the experimental group and only one (3.22%) was found in the control group. For service satisfaction, the average score for the experimental group was 52.4 out of 60 in total and 48.2 for the control group ($p = .019$).

The findings of this study demonstrate that the Modified DOTS care surely increase the knowledge and satisfaction for patient with tuberculosis. Therefore, it is recommended that the Modified DOTs care should be implemented in clinical settings to improve the quality of patient care.

Key words: Modified DOTS, Tuberculosis, Outpatient Department, Effectiveness.