

體重控制介入方案對復健期肥胖精神病患減重之成效探討

The Effective of Weight Control Program on Decreasing Body Weight for Obese Psychotic Recovery Patients

中文摘要

本研究旨在探討復健期肥胖精神病患，經過八週的體重控制方案，予以運動訓練、飲食教育和行爲改變策略介入後對身體質量指數、體脂肪比、腰臀圍比、飲食認知、飲食行爲的影響。採前測-後測類實驗設計，以立意取樣方式，將台北市某教學醫院復健病房符合收案條件之肥胖精神病患 52 名，採分層隨機依診斷、使用精神科藥物、性別，分派至實驗組及對照組，各爲 26 名。實驗組予以施行運動訓練、飲食教育和行爲改變策略介入，對照組予以一般照顧。

所得資料以描述統計、相依樣本 t、獨立樣本 t 考驗等統計方法加以處理分析，顯著水準爲 $\alpha = .05$ 。實驗前作同質性考驗，實驗組及對照組個案之基本資料及疾病屬性在統計上並無顯著差異。

研究結果發現實驗組的身體質量指數、體脂肪比、腰圍、臀圍、飲食認知、飲食行爲與對照組比較皆達顯著差異 ($p < .05$)；顯示爲期八週的體重控制方案介入有助於復健期肥胖精神病患改善身體組成及對飲食認知、飲食行爲的改變有正向的提昇。

英文摘要

The purpose of this study was to investigate the effects of 8-week weight control program, taking exercise training, diet education and behavior modification intervention on the BMI, percentage of body fat, waist and hip circumference, dietary behavior, dietary cognition of obese Psychotic Recovery Patients.

The design of the study was quasi-experimental using a purposive sampling in a district teaching hospital recovery ward, the patients who fit the criteria of this study were assigned to the study. According to the diagnosis, use antipsychotic medications, gender, the patients were stratified randomly sampling divided into experiment group or control group. Each group had 26 participants. Weight control program intervention in the experimental group included exercise training, diet education and behavior modification. However, no any interventions were taken for the control group.

Collected data were analyzed by descriptive statistics, independent t-test, and paired t-test. The significant level was $\alpha = .05$. No statistic significant differences were showed on demographics and disease characteristics between experimental group and control group.

The result indicated that after 8-week Weight Control Program intervention, the amount of the experiment group showed significant difference between pre- and

postexperiment ($p < .05$). The conclusion of this study showed that 8-week weight control program intervention improved the obese Psychotic Recovery Patients' BMI, percentage of body fat, waist and hip Circumference, dietary behavior, dietary cognition.