腹式呼吸訓練對改善併有憂鬱症狀的冠心病病患之心率變異性與憂鬱情形的成效

The Effects of Abdominal Breathing Training on Heart Rate Variability and Depressive Level in Coronary Heart Disease Patients With Depressive Symptoms

中文摘要

本研究目的探討腹式呼吸訓練對改善併有憂鬱症狀的冠心病病患之心率變異性與憂鬱情形的成效，並進一步探討介入後心率變異性變化與憂鬱情形改變是否相關。本研究收案對象為北部某家醫學中心與某家區域教學醫院心臟內科門診經醫師轉介之併有憂鬱症狀的冠心病病患共 62 位，所有個案經過貝克憂鬱量表第二版（中文版）測量後，篩選出 62 位憂鬱得分大於 10 分之個案，進行隨機分配組別，將個案分為接受腹式呼吸訓練（實驗組）與未接受腹式呼吸訓練（對照組），兩組個案均需接受個人健康問卷與心率變異性測量。實驗組接受腹式呼吸訓練和腹式呼吸訓練日誌記錄共計四週，整個腹式呼吸訓練過程為居家訓練，每日練習三次，每次十分鐘，並每二週實施心率變異性測量、貝克憂鬱量表第二版（中文版）和個人健康問卷測量；對照組-研究人員每週進行一次電話諮詢與關懷，共計四週，四週後實施心率變異性測量、貝克憂鬱量表第二版（中文版）和個人健康問卷測量。所得資料以 SPSS 15.0 套裝軟體進行資料分析與檢定。

研究結果顯示：1.實施腹式呼吸訓練之前中後測的貝克憂鬱量表第二版（中文版）得分，在統計學上有顯著差異（$F = 19.82$, $p < .001$），個人健康問卷得分，在統計學上有顯著差異（$F = 8.904$, $p < .001$）。2.實施腹式呼吸訓練之前中後測的心跳、心率變異性在統計學上均無顯著差異。3.心率變異性變化量與貝克憂鬱量表得分在統計學上無顯著相關；心率變異性變化量與個人健康問卷得分在統計學上均無顯著相關。

藉由本研究結果得知腹式呼吸居家訓練可以有效改善冠心病病患的憂鬱情形。

英文摘要

The purpose of this study was to investigate the effects of abdominal breathing training on heart rate variability and depressive level in coronary heart disease patients with depressive symptoms, and to further explore the question of whether changes in heart rate variability are related to changes in depression. A total of 62 patients diagnosed with coronary heart disease were included. All participants had a Beck Depression Inventory (BDI) score of greater than 10. Participants were randomly assigned to receive abdominal breathing training (experimental group) or conventional care (control group). All participants were tested at baseline for depressive levels and heart rate variability. The experimental group practiced abdominal breathing at home for four weeks, three times a day, 10 minutes each time. Measurements of heart rate variability and depression were repeated at Week 2 and 4 in the experimental group and Week 4 in the control group. Beck Depression Inventory (BDI) and Patient Health Questionnaire-9 (PHQ-9) were used to measure depressive levels.

Abdominal breathing training significantly reduced the BDI scores, ($F = 19.82$, $p < .001$) and PHQ-9 scores ($F = 8.904$, $p < .001$). Abdominal breathing training did not significantly affect heart rate variability. The changes in heart rate variability from pretest to post-test were not related to the changes in BDI or PHQ-9 scores.

In conclusion, abdominal breathing training can effectively reduce depressive levels in coronary heart disease patients.