肺癌病患在化學治療期間疲憊程度及其相關因素

A Study on the Fatigue Levels and Related Factors and Fatigue Coping Strategies of Lung Cancer Patients During Chemotherapy

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摘要

本研究針對肺癌病患接受化學治療期間疲憊程度及其相關因素和疲憊因應策略 作探討,採橫斷式相關設計(cross-sectional correlation design),以立意取樣 (purposive sampling)選取東部、北部及西部各一所準教學以上之醫院的肺癌病 患,資料收集於民國90年1月至4月間爲止,共完成75份有效之問卷。所得資 料以 SPSS for Windows 8.0 之統計軟體,運用描述性統計、t 考驗、單因子變異 數分析、皮爾遜積差相關分析及逐步?歸分析進行資料分析。研究結果發現肺癌 病患接受化學治療期間,疲憊發生率僅次於咳嗽,但卻最嚴重困擾病患。病患之 症狀困擾、焦慮程度及憂鬱程度皆與疲憊程度之間呈顯著的正相關,且可做爲疲 憊感的預測因子,對疲憊感的解釋變異量爲 54.4%。而化學治療療程、化學治療 後的天數皆與疲憊程度達顯著性差異,血色素數值則與疲憊程度呈負相關。在疲 憊因應策略方面,病患使用疲憊因應策略的頻率與疲憊感無關,但整體而言,病 患自認爲因應策略的有效性得分越高,疲憊感得分會越低,此達統計上之意義。 本研究結果將有助於臨床護理人員瞭解疲憊問題及其相關影響因素,同時讓護理 人員了解改善病患症狀困擾、焦慮感及憂鬱感是疲憊照護的重點之一。另外,建 議臨床上應針對病患的個別性,給予個別的護理,並且可鼓勵病患採取自認爲最 能有效改善疲憊感的因應策略,以達疲憊感之改善,進而增進病患的生活品質及 健康。

Abstract

The purpose of this research is to study the fatigue level and its related factors of the lung cancer patients during the chemotherapy and the strategies to cope with. A cross-sectional correlation design and purposive sampling were used. Participants teaching hospitals. One is located in the East, one is located in the North and the other is located in the West of Taiwan. The data was collected from January 2001 to April 2001. A total of 75 valid questionnaires was completed. We did the statistical analysis with descriptive statistics, t-test, ANONA, Pearson's correlation and stepwise multiple regression by SPSS for Windows 8.0. The result indicated that during the

chemotherapy, fatigue is the second major side effect after coughing, but it is what bothers the patients most. There is a significant positive correlation among the syndrome distress, anxiety, depression and fatigue. The above three can be the predictive factors of fatigue. The explanation variance to fatigue is 54.4%. There are significant differences among the fatigue level, during of treatment and the days after treatment. There is a negative correlation between hemoglobin level and fatigue. About the strategies to cope with fatigue, the frequency of using the strategies has no correlation with the fatigue level. Generally speaking, if the patients believe that the strategies work on them, they get fewer scores on fatigue. This has reached the statistical significant. The result of this research will help the nursing staff understand the fatigue levels and its related factors. In the meantime, it could help the nursing staffs understand that improving the patients' syndrome distress, anxiety and depression are the point of fatigue caring. In addition, patients should be taken care of by their individual differences and personalities. Nurses could also encourage the patients to choose a strategy that they believe it would be helpful for them to cope with fatigue to improve their quality of life and their health.