

健康控制重心信念對術後病患使用非藥物疼痛因應策略之 相關性

Relationship between Postoperative Patient's Health Locus of Control Beliefs on Application of Non-pharmacological Pain Coping Strategies

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摘要

本研究目的為：(1)瞭解胃部術後病患使用非藥物策略因應其疼痛問題的現況，(2)瞭解胃部術後病患的健康控制重心信念，(3)探討胃部術後病患健康控制重心信念與人口學特性(年齡、性別、教育程度)，對其使用非藥物因應術後疼痛間之相關性。本研究採橫斷式相關性研究設計，以北部四所教學醫院中 102 名曾接受胃部術後病患為對象，以健康控制重心信念量表、簡易疼痛因應策略量表之非藥物因應子量表進行結構性問卷訪談，資料以描述性統計、t 檢定、Pearson 相關分析。結果顯示(1)本研究個案多採取行為類的非藥物疼痛因應策略；(2)個案之健康控制重心信念以內在自我控制信念為主；(3)年齡愈小者、具有醫師控制信念之健康控制重心信念者，則愈會使用非藥物疼痛因應策略來因應其術後疼痛。本研究結果支持健康控制重心信念及人口學特性均是影響病患使用非藥物疼痛因應策略的因素，因此護理人員應同時評估該相關因素，以促進術後病患有效減輕疼痛及改善術後的生活品質。

Abstract

This study aimed (1) to explore the feasibility of using non-pharmacological coping strategies in response to postoperative pain: (2) to investigate attitudes towards the health locus of control among gastric surgical patients, and (3) to examine the correlation between their beliefs about health locus of control, demographic characteristics (age, sex, education), and their application of non-pharmacological coping strategies for postoperative pain. Cross-sectional correlation design and purposive sampling were applied to conduct structured questionnaire interviews using the Multidimensional Health Locus of Control - Form C (MHLC - Form C) and Brief Pain Coping Inventory - Non-Pharmacological Pain Coping (BPCI - NPC) with postoperative gastric patients at four teaching hospitals in northern Taiwan. Descriptive statistics, t-test, and Pearson correlation were used for data analysis. A

total of 102 patients were interviewed. The results showed that (1) the patients generally used non-pharmacological pain coping strategies of behavior: (2) the patients' health locus of control focus on beliefs about the internal health locus of control, and (3) younger patients, and those with positive beliefs about doctors health locus of control were more likely to use non-pharmacological pain coping strategies for postoperative pain relief. Analysis results "also support the view that health locus of control beliefs and demographic characteristics (age) influence the application of non-pharmacological pain coping strategies after surgery. Furthermore, allowing postoperative patients to use non-pharmacological pain coping strategies more effectively relieves surgical pain and increases their quality of life than not so allowing. Therefore, related factors must be evaluated during nursing care.