

认知行为干预对中青年腹膜透析患者疾病不确定感和应对方式的影响

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摘要:目的 探讨认知行为干预对中青年腹膜透析患者疾病不确定感和应对方式的影响。方法 选择 2014 年 3 月—2015 年 12 月收治于广西医科大学第一附属医院肾内科的 76 例病情稳定的中青年腹膜透析患者, 随机分为对照组和观察组。对照组接受常规护理, 观察组在此基础上进行每周 1 次、持续 12 周的认知行为干预。于干预前、干预第 4 周和第 12 周采用 Mishel 疾病不确定感量表和医学应对方式问卷对两组患者进行评估。结果 观察组患者疾病不确定感总分、屈服应对维度得分随干预时间的延长而降低, 面对应对维度得分随干预时间的延长而升高。干预第 4 周和第 12 周时, 观察组患者疾病不确定感总分、屈服应对维度得分均低于对照组 ($P < 0.05$); 干预第 12 周时, 观察组面对应对维度得分高于对照组 ($P < 0.05$)。结论 认知行为干预能降低中青年腹膜透析患者的疾病不确定感, 可减少患者消极应对、促进积极应对。

关键词: 终末期肾病; 腹膜透析; 认知行为干预; 疾病不确定感; 应对方式

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Effects of cognitive-behavioral therapy on illness uncertainty and coping style of young and middle-aged patients undergoing peritoneal dialysis (The First Affiliated Hospital of Guangxi Medical University, Nanning 530021, China)

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Abstract: Objective To evaluate the effects of cognitive-behavioral therapy on the illness uncertainty and coping style of young and middle-aged patients undergoing peritoneal dialysis. **Methods** A total of 76 young and middle-aged peritoneal dialysis patients in stable condition in The First Affiliated Hospital of Guangxi Medical University hospitalized from March 2014 to December 2015 were randomly divided into the control group and the intervention group (38 cases each). The control group received the routine nursing care. On the basis of routine nursing care, the intervention group received cognitive-behavioral intervention once a week for twelve weeks. The patients were investigated with Mishel's Uncertainty in Illness Scale-Adult and Medical Coping Modes Questionnaire at baseline, four weeks and twelve weeks during the intervention. **Results** Totally 73 patients went to the end of the study, including 37 patients in the intervention group and 36 in the control group. The scores of total illness uncertainty and resignation coping style decreased significantly after intervention, while the score of confrontation coping style increased significantly after intervention. At 4 weeks and 12 weeks during the intervention, the scores of total illness uncertainty and resignation coping style in the intervention group were lower than those in the control group ($P < 0.05$). At 12 weeks during the intervention,

the score of confrontation coping style was higher in the intervention group than that in the control group ($P < 0.05$). **Conclusion** Cognitive-behavioral therapy can reduce the illness uncertainty and negative coping style, promote positive coping style in young

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