Support of the working activity for hospitalized patients with muscular dystrophy

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Abstract

For the muscular dystrophy patients hospitalized in Tokushima National Hospital, we conducted a hearing investigation into working activity. The subjects were four patients who were making a homepage and three patients who had made a New Year's card and a business card / a poster in the past. As a result of the investigation, the work of the muscular dystrophy patients was found to be intended to obtain "a psychic income" as well as "a physical reward". The form of this future working activity is divided into three phases according to the state of the ADL, and will be carried out.

Keywords: muscular dystrophy, working activity, Support, psychic income, physical reward

Introduction

The Japanese muscular dystrophy association announced a plan for working research three years of the muscular dystrophy patients in 2008. Our hospital was chosen by the model institution. With the cooperation of a working support center, patients attempted to make a homepage suitable for Web accessibility. The duties involved in this activity gradually escalated, and the incomes increased, too. However, muscular dystrophy is a progressive disease. The disease that many patients have is Duchenne muscular dystrophy, and their arm function disappears after they reach the age of about 20. Therefore, the accomplishment of duties may become difficult due to a fall in the ADL in future. As a result, the will to work may decrease because income decreases. Therefore we investigated the will towards working activity of hospitalized patients with muscular dystrophy.

Methods

The subjects were four patients making a homepage and three patients who had made a New Year's card and a business card / a poster in the past. The subjects received a questionnaire during the hearing. This study obtained the approval of the Tokushima National Hospital Ethical Review Board.

Results

From the results of the investigation, the consciousness for the working of the patients who engaged in work included "a physical reward" and a desire to obtain an income. Furthermore, they expected "a psychic income" including "Social participation through the activity and the establishment of human relations" and "Confidence and self-conceit by the activity"

Discussion

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Maslow's hierarchy of needs is often portrayed in the shape of a pyramid, with the largest and most fundamental levels of needs the bottom, and the need at for self-actualization at the top.[1]The most fundamental and basic four layers of the pyramid contain what Maslow called "deficiency needs": esteem, friendship and love, security, and physical needs. With the exception of the most fundamental needs, if these "deficiency needs" are not met, the body gives no physical indication but the individual feels anxious and tense. Maslow's theory suggests that the most basic level of needs must be met before the individual will strongly desire the secondary or higher level needs. We think that the working activity of the patients in whom ADL gradually decreases must change depending on their physical state. We divide working activity into "knowledge acquisition", "activity enforcement", three phases of "a coordinate / the learning guidance", and it is intended that this will be supported. We can thereby shift by a role to a state and the hope of the patients progressively. If they can cultivate "knowledge" "experience" and and "confidence / self-conceit", they can take a role as a coordinator and provide learning guidance when ADL decreases.

Reference

1. Maslow AH. A Theory of Human Motivation, Psychological Review 1943; 50: 370-396.