

The worth doing of nursing in a muscular dystrophy ward

Hitomi Takenishi, R.N., Tomoko Abe, R.N., Sato Kitadani, R.N., Yuko Niu, R.N., Yumi Takeuchi, R.N., Mayumi Watanabe, R.N., Toshimi Aki, R.N.

Department of Nursing, Tokushima National Hospital, National Hospital Organization 1354 Shikiji, Kamojima, Yoshinogawa, Tokushima 776-8585 Japan.

Received 14 February 2013; received in received from 28 February 2013; accepted 13 March 2013

Abstract

We investigated how a nurse of the muscular dystrophy felt worth doing for duties. The subjects were 70 nurses who worked in a muscular dystrophy ward. The persons who felt muscular dystrophy nursing was worth doing represented 33% of the total and those who felt muscular dystrophy nursing was not worth doing represented 19%. There was no difference in the experience between the people who felt to be with the person who felt worth doing for line JIS nursing. Helping patients to express their thoughts, improving the health of the patients, and dealing with their problems was involved in a feeling of worth doing of the line JIS nursing.

Keywords : muscular dystrophy, muscular dystrophy ward, worth doing, JIS nursing

Introduction

The muscular dystrophy ward is where patients live who have been forced into long-term hospitalization by a fall in their ADL. The condition of the patients gradually progresses

The nurses working in a muscular dystrophy ward have little experience that the patients are discharged from well. The daily nursing service is aimed simply at supporting patients in their everyday life. There are many nurses who lose sight of the significance and the worth of muscular dystrophy nursing. We investigated what nurses felt was worth doing in muscular dystrophy nursing and what factors were related to this feeling that they were worth doing.

Materials and methods

The subjects were 70 nurses working in a Tokushima National Hospital muscular dystrophy ward. The subjects were classified into two groups: Group A, a group who felt muscular dystrophy nursing was

worth doing, and Group B, who felt muscular dystrophy nursing was not worth doing. A questionnaire survey was implemented containing 13 items regarding what methods nurses felt were worth using with the muscular dystrophy patients. Significant differences were examined using a Mann-Whitney test. The study was started after receiving the approval of the Tokushima National Hospital Ethical Review Board.

Results

Forty-eight people answered the questionnaire (effective response rate, 69%). Sixteen nurses felt muscular dystrophy nursing was worth doing. Nine nurses did not feel muscular dystrophy nursing was worth doing. In the two groups of A and B, the degree to which the 13 items were considered worth doing was compared. Nurses who experienced all 13 items as worth doing comprised 53% in a thing of the whole, 56% in Group A and 51% in Group B. No significant difference was seen between the groups. Table 1 shows nurses'

experience of each of the 13 items. A significant difference between two groups was found for the following two items: 1) Helping patients to express their thoughts ($p=0.012$), and 2) Improving the health of the patients, and dealing with their problems ($p=0.021$).

Discussion

Komura described how nurses in contact with muscular dystrophy patients are troubled with the following things: [1]. They cannot understand the concerns, problems, or the feelings of the patients. They do not know the best way to communicate with the patients. In the muscular dystrophy ward, there is much direct assistance and nursing including minute posture adjustment. We thought that nurses feeling that muscular dystrophy nursing was worth doing would experience closer relations with the patients. In the present study, we found that much contact with the patients did not lead to a feeling that muscular dystrophy nursing was worth doing. However, the significant

difference between the two groups found in 13 items included the two items: helping patients to express their thoughts, and improving the health of the patients and dealing with their problems. Conversely the nurses who experienced these two items may feel muscular dystrophy nursing is worth doing. It is interesting that these two items give mental and/or physical benefit to the patients. Actually, the worth doing of the nursing makes ends meet from the element except these, including several aspects of medical knowledge, nursing skills and specialized experiences. This study is the first step to offering good nursing for muscular dystrophy patients. Its recommendations should be adopted in future nursing education.

Reference

1. Komura, M. Hidden in the Depths of Silence : Interaction between Patients and Nurses : An Ethnographic Study Conducted at a Muscular Dystrophy Ward. (in Japanese) J Jpn Nurs 2011; 31: 3-11.

Table 1. Nurses' experience of each of the 13 items

Experience items	Group A (n=16)	Group B (n=9)	<i>p</i>
Receiving thanks from the patients / patients' families	3.9(0.68)	4.0(0.50)	0.977
Helping patients to express their thoughts	4.0(0.52)	3.1(0.78)	0.012*
Improving the health of the patients, and dealing with their problems	3.6(1.02)	3.1(0.78)	0.021*
Supporting inpatients with event participation	3.7(0.79)	3.7(0.71)	0.909
Good communication with the patients	3.7(0.95)	3.7(0.71)	0.932
Acceptance by the patients of nursing care	3.8(0.75)	2.9(1.05)	0.05
Good support for frequent nurse call	3.3(0.70)	3.2(0.67)	0.734
Helping patients improve their quality of life	3.4(0.73)	3.0(0.87)	0.269
Providing good support with minute posture adjustment and suit	3.8(0.68)	3.8(0.83)	0.734
Providing good support with problems with respirators	3.3(0.90)	3.1(1.45)	0.676
Helping respirator-using patients with going out / staying out	3.4(0.89)	2.9(1.27)	0.496
Providing good support for the discharge	2.4(0.96)	2.7(1.41)	0.515
Good measures for the change of the small condition without the suit	3.9(0.68)	3.3(1.00)	0.977

* $p<0.05$