

Trouble consultation with a person of SMON examination

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Abstract

We conducted a SMON examination and "trouble consultation" activity at the same time. Various kinds of experts coped with consultation for a variety of problems with the aging of the person of cover examination. This helps with reduction of the psychological burden on person of cover examination and helps grasp the psychosocial needs of the person of cover examination. This activity was very important for planning the improvement of future SMON examinations.

Introduction

In late years the SMON examination cover examination person tends aging.

They are troubled by various complications. It was thought that the psychological intervention for the problem was necessary so that patients with SMON could live a comfortable life. We worked on "trouble consultation" using a group medical examination in 2016. The team comprising a physician, a nurse, a physical therapist, a clinical psychologist and a social worker

conducted the consultation correspondence to the trouble of the person of cover examination.

Subjects and methods

The subjects included 24 men and women 70 - 98 years old that participated in Tokushima SMON group medical examination in 2016. We implemented a questionnaire before the examination by hearing at a receptionist on mail and the day of the examination. The questions were as

follows. If there is consultation by being in trouble in everyday life, write below it. We conducted a different questionnaire after the examination. The content was the following four items. 1) What is your impression of this examination? 2) Is there any that it was good to be consulted? 3) Do you have that you want you to improve by this conference?, 4) If you have any impressions of the examination or requests, write them down. We classified the questionnaire results into categories. By qualitative data analysis, we made content coding and a text. We conducted this study with the approval of the Ethical Review Board of the national hospital mechanism Tokushima National Hospital.

Results

Questionnaire results before examination. For the question "If you want to talk about what you are troubled with in everyday life, please write below", there was an answer from 11 of 24 people. The contents were classified in three categories, "care", "healthy" and "psychology". The code for the care was following four items; the "pedialgia" "system" "social resource" which "is hard to go out." The text was as follows, namely four items, "Inconvenience", "We are in trouble", "We want to know it", and "It is not understood". The code about the health was following five items, "Night insomnia", "Pain of the lower limbs", "An allergy, asthma", "Physical pain", and "Parkinson's disease" The text was the following three items; "We have a pain", "Anxiety", and "Tell me". The code for the psychology was as follows, namely five items; "SMON recollection", "Many problems", "Future way of life". "Lack of understanding of SMON", and "Patients association". The text was as follows, namely six items; "We want to talk", "Cause elucidation", "Sacrifice", "Anxiety", "We were in trouble", and "A limit". For the question, "When you have a talk and want to talk, not a sentence, please add ○ to the following columns", six of 11 respondents hoped for an interview. For the question, "When you do not want to talk, please add ○ to the following columns", but

nobody marked. For persons in their 70s, 86% of problems were associated with health and care and 14% of troubles were associated with psychology. In 60% of people in their 80s, there was a psychological tangle to SMON. Nineteen of 24 persons of examination participation replied to the questionnaire after the examination (response rate, 79%). About the impression of this conference, 22 people were satisfied. One case had "neither", none had "dissatisfaction," and one case had "unanswered". For the question "What is the merit of the consultation?" answers were classified into three categories, "psychology", "health" and "system". The codes in the psychology comprised two items, "listening closely" and "thought rearranging method". The texts comprised three items, "relief", "good" and "hope". The codes in the health comprised four items, "dizziness", "sleepless", "medical examination" and "physical exercise method". The texts comprised two items, "good" and "studied". In the system, cord was "Advice" and the text was "good". "What is the refinement of this conference?" We coded answers to the questionnaire results and then became a text with the trace. The codes comprised three items; "Time", "Individual difference" and "domestic worry". The texts comprised three items; "instruction", "symptom", and "do one's best". "If you have any impressions of the examination or requests, write them down". The answers were classified in the three following categories; "examination contents", "medical examination" and "psychology". The codes of examination contents comprised four items; "conference", "Thank you", "We want to come" and smooth". The text comprised two items; "It was good" and "Thanks". The code of the medical examination comprised three items; "polite", "Listening closely" and "polite medical examination". The text comprised three items; "Joy", "Satisfaction", and "hope for a medical examination". The code of the psychology comprised two items; "courtesies" and "worry". The text comprised three items; "pleasure", "joy" and "good".

Discussion

We conducted the conference of the trouble at the time of an SMON examination. We were able to conduct consultation smoothly by keeping the consultation content under control. We found that 86% of the persons undergoing examination at the 70-years-old level worried about health and care. 60% of the persons undergoing examination at the 80-years-old level had a psychological problem with SMON. The background that SMON became a social problem of the Showa era from the 20s through the 30s may influence it psychologically [1]. When we see it according to category, in the category "care," there was a trouble for a system and social resources and going out. In the category "health," physical pain was the main problem. The nurse, the physical therapist and the social worker coped about a "health" "care". In the answer to the questionnaire after the examination, the following impressions were obtained; "It was good" and "I was able to study". About "psychology," psychological expression about SMON was characteristic. There were the following effects in the correspondence of clinical psychologists; "feel peaceful", "it was good" and "hope". When we compare the answers to the questionnaires before and after the examination, keywords changed to positive things after the examination. Also, it was recognized that an SMON examination became a place of the transaction between the patients.

References

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