

以健康信念模式分析臺北市老年婦女對應力性尿失禁執行 骨盆底肌肉運動之預防行為

Analysis by Health Belief Model on Stress Incontinence Preventive Behavior of Pelvic Floor Exercises among Elderly Women in Taipei

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摘要

應力性尿失禁為最常見尿失禁類型，雖然應力性尿失禁沒有致命危險，但除了會造成身體不舒服外，會產生羞恥感，抑鬱、身體心像改變、及社交隔離等，老年婦女由於老化的改變，為應力性尿失禁的高流行群；另外，骨盆底肌肉運動不只是應力性尿失禁的預防方法，也是應力性尿失禁最經濟又作侵入性的治療方式；故本研究在瞭解臺北市老年婦女對應力性尿失禁的認知情形及對骨盆底肌肉運動的執行態度，並以健康信念模式中的個體認知、修正因素，及行動可能性進行分析，同時探討老年婦女執行骨盆底肌肉運動的影響因素，亦期研究結果能做為發展婦女應力性尿失禁防治及健康促進計劃之參考。本研究收案對象依台北市戶政事務所提供的是 65 歲以上婦女名冊選取，採問卷調查法，資料分析採單因子變異數及逐步迴歸等統計方法，研究結果發現：台北市老年婦女對應力性尿失禁的認識程度低（滿分 8 分，平均 2.72 分）。其中 50.8%個案有不同程度的應力性尿失禁，48.2%同意應力性尿失禁影響其活品質；44.6%覺得自北有應力性尿失禁應就醫治療，36.8%個案覺得應執行骨盆底肌肉收縮運動。對應力性尿失禁的罹患性嚴重性、利益性及障礙性認知對執行盆底肌肉收縮運動可能性具 50%預測力，因此對應力性尿失禁之防治可以運用健康信念模式推擴骨盆底肌肉收縮運動。

Abstract

Stress incontinence is the most common urinary incontinence disease. Although stress incontinence has no lethal risk, it causes not only physical discomfort but also feelings of shame, depression, body image change, and social isolation. Elderly women, because of changes aging due to have high prevalence of stress incontinence. The pelvic floor muscle exercise (Kegel's exercise) is not only a way to prevent stress incontinence but also the most economic and non-invasive way to treat stress incontinence. The present

study focused on elderly women in Taipei. A structured questionnaire was used to collect data. The study tried to explore knowledge of stress incontinence and performance of pelvic floor muscle exercise on the elderly women. We analyzed the factors of individual perceptions, modifying factors and the likelihood of action by health belief model. We also tried to find out the factors that effected elderly women in performing pelvic floor muscle exercise. The findings of this study refer to developing an effective plan of stress incontinence prevention and health promotion for elderly women. The major findings of this study included: The elderly women had low level knowledge of stress incontinence. 50.8% of the subjects had different degrees of stress incontinence. 48.2%of the subjects agreed that stress incontinence had influenced quality of life. 44.6%of the subjects thought someone with stress incontinence and should go to a doctor. 36.8% of the subjects agreed that it is necessary for them to perform pelvic floor muscle exercise. The health beliefs of perceived susceptibility, perceived severity, perceived benefits of action, and perceived barriers of action were highly explicable, with a 50% acceptable range to stress incontinence preventive behavior. In general, health belief model could be using to propagate pelvic floor muscle exercise for prevention and treatment of stress incontinence.