

THESIS TITLE : EFFECTS OF AN INFORMATION GIVING PROGRAM ABOUT  
STIMULI ON LEVEL OF KNOWLEDGE AND ADAPTATION OF POST  
CARDIAC VALVULAR REPLACEMENT PATIENTS

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### ABSTRACT

This study was a quasi-experimental research study. The purpose was to determine the effects of an information giving program about stimuli on the level of knowledge and the adaptation of post cardiac-valvular-replacement patients. It also examined the relationships between the level of knowledge and adaptation after the information giving program about stimuli was conducted. The conceptual framework for this study was constructed based on the Roy's Adaptation model and Knowles's principle of Adult Learning.

The sample of 12 post cardiac-valvular-replacement patients was drawn by the selected criteria from a population of patients admitted in Srinagarind Hospital, Khon Kaen University during the period between November 1993 to May 1994. The patients were equally divided into 2 groups : the experimental group and the controlled group, with six pairs of similar cases in terms of diagnosis and pre operative functional class, the position of cardiac valvular replacement and the type of cardiac valve prosthesis. The experimental group received an information giving program about stimuli and the control group did not receive the information giving program about stimuli.

The information giving program about stimuli was constructed based on Roy's Adaptation model, giving information about stimuli or influencing factor of behaviors that most of the post-cardiac-valvular-replacement patients was confronted, which was developed in a form of taped messages and flip charts. The information giving program about stimuli was divided into 5 sessions. It was provided to the patients in the morning and evening for a period of 3 days.

The research instruments were included a demographic data questionnaire, a knowledge test about stimuli that have some effects on adaptation of post cardiac-valvular-replacement and an adaptation scale of post cardiac-valvular-replacement patients which was adapted from the adaptation scale of post cardiac-valvular-replacement patients constructed by Ploenpit Loahaviriyakamon (2531), the adaptation scale of valvular heart disease patients constructed by Anchalee Thitapura (2536), the adaptation scale of myocardial infarction patients constructed by Kultida Panichakul (2536) and the adaptation scale in self-concept mode of continuous ambulatory peritoneal dialysis patients constructed by Phachoen Shokebumroong (2535). The Kuder-Richardson score was 0.77 and Cronbach's alpha

coefficient reliability score was 0.89 respectively.

The knowledge test was conducted with both groups on the day of discharge from hospital. The adaptation scale measurement of post cardiac-valvular-replacement patients was carried out three months after operation.

The statistical procedures employed in the study were Mann-Whitney U test and the Spearman rank correlation coefficient.

The data revealed by this study indicated that:

1. The patients who received the information giving program about stimuli had significantly higher level of knowledge than the patients who did not receive the information giving program about stimuli at the 0.001 level.
2. The patients who received the information giving program about stimuli had significantly higher adaptation than the patients who did not receive the information giving program about stimuli at the 0.01 level.
3. The level of knowledge and total adaptation of cardiac-valvular-replacement patients after receiving the information giving program about stimuli indicated significantly positive correlation at the 0.01 level. However, when considering each mode it was found that the level of knowledge and adaptation in a self-concept mode, role-function mode and interdependence mode of cardiac-valvular-replacement patients after receiving the information giving program about stimuli indicated significantly positive correlation at the 0.01, 0.05 and 0.05 levels. But the level of knowledge and adaptation in a physiological mode of cardiac-valvular-replacement patients indicated no significant correlation.