

3936740 RAAN/M : MAJOR : ADULT NURSING ;M.N.S. (ADULT NURSING)

KEY WORDS : GASTROINTESTINAL PROBLEMS / NUTRITIONAL PRACTICES /
NUTRITIONAL STATUS / CARCINOMA OF GASTROINTESTINAL
TRACT / AFTER SURGERY

SIRIKUL KARUNCHARERNPANIT : GASTROINTESTINAL PROBLEMS,
NUTRITIONAL PRACTICES AND NUTRITIONAL STATUS OF PATIENTS WITH
CARCINOMA OF GASTROINTESTINAL TRACT AFTER SURGERY. THESIS ADVISORS :
PANWADEE PUTWATANA, D.Sc.(NUTRITION), YOUWALUK LAUHACHINDA, M.Ed.
103 p. ISBN 974-662-213-7

The purpose of this descriptive research was to study on gastrointestinal problems, nutritional practices, nutritional status and its relationships among postoperative patients with carcinoma of gastrointestinal tract. The purposive samples consisted of 62 patients with carcinoma of gastrointestinal tract 1 to 3 months after surgery, who came to follow-up at the medical and surgical out-patient department of Ramathibodi hospital, Chulalongkorn hospital, Ratchavidi hospital and the National Cancer Institute during February to July, 1998. Patients' demographic data, gastrointestinal problems and nutritional practices were interviewed by the researcher. Nutritional status were assessed by Body Mass Index and Mid-upper Arm Muscle Circumference.

The result of this study revealed that most of the patients(80.65%) had at least one gastrointestinal problem. Early satiety (56.45%) was the most common problem whereas anastomosis leakage was the least (1.61%) . Most patients were good in nutritional practices. The incidence of protein-energy malnutrition measured by Body Mass Index and Mid-upper Arm Muscle Circumference was 30.64% and 72.58% respectively. Early Satiety had significantly relationship with nutritional status as assessed by Body Mass Index ($p<0.01$) and Mid-upper Arm Muscle Circumference($p<0.05$) . Nausea and vomiting had significantly relationship with nutritional status ($p<0.05$) indicated by Body Mass Index. The result of this study supports the importance of gastrointestinal problem assessment in relation to protein-energy malnutrition of gastrointestinal cancer patient during 1-3 months after surgery. It can also be used as the direction of nursing intervention and future research.