

Thesis Title	Quality of Life of Renal Transplant Patients Maharaj Nakorn Chiang Mai Hospital	
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### Abstract

The purpose of this descriptive study was to investigate the quality of life of the renal transplant patients with regards to life satisfaction, self-concept, health and functioning, and socioeconomic factors. Its' aim was also to compare the quality of life between males and females , patients with different education and income level. The study population consisted of 60 renal transplant patients who attended follow up appointments at the renal transplantation clinic of Maharaj Nakorn Chiang Mai Hospital during the period December 1996 to February 1997. The subjects were selected by purposive criteria.

The research instruments used for data collection composed of the demographic data recording form and the quality of life questionnaire developed by Suthatip Upalabut (1994) which was based on Zhan's concept (1992). The content validity, confirmed by a panel of experts using the interrater agreement method, was 0.89 and content validity index method was 0.88. The reliability of the quality of life questionnaire obtained by Cronbach's alpha coefficient was 0.84, 0.89, 0.75, 0.80 and 0.92 (for life satisfaction, self-concept, health and functioning, socioeconomic factors and total reliability respectively). Descriptive statistics such as frequency, percentage, mean, and standard deviation, were adopted for data analysis.

The results of this study indicated that:

1. The total quality of life's mean score was at a good level as were the scores for each subcategory.

2. The women's mean score in total quality of life, life satisfaction and self-concept were slightly higher than those of men.

3. The patients who graduated above undergraduate level had higher mean scores in total quality of life, health and functioning, and socioeconomic factors than those who graduated from college, high school, and primary school level.

4. The patients who had an income of more than 30,000 Bahts per month were shown to have higher mean scores in total quality of life, health and functioning, and socioeconomic factors than those who had a lower income.