

Thesis Title Social Support, Uncertainty in Illness and
 Adaptation in Post Myocardial Infarction Patients
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Abstract

The purpose of this descriptive research was twofold. First, to examine the relationships among social support, uncertainty in illness, educational level, severity of illness and adaptation in post myocardial infarction patients. Second, to identify predictive variables of adaptation, based on theoretical framework derived from Mishel (1988, 1990) uncertainty in illness theory. Study subjects recruited by purpose sampling, consisting of 100 post myocardial infarction patients receiving medical therapy at medical clinic of Ramathibodi hospital during August, 1992 to December, 1992. Adaptation in illness was measured by the questionnaire developed by Derogatis (1986). Uncertainty in illness was measured by the scale developed by Mishel (1990). The perceived social support was measured by the questionnaire developed by Hanucharurnkul (1988). A coronary prognostic index developed by Peel, et al. (1962) was used to grading the severity of infarction during the last hospital stay.

Results of the study indicated that unpredictability of the course of disease and prognosis was the highest uncertainty in illness for this group of patients. For social support, the patients perceived emotional and tangible support from the family members the highest, and perceived informational support from the health care providers the highest. As to adaptation, the patients reported the highest adaptation in somatic health. Qualitative data from this group revealed that to avoid stress in their lives many young patients have changed their demanding jobs, while the elders did not return to work. Many patients had also decreased in the frequency of sexual activities.

For the relationship among variables, it was found that uncertainty in illness was moderately correlated with adaptation in negative direction ($r = -.40, p < .001$), slightly correlated with educational level in negative direction ($r = -.24, p < .05$), and severity of illness in positive direction ($r = .19, p < .05$). But no relationship was found between social support and uncertainty or adaptation. Significant predictors of adaptation in the stepwise multiple regression analysis were uncertainty in illness and educational level, these two variables accounted for 26% of variance in adaptation. Path analysis showed that uncertainty in illness was directly effect adaptation. Educational level had both direct effect on adaptation and indirect effect through uncertainty.

This study support the validity of conceptualization of uncertainty and adaptation as proposed by Mishel. Since uncertainty in illness was related to adaptation, thus providing nursing intervention to reduce uncertainty will facilitate adaptation among patients with post myocardial infarction.