

Thesis Title Factors Associated with Delay in Seeking Treatment in
Response to Symptoms of Patients with
Acute Ischemic Syndromes

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Abstract

Acute myocardial infarction is the leading cause of death in Thailand. The sooner the treatment can be initiated after onset of symptoms, the better the outcome will be. Unfortunately many patients delay seeking treatment. Helping the patients receive maximum benefit from treatment is important. Nurses should understand the factors associated with delay in seeking treatment in order to reduce the patients' delay.

The purposes of this descriptive research were to examine the time from onset of symptoms to initiation of specific treatment and evaluate the difference in the factors between early arrival group and late arrival group. The purposive samples consisted of 100 patients with definite acute myocardial infarction and unstable angina. The patients were admitted to coronary care unit or general medical wards of Ramathibodi Hospital, coronary care unit of Pramongkutklao Hospital, Bangkok General Hospital and Chulalongkorn Hospital between October 1996, and April 1997. The data were collected by questionnaire and recording form consisting of demographic data, type A personality, the risk factors of ischemic heart disease, knowledge of ischemic heart disease, past history, present illness, decision making and performance of activities before going to the hospital, time from onset of symptoms to initiation of specific treatment, diagnosis, treatment, complications and hospital day. Data were

obtained both by interviewing and self-administered questionnaire from the patients. Data were analyzed by using statistical software SPSS for Windows (Release 6.0).

Results of the study indicated that the median time from onset of symptoms to patients' decision to go to the hospital was 2 hours, transportation time was 37 minutes, time from onset of symptoms to hospital arrival was 3 hours and 47 minutes, time from emergency room(ER) arrival to coronary care unit (CCU) or general medical ward arrival was 1 hour and 40 minutes, time from hospital arrival to initiation of specific treatment at ER was 29 minutes, time from hospital arrival to initiation of specific treatment at CCU or ward was 2 hours and 46 minutes, time from onset of symptoms to initiation of specific treatment at ER was 4 hours and 30 minutes and time from onset of symptoms to initiation of specific treatment at CCU or ward was 7 hours and 25 minutes.

Factors associated with delay in seeking treatment were : 1) female, 2) previous history of angina pectoris, 3) being diagnosis of unstable angina, 4) perception of delay in seeking treatment, 5) being alone when symptoms were present and 6) the performance of some non-therapeutic activities at the first time of symptoms onset. Results of the study increase our understanding the patient delay, hospital delay and factors associated with delay in seeking treatment. This knowledge suggest what the essential components of appropriate intervention programs should be developed to help the patients to receive the maximum benefit from advanced treatment.