

THE RELATIONSHIP BETWEEN FEV1, DYSPNEA EXPERIENCE, SOCIAL SUPPORT
AND QUALITY OF LIFE IN PATIENTS WITH CHRONIC OBSTRUCTION
PULMONARY DISEASE

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ABSTRACT

Chronic obstructive pulmonary disease (COPD) is one of the four leading causes of death which has created a significant burden for the Vietnamese healthcare system. A research on the COPD needed to contribute to the preventive measures, and timely treatment to reduce mortality, severity of disability, high cost of treatment and improve the quality of life (QOL) for COPD patients. The purpose of this study was to identify relationships between FEV1, dyspnea experience, social support and quality of life in patients with COPD. Quality of life was framework this study. This was a descriptive correlational research conducted among 115 patients including males and females aged of 18 years or above who got COPD diagnosis at Thanh Hoa General Hospital in Thanh Hoa City. Data was collected using the patients' hospital record and interview with the patients. Spearman's rho was used to test the relationship among all variables. The results revealed that majority of the participants were female (80%) with an average age of 60.9 years ($SD \pm 7.5$ years) attending clinic at the hospital with dyspnea, cough and sputum. Most of them were current smokes and ex-smokes. Dyspnea-12 and FEV1 were significant correlated with CCQ total score with $r_s = 0.719$, $p < 0.01$ and $r_s = -0.474$, $p < 0.01$, respectively. Social support from significant others score was significant negative correlated with CCQ total ($r_s = -0.0292$, $p < 0.01$). It was also significant negative correlated with CCQ symptom and CCQ function respectively ($r_s = -0.263, -0.252$ $p < 0.01$) The researcher suggests that nurses should promote the QOL by developing intervention program to prevent dyspnea and raising awareness of social support.

KEY WORDS: COPD / QUALITY OF LIFE/ SOCIAL SUPPORT, DYSPNEA-12, FEV1.