

November 7-9, 2018 Tokyo, Japan

Investigate Related Factors and the Quality of Sleep, Degree of Demoralization, Resilience of Cancer Patients

Te-Fen Lee^{1*}, Shih-Yun Chen², Yi-Chieh Tseng², Wen-Hsin Tsai², Mei-Hsiu Lee², Wei-Ju Chen² and **Shu-Hua Tsao²** ¹Ching Kuo Institute of Management and Health, Taiwan ²Cardinal Tien Hospital, Taiwan

Background: Cancer patients may have poor sleep. High degree of demoralization is more susceptible to suicidal attempt, and resilience is positive power for patient's adjustment. This study aim to understand the status, correlation and influencing factors of sleep quality, the degree of demoralization and resilience of cancer patients.

Method: The study is a cross-sectional research, including 104 samples. Data were collected from oncology wards in Taiwan since November 19, 2016 to December 12, 2016 when obtained the project approval number of [CTH-105-2-5-020]. Used descriptive statistics and inferential statistics.

Result:

- 1. Average age is 57.3 of samples, most of them are unemployed, the average month of cancer is 35.3 months, social support score from family, friends and medical team is more than 85 points.
- 2. The sleep quality average score is 8.07 ± 2.92 points, indicating poor sleep quality, 35.6% of the subjects are not able to fall asleep within 30 minutes; 40.4% of them requires take medicines for sleep. The demoralization average score was 49.6 points, indicating that cancer patients generally have demoralization. The average score of resilience was 92.07 ± 13.20 , showing good resilience. Sleep quality is positively correlated with demoralization and negatively correlated with resilience; demoralization is negatively correlated with the resilience.
- 3. Different characteristics of the samples were not affect their sleep quality, degree of demoralization and resilience. But Sleep quality negatively correlated with the support of family/medical team, and resilience was positive correlation with the support of friends.

Conclusion: Suggested cancer education programs should include assessment and care skills about sleep quality, demoralization and resilience, and offer psychosocial therapy for demoralization patients. Clinical care also take advantage of social support from significant others to strengthen the positive power.

Biography:

Te-Fen Lee is an associate professor in nursing department of Ching Kuo Institute of Management and Health, Taiwan. She have be a nurse on burn centre and ICU. Her major is in Nursing and development Psychology.