Purpose: This quasi-experimental aimed to examine the effect of respiratory rehabilitation program on perceived self-efficacy and dyspnea by using Bandura’s as the conceptual framework.

Methods: Twenty-eight patients who were diagnosed with non-small cell lung cancer stage four and visited to oncology outpatient department in a supra tertiary hospital with dyspnea were divided into the experimental and control group with fourteen patients each. The experimental group received a respiratory rehabilitation program, which comprised dyspnea educating, pursed-lip breathing and abdominal or diaphragmatic breathing exercise, effective cough training, using hand-held fan and respiratory strengthening muscle training and follow ups by phone in week two and week six, perceived self-efficacy and dyspnea was reassessment in week four and week eight. The program was carried out for eight weeks and evaluated at week four and week eight. Data were collected through the Personal Data Questionnaire, Edmonton Symptom Assessment Scale (ESAS), Perceived Self-Efficacy to Practice Respiratory Rehabilitation Questionnaire and dyspnea was determined by The Cancer Dyspnea Scale (CDS). Data were analyzed using descriptive statistics, one-factor repeated measure ANOVA and compared mean within group and between group.

Results: The result show revealed that almost all (53.6%) of the sample were men and the mean age was 69.40 years, married 71.4%, Second hand Smoker 64.3%, half of sample size was diagnosed for advance stage at least one years, 71.4% got treatment with chemotherapy, 75% have normal performance status (ECOG = 0), most of them have dyspnea experience (67.9%) and they used bed rest (85.7%) for relieved dyspnea. There were no differences in age between the experimental and control groups. There was a significant difference in perceived self-efficacy to practice respiratory rehabilitation and severity of dyspnea between experimental group and the control group.

Conclusion: The study finding suggest that the respiratory rehabilitation program can increase perceived self-efficacy and reduce dyspnea severity in patients with lung cancer, program should have patient’s involvement in respiratory rehabilitation behavior with supporting care by family. Nurse should promote self-efficacy and work as a partnership in continuum of care.
Abstract Summary:
This quasi-experimental aimed to examine the effect of respiratory rehabilitation program on perceived self-efficacy and dyspnea by using Bandura’s as the conceptual framework. The study finding suggest that the respiratory rehabilitation program can increase perceived self-efficacy and reduce dyspnea severity in patients with lung cancer.

References:

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