



# Oral Presentation

*Room 4*



# A MIXED METHODS CONVERGENT PARALLEL STUDY OF THE FACTORS AFFECTING COLONOSCOPY SCREENING BEHAVIOR AMONG FIRST-DEGREE RELATIVES OF PATIENTS WITH COLORECTAL CANCER

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## Abstract

**Background:** First-degree relatives (FDRs) can prevent colorectal cancer (CRC) by colonoscopy screening. Understanding factors affecting FDRs' colonoscopy behavior is essential for developing an intervention plan.

**Objective:** To explore, within the Chinese context, the factors affecting FDRs' colonoscopy screening behavior, including fatalism, health beliefs, family risk communication, and health professionals' risk communication.

**Methodology:** A convergent parallel mixed methods design was used to complete a two-phase study, which employed convenience sampling to recruit a total of 213 FDRs of patients with CRC in the quantitative phase and recruit 21 FDRs and 17 patients with CRC for semi-structured interviews from two tertiary grade hospitals in southern China. A series of univariate and multivariate analyses were used to analyze the quantitative data, while the qualitative data were analyzed using thematic analysis. Results from both phases were triangulated to understand the factors better.

**Results:** The rate of FDRs' colonoscopy screening behavior was 42.3%, and its factors included perceived susceptibility, perceived barrier, family risk communication frequency, and health professionals' risk communication behavior.

**Conclusion and implications:** Inform FDRs that they need to undergo screening, especially colonoscopy screening, instead of other tests. Emphasizing FDRs' risk of developing CRC during family risk communication, rather than solely recommending colonoscopy screening, could enhance the effectiveness of family risk communication. Health professionals should use modern technology to improve risk communication with FDRs and dispel barriers hindering family risk communication.

**Keywords:** Colorectal cancer, First-degree relatives, Fatalism, Health belief model, Family risk communication

# EFFECT OF PROPHYLACTIC SWALLOWING INTERVENTIONS ON SWALLOWING OUTCOMES, FEEDING STATUS AND QUALITY OF LIFE IN HEAD AND NECK CANCER PATIENTS UNDERGOING RADIOTHERAPY: A SYSTEMATIC REVIEW AND META-ANALYSIS

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## Abstract

**Introduction:** Patients with head and neck cancer (HNC) who receive radiotherapy typically experience severe dysphagia, disrupting patients' swallowing process and quality of life (QOL). Prophylactic swallowing interventions may ensure swallowing efficiency and airway safety, but the results of current research are inconsistent. Thus, this systematic review and meta-analysis aims to clarify the effectiveness of prophylactic swallowing interventions on swallowing outcomes (swallowing function, mouth opening, risk of aspiration and performance status), feeding status (oral intake and tube feeding) and QOL in patients with HNC.

**Methodology:** A literature search was conducted in nine databases from inception to March 2024. Two researchers independently extracted the data and assessed the risk of bias and quality of evidence by using the Cochrane Risk of Bias tool version 2.0 and the GRADE system. Meta-analysis was performed by using Review Manager, Version 5.4.

**Results:** A total of 8201 records were retrieved from nine databases and reference lists. Finally, 15 random controlled trials (RCT) (1151 participants) were identified and included in this review. Prophylactic swallowing interventions were mostly swallowing exercises conducted prior to or at the beginning of radiotherapy. And they significantly improved patients' swallowing function (Standard Mean Difference [SMD] = 0.54, 95% CI [0.08, 1.00],  $p = 0.02$ ), mouth opening (MD = 3.52, 95%CI [1.57, 5.47],  $p < 0.001$ ), performance status (SMD = 0.29, 95% CI [0.02, 0.57],  $p = 0.03$ ) and some domains of QOL (swallowing related QOL: MD = 11.45, 95%CI [3.06, 19.83],  $p = 0.007$ ; global QOL: MD = 5.27, 95%CI [1.83, 8.71],  $p = 0.003$ ; head and neck QOL (social eating domain): MD = -10.07, 95%CI [-16.82, -3.33],  $p = 0.003$ ) immediately after intervention, and oral intake (MD = 1.10, 95%CI [0.46, 1.74],  $p < 0.001$ ) at six months follow-up, and decreased the risk of aspiration (RR = 0.63, 95%CI [0.44, 0.90],  $p = 0.01$ ) immediately after intervention. Whereas no significant effects on oral intake and tube feeding immediately after intervention.

**Conclusions:** Prophylactic swallowing interventions may have some positive effects on swallowing outcomes and QOL immediately after intervention, and oral intake at six months follow-up. Thus, it could be a promising swallowing rehabilitation option for HNC patients undergoing radiotherapy.

**Keywords:** Head and neck cancer, Prophylactic swallowing interventions, Dysphagia, Meta-analysis



## FACTORS OF HEALTH-RELATED QUALITY OF LIFE AMONG PATIENTS UNDERGOING ANTERIOR CERVICAL DISCECTOMY AND FUSION

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### Abstract

**Background:** Anterior cervical discectomy and fusion (ACDF) is one of the standard surgeries when conservative measures fail. Complications and persistent symptoms can impact patients' health-related quality of life (HRQoL).

**Objective (s):** This descriptive study examined HRQoL and related factors among patients who had undergone ACDF.

**Methodology:** A convenient sampling was used to recruit 308 patients who had undergone ACDF from a medical university in China. Data were collected by using online-based questionnaires. The Short Form Health Survey (SF-36) Version 1 was used to collect data for HRQoL. The instruments used to collect data of related factors consisted of demographic data form, the Eating Assessment Tool-10, the Neck Disability Index, the Short Form Geriatric Depression Scale, and the Multidimensional Scale of Perceived Social Support. Informed consent was acquired through the survey platform. Questionnaires were distributed via QR codes for participants to complete on their preferred devices. Data were analyzed using descriptive statistics and Pearson's Correlation.

**Result(s):** The overall HRQoL was at a moderate level. The 41 to 50 age group and quitting smoking had a significant positive relationship with the physical component of the HRQoL ( $p < .05$ ). In contrast, female gender, neck/arm pain, dysphagia, depression, and remaining disability showed a significant negative relationship with the physical component for the HRQoL ( $p < .05$ ). The 41 to 50 age group and social support had a significant positive relationship with the mental component on the HRQoL ( $p < .05$ ). In contrast, female gender, dysphagia, depression, and remaining disability showed a significant negative relationship with the mental component of the HRQoL ( $p < .05$ ).

**Conclusion and Recommendations:** It indicates that age, smoking status, gender, social support, neck/arm pain, dysphagia, depression, and remaining disability can impact both physical and mental components in HRQoL. It is recommended that nurses focus on smoking status, neck/arm pain, dysphagia, depression, and remaining disability in the physical and mental components of the ACDF patients, leading to improving HRQoL, especially among female patients. Further research, such as intervention studies aimed at enhancing health-related quality of life, could be conducted to confirm the impact of these interventions.

**Keywords:** Anterior cervical discectomy and fusion (ACDF), Health-related quality of life (HRQoL)



## FACTORS RELATED TO SELF-MANAGEMENT BEHAVIORS OF PATIENTS WITH CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNDER THE NEXT NORMAL TREND

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### Abstract

**Background:** The COVID-19 pandemic had impact to health service and self-management behaviors of patients with COPD. To change their lifestyle under the next normal trend, patients with COPD are expected to change their attitudes and behaviors.

**Purpose:** The purposes of this correlational research were to study self-management behaviors and factors related to self-management behaviors of patients with COPD under the next normal trend.

**Methodology:** The purposive sample consisted of 130 patients with COPD who received treatment at Lomkao Crown Prince Hospital, Thailand. Five questionnaires were used to collect data consisting of 1) self-management behavior, 2) knowledge, 3) self-efficacy, 4) social support, and 5) anxiety. Data were collected from May to August 2023. Data were analyzed by using descriptive statistics, and the Pearson product moment correlation coefficient.

**Results:** The results revealed that self-management behaviors among these patient sample was at a moderate level score ( $\bar{x} = 3.10$ , S.D. = 0.49). There was positive relationship between COPD self-management, and Age ( $r = .572$ ,  $p < .05$ ), followed by Knowledge ( $r = .540$ ,  $p < .05$ ), Self-efficacy ( $r = .475$ ,  $p < .05$ ), Social support ( $r = .408$ ,  $p < .05$ ), Severity of disease ( $r = .322$ ,  $p < .05$ ), and Comorbidity ( $r = .181$ ,  $p < .05$ ). There was negative relationship between COPD self-management and Anxiety ( $r = -.359$ ,  $p < .05$ ).

**Conclusion:** Finally, COVID-19 pandemic imposed changes in patients with COPD, emphasizing tele-health is present to assist in treatment and health promotion. Nurses should provide self-management education, promote self-efficacy, social support, and reducing factors of anxiety by apply use of tele-nursing, such as using Line application or telephone for promote self-management behavior of COPD patient under the next normal trend.

**Keywords:** Self-management behaviors, Next Normal Trend, Patients with chronic obstructive pulmonary disease



## NURSE PERCEPTION OF EXPERIENCE IN PROVIDING SPIRITUAL CARE IN THE CARDIOVASCULAR UNIT: A PHENOMENOLOGY STUDY

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### Abstract

**Background:** One of the causal factors is lack of spiritual support available for patients to make them stronger in facing their illness trajectory. Based on that situation, nurses who provide nursing care are urgently required to assess the patient's spiritual needs so a correct nursing intervention can be given to the patient. Unfortunately, up to present, few instruments are available to specifically focus on patient's spiritual needs.

**Objective (s):** The aim of this study was to identify the perception of experience of nurses in providing spiritual nursing care to patients in cardiovascular wards as a foundation to develop a specific spiritual nursing care assessment tool.

**Methodology:** A qualitative research using phenomenology approach was utilized to explain the nature of nurses' experience in providing spiritual care to patients. A sample of six nurses participated in the study. Data collection was conducted through in-depth interviews to nurses used thematic analysis.

**Result(s):** The findings identified that there are five themes, namely (1) the meaning of spiritual care to nurses; (2) the current belief of nurses in providing spiritual care; (3) barriers in conducting spiritual nursing care; (4) expected solution to eliminate the barriers; (5) the efforts to improve spiritual nursing care. The experience of nurses demonstrated that no instruments is available to assess spiritual aspects, lack of understanding of nurses, and limited supporting facility are perceived as important barriers for nurses to provide spiritual nursing care to patients.

**Conclusion and Implications:** To ensure the effective implementation of spiritual nursing care, it is important to develop various instruments for each step of the nursing process, starting with the assessment of spiritual care. These assessment instruments should be designed to gather comprehensive information about the patients' spiritual needs, beliefs, values, and preferences.

**Keywords:** phenomenology study, spiritual care, Spiritual Nursing, spiritual assessment



## PREDICTING FACTORS OF CANCER WORRY AMONG CHINESE POPULATION

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### Abstract

**Background:** Cancer worry is widespread and can affect people's healthcare behaviors, but it is influenced by various factors. Improving cancer health literacy can help people better understand cancer risks, thereby reducing unnecessary cancer worry.

**Objectives:** We explored the level and predictors of cancer worry in the Chinese adult population without a personal history of cancer and identified its relationship with cancer risk perception and cancer health literacy.

**Methodology:** This cross-sectional study used a convenient sampling method to investigate 701 Chinese adults without cancer with self-designed general information questionnaire, Cancer Worry Scale and other scales. Statistical analysis was performed using SPSS software.

**Results:** The median cancer worry score was 9.00, indicating a high overall concentration trend of cancer worry in Chinese. 47% of participants reported experiencing high levels of cancer worry. Positive correlations were observed between cancer worry and both cancer risk perception and cancer health literacy. Other influencing factors of cancer worry were age, number of existing disease diagnoses, duration of care for cancer relatives, frequency of actively searching for cancer information, coping with cancer confidently, fatalistic view of cancer, accounting for 40.3% of the variance.

**Conclusion:** Cancer worry is widespread among Chinese, affecting their health care behavior and increasing their psychosocial distress. Health care professionals should fully consider the relevant influencing factors and maintain a moderate level of cancer worry by improving the public's cancer health literacy and perception ability, so as to promote people to adopt cancer prevention-related health care measures and healthy lifestyles.

**Keywords:** cancer worry, cancer risk perception, cancer health literacy, predictors of cancer worry



## SYSTEMATIC LITERATURE REVIEW ON SELF-MANAGEMENT AND EXERCISE PROGRAMME FOR OLDER ADULTS LIVING WITH CHRONIC KNEE PAIN

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### Abstract

**Background:** Chronic knee pain is a significant health problem that greatly impacts the quality of life among older adults, and its prevalence continues to worsen annually. While various intervention programmes have been designed for chronic knee pain patients, only a few have evaluated the effectiveness of programmes supported by technology.

**Objective:** The aim of this review is to identify current evidence regarding technology-based intervention programmes among older adults living with chronic knee pain.

**Methods:** Keywords and subject headings were technology-based, intervention programme, chronic knee pain, and older adults. Between July and October 2023, a search was conducted on PubMed, SCOPUS, EDS, ProQuest, Cochrane Library, Google Scholar, and 'grey literature'. Papers were screened by four reviewers according to predetermined inclusion and exclusion criteria, and reference lists were reviewed for additional paper inclusion.

**Results:** Four experimental randomized controlled trials with various randomisation procedures obtained. Two studies utilized web-based, one mobile apps, and one telerehabilitation. Furthermore, two trials did not blind participants, investigators, or outcome analysers to the intervention, despite differences in treatment between groups. The findings suggested that all self-management and exercise interventions appeared to be beneficial to older adults living with chronic knee pain, but the long-term effects were not clear.

**Conclusion:** Research on technology-based interventions for chronic knee pain self-management and exercise programmes is progressing, but its significant effect on pain outcomes in older adults requires further experimental study. Nevertheless, the constraints of this review stem from the brief and restricted search time.

**Keywords:** Chronic knee pain, Exercise, Intervention programme, Older adults, Systematic review, Self-management, Technology-based





# THE MEDIATING ROLE OF RESILIENCE IN THE ASSOCIATION BETWEEN STIGMA AND PSYCHOSOCIAL ADJUSTMENT: A CROSS-SECTIONAL STUDY AMONG YOUNG AND MIDDLE-AGED PATIENTS WITH LUNG CANCER

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## Abstract

**Background:** The diagnosis and treatment of lung cancer leads to varying degrees of psychological and social maladjustment among patients with lung cancer. Understanding psychosocial adjustment (PA) and its influencing factors in young and middle-aged lung cancer patients is essential for supporting their reintegration into society and normal life.

**Objective:** This descriptive study aims to examine the mediating role of resilience in the association between stigma and PA among young and middle-aged patients with lung cancer.

**Methodology:** This study employed convenience sampling to recruit a total of 235 patients with lung cancer from a tertiary grade a cancer center in southern China, and investigated using a self-designed general information questionnaire, Psychosocial Adjustment to Illness Scale Self-Report, Social Impact Scale, and Conner-Davidson Resilience Scale.

**Results:** The mean score of PA was (32.61±14.75), and its influencing factors included financial stress, cancer stage, dyspnea, stigma, resilience, and time since treatment completed. The total effect of stigma on PA was significant (total effect=0.508, SE=0.105, 95% CI [0.301-0.715]), and a positive indirect effect was identified for stigma on PA via resilience (indirect effect=0.151, SE=0.057, 95% CI [0.060-0.282]).

**Conclusion and Implications:** Stigma and resilience are significantly associated with PA, and resilience is also a mediating variable between stigma and PA. Culturally appropriate and detailed psychosocial interventions to young and middle-aged patients with lung cancer could alleviate their stigma, enhance their resilience, and then integrate them into normal social activities and improve the PA.

**Keywords:** Psychosocial adjustment, Lung cancer, Stigma, Resilience