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Prevalence, characteristics and related factors of chronic pruritus in older adults in Taiwan

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This cross-sectional study explored the prevalence and characteristics of chronic pruritus, and the factors which cause chronic pruritus of the elderly. A total of 930 non-demented Taiwanese participants, aged 65-96, were recruited. The "5D Itch Scale" was primarily used to collect data relevant to the characteristics of chronic pruritus. The prevalence rate of chronic pruritus was 24%. Of those 226 participants with chronic pruritus, 51% were females with a mean age of 75 (SD = 77), and 49% were males with a mean age of 73 (SD = 70). A mean score of pruritus in females was 10.8 (SD = 3.6) (> 5 indicates having pruritus) higher than a mean of 9.9 (SD = 2.9) in males, and this finding was statistically significant (t = -2.09; p = .03). Sixty percent, 25% and 11% of them had mild, moderate, and severe pruritus respectively. Seventy-eight percent of them had at least one type of chronic disease, and this was significantly associated with chronic pruritus (p =.001). Sixty percent of the participants reported age-related xerosis as a common factor to cause their pruritus, but this finding did not reach statistical significance (p = .06). The most common three areas where the participants experienced pruritus were legs (64%), arms (61%), and back (39%). In conclusion, chronic pruritus is a common problem that often occurs on elderly extremities. Chronic pruritus is commonly caused by xerosis, and its characteristics significantly differ in females and males. Future research can focus on exploring what causes such a difference.

Biography

Jong-Ni Lin earned a PhD degree in 2013 from the University of Washington in the U.S. She is an assistant professor at the Nursing Department of the Da-Yeh University in Taiwan. Her specialty is geriatric nursing and long term care. The research projects which she is conducting include inventing an "Anti-Pruritus Icy Roller" to decrease pruritus, developing exercise programs to improve elderly physical fitness and quality of sleep and an intervention to lessen elderly constipation.

Notes: