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## Kinaesthetics outcomes for the elderly in acute hospital: A prospective intervention study

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**Background:** Kinaesthetics which has developed in Europe, mainly Germany, Austria and Switzerland is getting a well - known concept in Japan. It is also known in Italy, Nederland, Finland, Russia etc. Kinaesthetics is written in official nursing school books not only Europe nowadays. Several papers suggested that nursing care using Kinaesthetics concept is effective in pain for various cases having acute and chronic disease included in cancer, elderly, and handicapped etc. However, it has not been made clear by investigations under actual clinical intervention study having controlled group. This research aims to scientifically determine the effectiveness of pain and QOL by nursing applied for Kinaesthetics concept in promoting health of the elderly and nurses in an elderly care setting of acute hospital.

**Methods:** The elderly hospitalized in acute hospital and nurses who take care of them were divided Kinaesthetics intervention group and control group. Both were investigated pain in a resting state, pain before and after positioning change supported by nurses, movement sense after the positioning, and Quality of Life measured by Numerical Rating Scale for twice at the time of admissions and discharges. Braden Scale and Barthel Index for the elderly were also determined twice. Nurses were scored by SOPMAS (Structure of the Observed Patient Movement Assistance Skills).

**Results:** Subjects in this study were the elderly: (A) Kinaesthetics group N=48, [Age 80.0(74.3, 84.0)], (B) Controlled group N=35, [Age 80.0(73.0, 85.0)]. There was the elderly who had (A) edema 12.5%, obesity 2.1% and arthritis 52%, (B) edema 5.7%, obesity 0% and arthritis 0%. Braden Scale (A) [13.0(10.3, 16.0)], (B) [14.0(12.0, 16.0)] and Basale Index (A) [10.0(0.0, 22.5)], (B) [10.0(0.0, 25.0)] has not significant difference. QOL changed from (A) [5.0(3.0, 7.8)] to (A) [5.0(5.0, 8.0)], (B) [5.0(2.8, 6.0)] to (B) [5.0(4.3, 8.0)] compared with admissions and discharges. The score of pain for both the elderly and nurses showed decrease in Kinaesthetics group than controlled group.

**Conclusion:** This study indicates that Kinaesthetics in nursing affect pain for both nurses and the elderly in acute hospital.

### Biography:

Hiroko Tadaura is a Professor in Graduate School of Nursing and Rehabilitation Science in International University Health and Welfare Graduate School, Tokyo, Japan. She is also Part-time Assistant Professor in Graduate School of Medicine, Tohoku University, Miyagi, Japan. Guest Researcher in School of Nursing Science in University of Witten/Herdecke, Witten, Germany in 2008-2011. Senior Guest Researcher in School of Nursing Science in University of Witten/Herdecke, Witten, Germany in 2012-2015. She is also a Member of European Kinaesthetics Association, German Branch. IOS New Scholar Award of Self-Care Dependent-Care Nursing, International Orem Society, USA in 2014.

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