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The discrimination of screen pre-frailty for community-dwelling elderly people

Shu-Fang Chang, Rea-Jeng Yang, Ming-Lee Yeh and Hsiu-Li Huang National Taipei University of Nursing and Health Sciences, Taiwan

The World Health Organization (WHO, 2013) has emphasized the concept of pre-frailty among elderly people, and is actively developing intervention projects for treating pre-frailty. According to previous reports, the overall prevalence of frailty for people aged 65 and over is approximately 4.1% to 14% in Europe, the United Kingdom, Taiwan and the United States. The empirical measurement of frailty is based on the following five indicators: weight loss, weakness, exhaustion, slow responses and minimal physical activity. Multivariate logistic regression and receiver operating characteristic analyses were performed. The logistic regression results showed that the factors significantly correlated to pre-frailty included falls, smoking, hypertension and, bone and joint disease. The analysis results showed that the areas under the ROC curves (AUROC) for the diagnostic accuracy of grip and the 8-foot up-and-go test reached 0.77. The information can enable health practitioners to achieve early identification of pre- frailty among elderly people with anthropometric characteristics similar to those associated with people in Asian countries.

linda@ntunhs.edu.tw

Impact of the perceptions of parental rearing behaviors on HQOL of adolescents with CHD

Sunhee Lee¹ and Yu-Mi Im²

¹The Catholic University of Korea, Korea

Introduction: Parents of children with CHD tend to be more overprotective than parents of healthy children. These parenting tendencies may affect the QOL of adolescents with CHD.

Purpose: The purpose of this study is to explore QOL in adolescents with CHD according to their perceptions of the parental rearing behaviors.

Methods: This was a descriptive and exploratory study with 100 adolescents 13-19 years of age who recruited from a congenital heart clinic from July 22 to August 23, 2013. The QOL of adolescents and their perceptions of parental rearing behaviors were measured. We used hierarchical multiple regression analysis to explore the relationship between the perceptions of parental rearing behaviors and QOL by assigning perceived economic status and NYHA functional classification as covariates. PLS path model was used to demonstrate which types of parental rearing behaviors positively or negatively affect the QOL of adolescents with CHD.

Results: The R^2 change of 0.10 in the hierarchical linear regression analysis indicates that the perception of parental rearing behaviors affects QOL by 10% (p<0.05). PLS path modeling indicates that the QOL is positively affected by emotional warmth (p<0.01), and is negatively affected by control/overprotection (p<0.05).

Conclusion: To improve the QOL of adolescents with CHD, effective parental rearing behaviors are as important factors as medical and surgical management. Therefore, it is important for healthcare providers such as general practitioners and cardiologists to develop greater awareness of factors impacting QOL beyond the hospital setting and to educate parents of CHD patients about effective parental rearing behaviors.

shlee418@catholic.ac.kr

²Seoul Women's College of Nursing, Korea