

原 著

## 慢性透析者の身体的・心理的苦痛に対する セルフケア及び看護ケアの実態

Self-care and nursing interventions for the physical and  
psychological pain of chronic dialysis patients

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### キーワード

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### Key words

chronic dialysis patient, physical pain, psychological pain, care method, pain management

### 要 旨

北陸3県の13施設の慢性透析者259名と透析看護師124名を対象に行った実態調査から、苦痛に対する透析者と看護師の対処を明らかにし、両者の差異から透析者へのケア方法を考察した。身体的苦痛に対しては薬剤が必ずしも効果的ではなく様々な方法が試みられていた。透析中では「我慢・辛抱」「掻く・さする・撫でる」が多かった。看護師は「体位の工夫・体位変換」「温罨法・ホットパック」など地道な努力を重ねていた。心理的苦痛は、原因の半数が「身体的苦痛」の存在で、他に「拘束」と「不治の病」があり、対処として「何もしないでいる」や、「気を逸らす」努力がされていた。看護師は苦勞の結果として透析者の態度・性格を否定しながら、「聴く」ケアを行っていた。ケアの方向性として身体的苦痛にどう対処するかが、まず先決であることが示唆され、看護師は透析者の苦痛について機序や表れ方を理解し、苦痛のマネジメントについて必要な知識と技術を開発し、それらを提供して透析者を支援する必要がある。また看護師に対する心理的支援を並行させることの重要性も示唆された。

### Abstract

From an investigation of the conditions for 259 patients with chronic dialysis and 124 dialysis nurses in the three prefectures of Fukui, Ishikawa, and Toyama, we have shown how patients and nurses countered suffering and developed a care method for dialysis patients based on the differences between the two. Medicines are not always effective for physical pain, and various methods had been tried. During dialysis, calls to "bear the pain/endure" and "scratching/rubbing/stroking" were common. The nurses repeatedly applied such basic tactics as "changing/im-

proving body position" and "hot compresses/heat-packs." For psychological pain, the cause of half of it was the existence of "physical pain," and we also noted the existence of "const-raints" and "incurable disease," and as treatment either "nothing was done" or efforts to "distract" were made. The nurses practised "listening" care while denying the attitudes and individuality of the patients undergoing dialysis. This suggests that questions of how to deal with physical pain must be decided first as a care direction, and nurses need to understand the mechanisms and appearances of dialysis patient pain, develop the necessary knowledge and techniques for pain management, and offer them to support dialysis patients. It also suggests that psychological support for nurses must be done in parallel.