

**FACTORS ASSOCIATED WITH FUNCTIONAL RECOVERY
AMONG PATIENTS WITH LOW BACK PAIN**



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Low back pain (LBP) is a disease disturbing daily live activities among people in their early and late adult ages. Numbers of patients have been increasing in Vietnam in the past decade. Treatment of patients with LBP aim to restore their function to their optimum level. The aim of this study was to examine the functional recovery and the association between pain, the self – efficacy, anxiety and depression, comorbidity and functional recovery. Self – efficacy theory was used as a framework for this study. A descriptive correlational research was conducted among 126 patients with LBP in Rheumatology unit at Bach Mai hospital, Hanoi, Vietnam. The sample were 18 years and above. Data were collected by using patients' hospital record and interviewing them with interviewing forms. Spearman's rho was employed to test the association among all variables. The result showed that there was nearly equal distribution between males (52.4%) and females (47.6%), while the age of the patients ranged from 18 to 88 years. The average was 54.84years (SD – 17.11 years). Regarding the functional recovery, majority of the patients (69%) demonstrated moderate disability level whereas 7.9%. demonstrated severe disability. Patients with crippled or bed-bound level were not found. Pain was negatively medium correlated with functional recovery at $r = -.556$, $p = .000$, anxiety had a negative correlation with functional recovery ($r = -.378$, $p = .000$) and depression had a negative medium correlation with functional recovery ($r = -.538$, $p = .000$). Pain self – efficacy had positive medium correlation with functional recovery ($r = .478$, $p = .000$). Nevertheless, comorbidity had no correlation with functional recovery ($p = .105$). In conclusion, majority of the patients with LBP witnessed moderate and severe disability. In order to improve their functional recovery, it is recommended that nurses should assess and control patients' pain. The patients' anxiety and depression should be well managed. The patients' self-efficacy should be enhanced. A comprehensive guideline to improve patients' recovery should be developed and tested for its effectiveness through a quasi-experimental research.

KEY WORDS: FUNCTIONAL RECOVERY/ LOW BACK PAIN/ SELF – EFFICACY/ ANXIETY/, DEPRESSION AND COMORBIDITY

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