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Determination and evaluation of the needs of the patients with knee osteoarthritis in their daily living activities**

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Abstract

This study has been conducted to point out evaluate the needs of the patients with knee osteoarthritis in their daily living activities. The sampling as selected from the Hospital of Physiotherapy and Rehabilitation in Bolu. As a result of study, it was detected that patients with knee osteoarthritis require considerable assistance while performing ADLs (activities of daily living), they experience problems that affect their quality of living and they desire to live their lives comfortably/happily.

1. Introduction

Osteoarthritis is an important muscular-skeletal problem that affects patients’ quality of living, cause degeneration on many joints and generally emerges in elderly individuals. Albeit this disease affects any joint, one of the regions where it most commonly forms is knee joint (CDC, 1994; WHO, 2003). Osteoarthritis is characterized by joint pain, stiffness and limited range of motion and has been declared an international health burden by the World Health Organization (WHO) (WHO, 2003). Osteoarthritis is considered as a significant health problem in social health scans and a leading cause for long-term disabilities (Kamanli, Tuncer, & Kavuncu, 1998). Reported on WHO osteoarthritis is already one of the ten most disabling diseases in developed countries (WHO, 2009).

Knee osteoarthritis creates important problems from physical, social and psychological aspects due to the fact that it follows a chronic course, requires adaptation, causes many disabilities, decreases quality of life, limits activities of daily living (ADL), causes pains and functional disabilities and restricts individuals’ independence.

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Considering the course of this disease, it will be inevitable for an individual to require care and support by somebody else due to his/her limited functions. In this regard, as health professionals and care specialists, nurses assume a critical role in determining care and assistance requirement of an individual and ensuring him/her to be able to independently perform ADLs at the highest level. Maintaining a sense of control over the disease is important for osteoarthritis patients (Creedon & Weathers, 2011). Therefore, starting nursing initiatives suitable for an individual and his/her family, who have to live with the things caused by knee osteoarthritis, and providing professional support on training and consultancy are important in terms of increasing ability to handle a chronic disease.

Ultimately, considering that knee osteoarthritis is a problem that mostly affects elderly individuals and our country will be among countries with “very old” population structure in the future (Turkish Statistics Institute, 2014), it can be anticipated that possibilities for nurses to encounter this group of patients will increase. This descriptive-style study was conducted for the purpose of determining and evaluating assistance requirements for patients with knee osteoarthritis regarding their daily lives.

2. Methodology

2.1 The sample group and the place of research

This study was performed in a Physical Treatment and Rehabilitation Hospital affiliated to the Ministry of Health of the Republic of Turkey. The research data were obtained from 103 patients with knee osteoarthritis, who applied to hospital polyclinic between 04.07-04.08.2002 and agreed to participate in this study.

2.2 Data collection instrument

As data collection instrument, a questionnaire form was used, which was created by researcher through literature review. After testing operability of this questionnaire form on 10 patients with knee osteoarthritis, who applied to polyclinic and were omitted from research scope, and making necessary adjustments, it was applied on research group.

2.3 Data analysis

The data was evaluated in the SPSS statistics package software by employing percentage distribution.

3. Results and Discussion

It was determined that majority of research participants with knee osteoarthritis were women (79.6%) and belong to age group of 60-69 (34%), more than half were literate and graduates of elementary education, almost all (99.0%) have social security, majority considered their income level as lower level (65.1%) and live with their spouses (39.8%).

It was detected that 41.7% of patients experience “intense” problems on their knees, 63.1% mostly struggle due to daily works practiced while standing, 51.5% need help while performing their daily works and assistance that 84.9% of patients received fulfilled their requirements. It was determined in a study performed (Ünsal, 2001) that similarly women who are 65 years old and older fairly struggle while shopping, men fairly struggle while performing heavy house works and then fairly struggle with activities such as going out, wandering at home and walking from stairs up and down respectively. Osteoarthritis of the knee is a major cause of impaired mobility, particularly among women (Woolf & Pfleger, 2003). As reported by Manton (1988), three million elderlies in the United States experience disabilities in one or more ADLs. Kirdi (2002) states that 11.5% of individuals who are 65 years old and older need assistance while performing their ADLs, 50% of people in this age group have rheumatismal diseases first and foremost osteoarthritis and this situation also causes significant functional disabilities. Similarly, Fadiloglu et al. (1992) detected that elderlies require assistance while performing their ADLs (69.28%). In parallel with the study findings reported on WHO worldwide estimates are that 80% of men and woman
with osteoarthritis will have limitations in movement, and 25% cannot perform their major daily activities of life (WHO, 2003).

It was determined that almost all patients (98.1%) feel pain while performing ADLs and majority (75.2%) mostly feel pain in their knees, during works performed constantly (73.3%) and while standing (52.5%), and frequently prefer to take medicine to subdue pain (72.3%). Pain is an important finding that reduces individuals’ quality of living and causes physical limitations. It is reported that while almost all patients with knee osteoarthritis in this study described pains, knee pain prevalence was 28.7% in some other study (O’Reilly, Muir, & Doherty, 1998). Again in the same study, it was determined that patients who experienced pains on their knees felt more unable than other patients who did not experience it (O’Reilly, Muir, & Doherty, 1998). In another study, it was found that status of patients with knee osteoarthritis to feel pain was above the average level (Alanoglu, Mandiroglu, & Atay, 1997).

As seen in abovementioned study findings, pain is the most important determinant of disability in patients with osteoarthritis (Van Baar et al., 1998). Nevertheless, it is argued that pain can be alleviated via approaches appropriate to patients with knee osteoarthritis (Gülbahar et al., 2001).

It was detected in this study that 72.8% of patients with knee osteoarthritis experience morning stiffness, this problem lasts for 10-15 minutes in 64.0%, it is in an intense level for 48.0%, 34.7% of patients wait without doing anything to reduce morning stiffness and 25.3% do exercises. Morning stiffness is a symptom with high intensity which is frequently seen in knee osteoarthritis and causes limitations in movements. In this respect, it is considered that patients waiting desperately without doing anything will reduce their quality of life regarding ADLs. It can be argued that desperate waiting of patients is an indicator for need for professional help.

64.1% of patients responded to the question which activity is the one that they could not do it due to their illness but would want to do it the most as being comfortable/happy, 19.4% responded to it as moving independently and 5.8% responded to it as doing things quickly and moving. Based on these answers of patients, it can be said that they cannot be sufficiently comfortable and happy in their daily lives, they feel dependence while performing ADLs and experience troubles regarding being able to move swiftly. Thus, it is considered that nurses need guidance for the sake of being able to ensure independence of patients at a maximum level and making their lives happier.

4. Conclusions and Recommendations

Considering that ratio of elderly population of our country will increase in the future and knee osteoarthritis is a phenomenon that frequently affects elderly individuals, it can be said that possibility of nurses to encounter and take care of this group of patients will also increase to the same extent. For this reason, crucial tasks fall to nurses as health professionals regarding alleviating troubles of patients with knee osteoarthritis and their families as well as ensuring optimum independence and making sure that they live a quality life. It is suggested that nurses would plan training programmes suitable for patients’ characteristics and counsel patients for patients to be able to adapt to disease, to deal with symptoms, to communicate with a health professional when necessary and to perform practices that can simplify their activities for the purpose of increasing life quality of patients and their families.

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