

診断の不確定により不安が増強する

患者は検査結果を待機している時の方が疾患を有していると知った後よりもストレスを感じる

Patients often more stressed while waiting for medical test results than by knowing they have illness

検査結果を待っている間の不安感は重篤な疾患を有していると知った後よりもさらにストレスを感じる可能性がある、とのスタディ結果が2010年RSNAで発表された。研究者らは確定診断のための精密検査および治療を施行される予定の女性214人（112人は乳房生検、42人は肝動脈化学塞栓療法、60人は子宮筋腫塞栓術を待機）のストレスレベルを調査した。施術直前に各々の女性がストレスおよび不安レベルを測定する4つの標準的な検査（the State Trait Anxiety Inventory[STAI]、Impact of Events Scale[IES]、Center for Epidemiologic Studies Depression Scale [CES-D]、Perceived Stress Scale[PSS]）を受けた。4つの異なるストレス検査のスコアは、確定診断のための乳房生検を施行された女性において、良性および悪性疾患に対し低侵襲治療を施行された女性よりも高かった。乳房生検を受けた患者の平均STAIスコアは48であり、STAIスコアがそれぞれ26および24であった肝動脈化学塞栓療法施行患者および子宮筋腫塞栓術施行患者よりも有意に不安レベルが高かった。筆者らは、診断検査による感情的損害を軽視すべきではないと強調している。

Full Text

The feeling of anxious uncertainty while waiting for medical test results can be more stressful than knowing you have a serious illness, according to a study presented at the 2010 annual meeting of the Radiological Society of North America.

"Not knowing your diagnosis is a very serious stressor," said the study's lead author, Elvira V. Lang, M.D., associate professor of radiology at Harvard Medical School in Boston, Mass. "It can be as serious as knowing that you have malignant disease or need to undergo a possibly risky treatment."

Dr. Lang and her colleague, Nicole Flory, Ph.D., studied the stress levels of 214 women scheduled to undergo different diagnostic and treatment procedures. Immediately prior to the procedures, each of the women completed four standardized tests measuring stress and anxiety levels: the State Trait Anxiety Inventory (STAI), Impact of Events Scale (IES), Center for Epidemiologic Studies Depression Scale (CES-D) and Perceived Stress Scale (PSS).

Of the 214 women, 112 were awaiting breast biopsy; 42 were awaiting hepatic chemoembolization; and 60 were awaiting uterine fibroid embolization.

Breast biopsy patients reported significantly higher levels of anxiety, with an average STAI score of 48, than chemoembolization patients, who had an average STAI score of 26, and fibroid embolization patients, with an average STAI score of 24.

IES scores were not significantly different, but were higher among the breast biopsy patients (average score 26) than the other patient groups (average score 23). Average CES-D scores were 15 for breast biopsy patients, 14 for chemoembolization patients and 12 for fibroid embolization patients. PSS ratings were also highest among breast biopsy patients (average rating 18), compared to fibroid embolization patients (16) and chemoembolization patients (15).

"These results really drive the point home that the distress of not knowing your diagnosis is serious," Dr. Lang said. "We believe that healthcare providers and patients are not fully aware of this and may downplay the emotional toll of having a diagnostic exam."

According to Dr. Lang, simple steps can be taken to alleviate patient stress prior to a procedure. "Training the medical team in how to talk to patients makes a huge difference," she said. "This can diffuse tension right away and can help patients to shape expectations in a more helpful fashion."

TOPICS

Cardiology

冠動脈CTAから睡眠時無呼吸と動脈硬化の関連性が認められた

Oncology

医療用放射線によるがんのリスクは過大評価されていた可能性がある

乳がん既往歴を有する女性はMRIでスクリーニングすべきである

50歳未満の女性において年1回のマンモグラフィーにより乳房切除術のリスクが低下する

Psychiatry

ウォーキングはアルツハイマー病の進行を遅延させる

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