

## 16. Impact of Urinary Symptoms on Quality of Life in Community Female Residents

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**[Objective]** To identify how urinary symptoms affected quality of life (QOL) in elderly community residents.

**[Methods]** The subjects were 387 of 508 women who attended lectures on prevention of urinary incontinence at two sites and agreed to participate in the study. Self-reported questionnaires were distributed to the participants after the lecture. The questionnaire included participant background, the Japanese version of ICIQ-SF and I-PSS. SPSS15.1J was used for analysis. This study was approved by Institutional Review Board on epidemiological studies of Gunma University.

**[Results]** There were significant correlations between QOL related to urinary symptoms and all ICIQ-SF and I-PSS (Spearman's  $r=0.292\sim0.577$ ,  $p<0.01$ ). Stepwise logistic regression analysis (QOL as dependent variable, and ICIQ-SF and I-PSS as independent variables) revealed that "leaks when you cough or sneeze," "frequency" and "nocturia" were significant factors related to QOL ( $p<0.05$ ). **[Discussion]** Urinary symptoms affected QOL of community female residents, especially "leaks when you cough or sneeze," "nocturia," and "frequency" affected QOL. The previous studies reported that "dribbling," "frequency," "urgency," "straining," and "nocturia" were related factors to QOL. These findings warrant future studies on pelvic floor muscle exercise, effective use of urinary pads, promotion of prevention activities of urinary disorder and access to urologists.

## 17. Usefulness of Relaxation Technique for Diabetic Blood-sugar Control-difficult Patient by Analysis of One Clinical Case

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**Objective of Study:** To examine the usefulness of relaxation technique called Progressive Muscle Relaxation (PMR) focusing on the respiration exercise as a stress

management for blood-sugar control-difficult patients who are Type II diabetic outpatients. **Methodology:**

The subject patient was one case of Type II diabetic out-patient (male, age of 45, under oral medication) who was difficult to be controlled for blood sugar, and who was pointed out as having hyperglycemia and hyperlipidemia at the time of his company's health check in 2002, but having neglected any medical treatment, and was again pointed out the same conditions in 2003 when he started to receive the treatment at our hospital as an outpatient, but has repeatedly interrupted the treatment at his own will. The authors advised and implemented the program of interviews and PMR for the subject patient at the consulting occasions at our diabetes-specialized outpatient department. As the materials for evaluation, we collected the questionnaire on the implementation of self-care, the physiological data before and after the program at each time of consultation in our outpatient department, measurement of psychological indexes, and the laboratory data obtained at each time of consultation.

The present study has been approved by the clinical ethical committee belonging to our hospital's study groups and the committee of research for health care of the Division of Health Sciences. **Results:** At the first interview, the patient made negative comments, and verbally showed a state of mind of apprehension for future with the passive attitude toward the improvement in daily life. On the other hand, he expressed his consent to the study participation, so far as the study was easily done, under the observation of researchers. The level of HbA1c was found to be stable through the period of 6 months' intervention, and was able to receive the continuous treatment as well as the relaxation exercise both in the outpatient department and at home. Blood pressure, pulse and salivary amylase values were decreased after the treatment, while the relaxation index showed increase. In the aspect of daily life, the frequency of using the relaxation technique at the time of experiencing stress indicated an increase 3 months after the onset of the treatment. At the same time, he obtained the increased sense of having a sound sleep, a decreased displeasure such as orthostatic vertigo, and was able to continue non-smoking and non-alcohol habits. For the level of cortisol during 6 months, however, it was not enough to detect and measure salivary secretion, in which the patient would complain of a continuous sense of dryness. **Discussion:** Successful acquisition of a sense of pleasure

in experiencing, on a regular base, the dominant state of parasympathetic nervous system due to PMR focusing on the breathing exercise and the sense of self-accomplishment in continuing the habit through the long-term intervention are considered to be an effective element for maintaining a stable blood-sugar level. We consider it important to recognize the way of thinking obtained from the patient's own experiences, while appreciating the importance of psychological problems in the treatment of diabetes. Under the guidance and close cooperation with physicians in the outpatient department, it can be said that the patient succeeded in receiving the continuous outpatient treatment.

#### 18. クロステストにおける WISH 型股関節装具の効果

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**【目的】** 变形性股関節症(変股症)に対する装具療法として WISH 型股関節装具(WISH 型股装具)を作製した。股関節は姿勢調節に関与していると報告がある。今回 WISH 型股装具の効果の検討を目的に、WISH 型股装具装着における重心動搖の変化について、支持基底面を固定した状況における随意運動中のバランス機能検査であるクロステストについて検討した。**【方 法】** 2007 年 4 月～2010 年 10 月に変股症により、群馬大学医学部附属病院整形外科を外来受診した女性患者 19 名を対象としクロステストを施行した。クロステストは、Ishikawa の方法に従って、重心動搖計(アニマ社 GRAVICORDER G-6100) 上に両側踵部中心間距離を 15cm 開脚し、約 4 秒間の安静立位の後、前後右左の順で身体の重心を随意的に各方向に最大に移動させ、最後に約 4 秒間の安静立位をとり、サンプリング周期 20ms にて 40 秒間計測した。左右(X)方向と前後(Y)方向におけるそれぞれの最大振幅(XD, YD)を求めた。XD, YD それぞれについて、装具の着脱における変化について Wilcoxon の符号付順位和検定を用い、装具装着後の経過について Mann Whitney の U 検定を用い、危険率 5%未満を有意差ありとした。**【結 果】** XD において装具装着による有意な変化が認められた。YD は有意な変化はみられなかつた。装具装着後の経過においては、装具装着における有意な変化はみられなかつた。**【考 察】** 左右方向への重心移動において有意な変化を認めた。内外側方向の安定性を回復するためには股関節が主要な関節である。

WISH 型股装具は、左右方向のバランス機能の改善に有效であると考えられる。

#### 19. 乳頭腫脹と虹彩毛様体炎を合併した成人発症 Still 病の一例

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**【緒 言】** 成人発症 Still 病(AOSD)は、若年性特発性関節炎の全身発症型(Still 病)が 16 歳以上の成人に認められたものである。眼合併症を生じることはまれであり、その報告は少ない。今回我々は両眼性の虹彩毛様体炎と高度な視神経乳頭腫脹を合併した症例を経験し、その経過を観察したので報告する。**【症 例】** 16 歳女性、近医で発熱、発疹等により川崎病として加療されるも改善なく 2009 年 4 月 30 日当院内科へ精査加療目的で転院となった。精査の結果、AOSD と診断されステロイド治療が始まった。結膜充血があり内科からの紹介で 2009 年 5 月 1 日当科初診。矯正視力は両眼とも(1.2)、眼圧は右 13, 左 11mmHg、両眼に虹彩毛様体炎と高度の視神経乳頭腫脹を生じていた。視力・視野障害などの訴えはなかった。ステロイド点眼で虹彩炎は改善、メソトレキサート併用後全身状態の安定化に伴い乳頭腫脹も徐々に改善していった。経過中、視力視野障害はなく、神經線維束欠損なども生じなかつた。乳頭所見の経過観察には光干渉断層計 OCT の disc cube 測定と眼底写真を用いた。**【考 指】** AOSD で眼合併症を生じることは多くないが、軽度の充血のみで自覚症状が特になくても高度の視神経乳頭腫脹や虹彩毛様体炎を生じることがあり、一度眼科で検査をすることが望ましいと考える。また、乳頭所見の変化をみるのに OCT は有用であった。

#### 20. 手根管症候群患者における超音波診断の有用性と臨床所見の関連について

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**【はじめに】** 手根管症候群(以下 CTS) 診断における超音波の有用性を調査し、CTS 患者超音波像と臨床所見(Quick DASH 機能、症状スコア)、電気生理学所見(短母指外転筋複合活動電位(CMAP)、示指感覚神経活動電位(SANP))との相関を調査し検討したので報告する。**【対象と方法】** コントロール群は男性 18 人 33 手、女性 35 人 63 手、合計 53 人 96 手、平均年齢 52.6 歳(22 歳～86 歳)を調査した。CTS 群は男性 7 人 10 手、女性 20 人 31 手、合計 27 人 41 手、平均年齢 58.7 歳(30 歳～85 歳)を調査した。超音波検査は① wrist crease 高位②遠位橈尺関節高位にてエコー短軸像を検査し正中神経断面積を測定