原作者及出處 (Original):

McKillop A, Grace SL, Ghisi GLM, Allison KR, Banks L, Kovacs AH, Schneiderman JE, McCrindle BW.

Pediatr Phys Ther 2018;30(4):326-334. doi: 10.1097/PEP.000000000000534.

翻譯者 (Translator):

林珮如

臺東大學特殊教育學系助理教授,臺東,臺灣

校閱者 (Reviewer):

陳麗秋

輔英科技大學物理治療學系助理教授,高雄,臺灣

題目 (Title):

改編動機式晤談法對先天性心臟病青少年的運動促進:前驅研究。 Adapted Motivational Interviewing to Promote Exercise in Adolescents With Congenital Heart Disease: A Pilot Trial.

摘要中文翻譯

目的:

評估動機式晤談法(motivational interviewing, MI)介入改善先天性心臟病青少年的中高強度身體活動(moderate-to-vigorous physical activity, MVPA)的成效。

方法:

介入參與者在3個月內接受一對一、電訪式的改編 MI 療程。結果為可接受性、變化機制(變化階段和自我效能),以及有限性效能(身體活動、體適能與生活品質)。

結果:

36 名參與者被隨機分配。介入參與者完成 4.2±1.2/6 次 MI 療程,並沒有觀察到高自我效能或變化階段的改善。參與者每天積累了 47.24±16.36 分鐘的 MVPA,並且與沒有心臟病的同儕具有相當的結果(功能性能力除外)。所有結果的變化都無顯著組間差異。

結論:

此介入是可接受的,但由於樣本的本質和大小而無法確定其有效性。

臨床相關性:

兒童心臟復健仍然是增加此一群體的 MVPA 的唯一有效介入方法。

Original Abstract

PURPOSE:

To assess a motivational interviewing (MI) intervention to improve moderate-to-vigorous physical activity (MVPA) in adolescents with congenital heart disease.

METHODS:

Intervention participants received one-on-one telephone-based adapted MI sessions over 3 months. Outcomes were acceptability, change mechanisms (stage of change and self-efficacy), and limited efficacy (physical activity, fitness, and quality of life).

RESULTS:

Thirty-six participants were randomized. Intervention participants completed $4.2 \pm 1.2/6$ MI sessions, with no improvements in the high self-efficacy or stage of change observed. Participants accumulated 47.24 ± 16.36 minutes of MVPA/day, and had comparable outcomes to peers without heart disease (except for functional capacity). There was no significant difference in change in any outcome by group.

CONCLUSIONS:

The intervention was acceptable, but effectiveness could not be determined due to the nature and size of sample.

CLINICAL RELEVANCE:

Pediatric cardiac rehabilitation remains the sole effective intervention to increase MVPA in this population.

Lippincott Williams & Wilkins, a business of Wolters Kluwer Health and its affiliates take no responsibility for the accuracy of the translation from the published English original and are not liable for any errors which may occur.

威科集團醫療衛生業務部門之一: Lippincott Williams & Wilkins, 及威科集團醫療衛生業務部門的其他附屬機構不承擔因從英文原文翻譯的準確性而導致的任何責任,也不承擔由於翻譯錯誤而導致的任何法律責任。