

## A Report on 22nd East Asian Forum of Nursing Scholars (EAFONS) Conference 2019 Part 2

– Study of literature on life skills that focus on eating habits  
of patients with inflammatory bowel disease –

### 2019第22回東アジア看護学研究者フォーラムの報告（Ⅱ）

– 炎症性腸疾患患者の食生活に焦点をあてたライフスキルに関する文献検討 –

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#### Introduction

It's explained about EAFONS 2019 and our research work the 22nd time by this report. East Asia nursing person forum (EAFONS) meeting was held the 22nd time in Singapore FURAMA River front hotel from January 17, 2019 to the 18th. This meeting is an excellent international conference for a specialist of nursing in East Asia area. So we did a poster announcement about "Study of literature on life skills that focus on eating habits of patients with inflammatory bowel disease".

#### EAFONS 2019

The aim of East Asian Forum of Nursing Scholars (EAFONS) is to strengthen and promote high quality doctoral education in nursing as well as create an academic environment and socialization for East Asian Scholars through international collaboration and cooperation.

This year's theme is the preparation of a new decade of doctoral education and research, and It was "innovation, change, new dynamism".

More than 800 nursing scholars and practitioners attended the meeting. During the two-days event, 65 oral presentations and 669 poster presentations in 20 themes were given by participants from all over the world.

#### Our study

Inflammatory bowel disease (IBD: Ulcerative colitis, Crohn's disease) develops at a young age. Patients need to be on long-term medication and diet. The symptoms are diarrhea and abdominal pain, and the symptoms are unstable. Symptom control affects the patient's QOL. Life skills are necessary for patients with inflammatory bowel disease to carry out dietary intake and medication according to their symptoms. However, there is no research on life skills to make a diet tailored to patients with inflammatory bowel disease. Therefore, we will

clarify the trend of research on the diet and life skills of patients with inflammatory bowel disease, and examine the support method.

Key words : life skills, eating habits, inflammatory bowel disease,

## 1. Background

Patients with inflammatory bowel disease (IBD: Ulcerative colitis/Crohn's disease) have reported that self-care assistance in nutrition and psychological/social support are important for improving quality of life (QOL) in terms of related diet issues. Some research has been done in this regard. However, these studies are centered on therapy; none has clearly addressed life skills for practicing diet therapy.

## 2. Objective

We aimed to clarify the research trends in life skills focusing on the diet of patients with IBD and use our results as basic data to consider methods for support.

## 3. Methods

It analyzed 10 ones about life skills of the inflammatory bowel disease by the contents from 25 pieces of literature that searching. was extracted from the medical center magazine Web in the original paper in 2003-2017 by the key word in "the inflammatory-bowel-disease" "the meal" "the life" "the support" "the incurable disease" and it reviewed them qualitatively. It calculated the rate of concordance of the classification into the category which depends on three nursing researchers to secure the reliability of the category in the arithmetic expression of Scott. W. A.

## 4. Results

Ten documents were extracted: 4 on "Psychological/Social Impact of Disease," 2 on "Medical Life and QOL," 2 on "Patient's Health and Welfare Needs," and 1 each on "Communication via Meals" and "Self-management of Patients" (Table 1). The rate of concordance of the category classification using the arithmetic expression of Scott. W. A. was 80.0%, 90.0% , and as for the category, in the reliability, securing. life skills is the skill to cope more constructively to the daily happening various problems and the requests and effectively: as the research trend in 14 years of the pasts, the patient in the show. future must review the contents of the education of life skills to practice about all research in the difficulty in case of eating habit that the one which words and phrases, life skills, were used for is of. of not having been however related to life skills and the problem.

## 5. Conclusion

The difficulty in eating habits related to life skills and the problems were clarified on classifying the research trends on life skills focusing on the eating habits of the IBD patients through content analysis and basic data reviewing ways of support were suggested.

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Table1 Literature review of life skills focusing on the eating habits of Inflammatory Bowel Disease patients

Classification	Bibliographic information	The study design	Study participants	Difficulty in the eating habits related to a life skill	Problems in life skill education
Psychological/ Social Impact of Disease	The experience by which an inflammatory bowel disease patient builds a starting working life while holding the symptom -Life history of the patient who missed difficulty, took a fighting stance comfortably and got - (Ikemi Ayako and others, 2017) 1)	Qualitative study	1 ulcerative colitis patient	< corrective action about eating habits> • Be careful of the amount of the meal and the contents. • Put the weird atmosphere by which a meal does not influence relationship with entourage.	• The way which gets over sick difficulty • The manner of the handle by a situation of a meal
	Psychological and social effects on daily life caused by disease instability in patients with Crohn's disease (Tomita Masako and others, 2007) 2)	Quantitative study	79 Crohn's disease patients	< influence about eating habits> • Through a meal, an affiliation, be subject to restrictions. • A favorite one don't be eaten. • It's a worried fact to eat.	• The way in detail to do a diet • How to utilize the psychiatric staff who reduce anxiety
	Life Experience of Young Adult with Inflammatory-Bowel-Disease (Yoshida Reiko, 2003) 3)	Quantitative study	153 ulcerative colitis patients and Crohn's disease patients	< influence of diet on social life> • A diet will be an obstacle of communication, and the reach of the association is made small. • A transnasal Buddhist scriptures pipe way has an influence on the starting work form.	The way for entourage to understand about sickness • The Way of support system making in an area, school and an enterprise
	Difficulties at work and work motivation of ulcerative colitis patients (Nasu Ayami and others, B32014) 4)	Quantitative study	70 ulcerative colitis patient	< to experience difficulty in starting work> • Sickness not understood by people of in the workplace • Avoid the food and liquor offered at the work *• Avoid a meal and an alcoholic party for managing physical condition	• How to explain sickness to a boss and a colleague • The way of work environment making to tend to consult
Medical Life and QOL	Quality of Life and the problem of diet in Patients With Inflammatory Bowel disease.-Comparison between ulcerative colitis and Crohn's disease (Tomita Masako and others, 2005) 5)	Quantitative study	262 ulcerative colitis patients and 453 Crohn's disease patients	< influence to the living degree of satisfaction of the meal restriction> • Unsatisfied appetite • The thing which can't partake of the pleasure eaten with other people • Inability to eat out	• The way by which a patient controls sickness according to the respective situations
	The relationship between quality of life and self-care behavior, social support in adolescents with Inflammatory Bowel Disease (IBD) (Kudo Etsuko, 2012) 6)	Quantitative study	42 11 years old-18 year old patients of an ulcerous colitis and Crohn's disease	< eating habits and QOL> • An adjustment made for a pubescent IBD patient with restriction of the meal volume and necessity is felt, be possible to get a satisfaction, there is no Tei.	• Way of a recuperation life in detail which fits a patient
Patient's Health and Welfare Needs	Comparison of Doctors' and Patients' Perspectives in the Treatment of Ulcerative Colitis (Mamoru Watanabe, 2012) 7)	Quantitative study	354 doctors examining more than 5 patients with ulcerous colitis and 206 ulcerative colitis patients	< to experience difficulties in life> • Meal and eating out • Work and school	• About influence on the symptom and daily life, how to tell to a medical person • Recognizing physical condition and the symptom by oneself
	Actual conditions of patients with inflammatory bowel disease and their needs for health care and welfare services (Report1): the similarities and differences between patients with ulcerative colitis and Crohn's disease (Komatsu Yoshiko and others, 2004) 8)	Quantitative study	229 ulcerative colitis patients and 450 Crohn's disease patients	< difficulty in eating habits> • Meal restriction is hard. • The thing which doesn't have many suitable meal menus • Be in trouble about school lunch (box lunch) • Require a cost of a healthy help food and an oral feeding pill. • Meal guidance depends on the hospital • The thing which doesn't have much surrounding understanding to sickness	• About sickness, how to raise social awareness • Way in detail of a diet, mental care and starting working support
Communication via Meals	Experiences of Relation Between individuals with Crohn's disease and others through a meal (Fukita Maya and others, 2007) 9)	Qualitative study	17 adult Crohn's disease patients	< difficulty by concerning with others through a meal> • Don't understand dealing at a place by the meal with others. • Be a mental burden which tries to obey meal restriction. • Avoid a meal with others. • That meal restriction can't speak to entourage about a necessary thing.	• Way of the meal which can continue how to associate with others without destroying physical condition • Patient's other stories of the experiences, how to utilize • How to prompt understanding about a disease to the neighborhood
Self- management of Patients	Self management of the Crohn's disease patient a nurse recognizes (Ishibashi Chinatsu and others, 2016) 10)	Qualitative study	5 nurses who participated in nursing of a Crohn's disease patient for more than 3 years	< Self management of a needed Crohn's disease patient> • The attitudes toward people with Crohn's disease • Management of a diet which fits itself • Device of daily life of the purpose which doesn't make the symptom be aggravated • Cooperation with a medical personnel • Correspondence to a change in the symptom	• The communication power from which the contents of a self monitoring of physical condition are introduced to a medical person • Using social resources