

Effect of Amputation on Patient's Self Concept

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ABSTRACT

This study focuses upon the alteration of self concept as a result of amputation. Studied were sixty individuals, 30 amputees and 30 controls. These were interviewed. The Self Concept Scale by Ismail 1957 was the tool used.

Results showed a significantly lower self concept among amputee group. Age and marital status were found to affect significantly patient's self concept while sex and occupation did not have any statistical significant effect.

These findings indicate the psychological stress that accompany alteration in body function and appearance and point to the importance of taking this into consideration in providing nursing care for these patients.

INTRODUCTION :

Patients suffering from loss of body function undergo psychological stress which stems from the loss of a real object. This is specially significant if the loss affects the individual's social status, occupation, if it interferes with a valued skill or talent (Severyn, 1978). A means to estimate the psychological effect of the loss is through the determination of the patients' self concept. In fact, every person posse-

sees an inner image of his own body. This image is an integral part of the person's concept of his personality, his worth and his relations with others (Olson, 1967).

It is no surprise that an alteration in a person's appearance may have far reaching consequences. Woods (1979) stated that clients who experience surgical removal or loss of a body part will probably undergo a disturbance in their body image. In addition, physical disability that results in altered body function or appearance of both is accompanied by a change in the person's body image and self concept (Brundage and Phipps, 1983; Luckmann and Sorensen, 1980).

Several studies have established the relationship between lowered self concept and enterostomal surgery, mastectomy and hysterectomy (Drellick and Bieber, 1958; Orback and Talent, 1965; Brown et al., 1972; Roberts, 1978). Also, Kennedy (1982) advocated that the loss of a limb is a highly visible disfigurement and influence self perception and interpersonal relationship.

Nurses, concerned with comprehensive patient care must be aware that loss of body function can cause disturbance in patient's ego identity and that his invisible wounds are the hardest to treat (Thramposh, 1981). They need to familiarize themselves with these concepts so as to help those patients suffering from self concept distortion and allow them to achieve the highest level of reconstruction possible.

The aim of this study was to determine the effect of amputation on patient's self concept.

MATERIAL AND METHODS :

The population for this study comprised sixty individuals, divided into two groups. Group A consisted of thirty amputee patients from the Rehabilitation Center of the Health Insurance Hospital of the City of Alexandria. They had to be adult patients, with recent amputation after complete healing and free from other chronic illness or handicap.

Patients were taken every Tuesday upon their first referral to the center. The first two patients coming to the clinic and fulfilling the set criteria were interviewed.

Group B consisted of thirty adult workers randomly selected from the fast cotton company. They had to be free from any chronic illness or handicap.

The tool used for this study was the "Self Concept Scale" by Emad El-Din Ismail (1957), supplemented by a social information sheet. The scale is composed of 100 statements each denoting a quality covering six major areas namely realistic self concept, psychological distance, normal people self, self acceptance, ideal self concept, acceptance of others.

Rating is done on an eight-point scale ranging from not present at all to highly present. Scores were added and Mean scores and SD were computed. Test of significance used was t test.

RESULTS :

The sample comprised 24 male and 6 female amputees and 14 male and 16 female non-amputees. Their age ranged from 20-60 years. The results of the study are shown in the tables. Table I shows that younger amputees have lower self concept than older ones. There is a lack of significant statistical difference in relation to sex (Table II). Table III shows that married patients have a lower self concept than single ones.

Table I
Self Concept and Age

Age (yrs)		Amputee group	Control	t
20 - 39	N	22	21	3.5
	$\bar{X}_2$	429	342.09	
40 - 59	N	8	9	6.9
	$\bar{X}_2$	561.5	348.44	
t		4.05	0.29	

Table II
Self Concept and Sex

Sex		Amputee group	Control	t
Male	N	24	14	3.9
	$\bar{X}_2$	464.66	342.5	
Female	N	6	16	3.1
	$\bar{X}_2$	463	345.3	
t		0.038		

Table III
Self Concept and Marital status

Marital status	Amputee	Control	t
N	11	12	
Single			2.12
$\bar{X}_2$	408.09	331.1	
N	19	18	
Married			5.17
$\bar{X}_2$	496.94	349.55	
t	-2.14	0.98	

Table IV
Self Concept and Occupation

Occupation	Amputee group	Control	t
N	15	16	
Employee			4.5
$\bar{X}_2$	460.4	322.87	
N	15	14	
Skilled worker			3.2
$\bar{X}_2$	486.26	371.35	

DISCUSSION :

A person's body, as perceived or evaluated, plays a significant role in determining security and sense of self-esteem. The body concept includes all of the perception and knowledge concerning one's own body appearance, boundaries, limits and inner structure (Roberts, 1978). The study of the effect of amputation on self concept revealed a poor significant correlation. Amputee patients have lower self concept than their controls. These results are understandable as any change or alteration in body structure would lead to disturbed self concept. In addition, self concept is more affected when the loss involves a visible body part (Kennedy, 1982). The results obtained in this study are in accordance with other studies (Yuber, 1962; Siller, 1964). Thus McCloskey (1976) stated that researchers proved that the loss of a limb creates poor self concept. She even mentioned that "phantom limb" pain is a problem of body boundary adjustment. Roberts (1978) found that loss of a limb may create internal feelings of worthlessness and thus lowered self concept.

The relationship between lowered self concept and enterostomal surgery, mastectomy and hysterectomy has been proved by several studies (Drellich and Bieber, 1958; Orbach and Talent, 1965; Brown et al., 1972; Woods, 1979).

Some factors were found to affect significantly the amputee's alteration in self concept. Thus, the results obtained in this study reveal that younger amputees have lower self concept than older ones (Table 1). The difference was statistically significant. Age did not seem to affect the self concept of the control group. In other words, patients who are at their optimum level of functioning and who are at the stage of intimacy suffer more than others from distorted self concept. This may also be due to the value young people place on their general appearance. In addition, the functional significance of the lost limb may be higher among younger people resulting thus in a lower self concept.

The results of this study denote a significant relation between marital status and self concept of amputees. Married patients were found to have a lower self concept than single ones (Table 3). This may reflect the relation between alteration in self concept and how spouse views the amputee. In other words, lowered self concept of amputee may be due to the alteration of their image perceived by their partner. In this respect, Marinelli and Dell Orto (1977) mentioned that self concept is a result of significant other's view of one's self. The same was presented by Kinch (1968) who stated that the individual's conception of himself emerges from social interaction.

Society places a value on female appearance in the sense that they have to fit in certain norms and meet certain criteria in order to be acceptable. Men are subjected to these norms and criteria to a lesser degree. Thus it can be explained why women, being the product of our society and culture, would react more strongly than men to the loss of a limb. Yet the difference was not significant (Table 2). The lack of significant statistical difference in relation to sex has also been reported by Fisher and Cleveland (1968).

In relation to patients' occupation (Table 4), the amputation might bring about changes that will, to a greater or lesser extent, jeopardize their status and accordingly their self concept. However, skilled workers could experience the loss of a limb in a more drastic manner than employees since this would bring about some changes in their occupational status. On the other hand, the impact of the loss on the individual might be subdued by the retained status of the skilled workers, as providers to the family, by the financial coverage provided for by social and work insurance.

CONCLUSION :

Amputee patients may suffer internal feelings of worthlessness which affect their self concept. The reactions of significant others particularly the spouse influence patients' view of themselves. Younger

amputee patients need more support as their self concept is more affected.

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الموجز

أثر البتر على مفهوم الذات لدى المرضى

تركز هذه الدراسة على التغير الناشئ عن البتر في مفهوم الذات ، حيث تم مقابلة ستين شخصا نصفهم من المرضى والنصف الآخر من عينة ضابطة . وكانت الوسيلة المستخدمة هي مقياس اسماعيل لمفهوم الذات — ١٩٥٧ .

وأظهرت النتائج وجود نقص في تقدير الذات بدرجة دالة بين مجموعة المرضى . ووجد أيضا أن العمر والحالة المدنية تؤثر على مفهوم الذات لدى المريض بشكل دال ، أما الجنس والمهنة فلم نجد لهما أثرا ذا دلالة احصائية . وتشير هذه النتائج الى الضغط النفسي المصاحب للتغير في وظيفة الجسم ومظهره ، وتشير أيضا الى أهمية أخذ ذلك في الاعتبار في الرعاية التمريضية لهؤلاء المرضى .

ABSTRAIT

L'effet de L'amputation sur la Conception du Moi

Cette étude à pour but d'observer l'alteration de la conception du moi chez des malades ayant été amputés. 60 individus, dont 30 amputés et 30 controls ont été questionnés, utilisant le questionnaire de la conception du moi d'Ismail 1957.

Les résultats ont montré une conception du moi plus faible chez les amputés. L'age ainsi que l'état civil influençaient significativement la conception du moi, tandis que le sex et l'occupation n'avaient aucune influence statistiquement significative.

Ces resultats mettent en relief la tension psychologique associée avec l'alteration d'une fonction corporelle ou de l'apparence physique, et indique l'importance de prendre cela en consideration durant les soins infirmiers fournis à ces malades.

A Socio-demographic Study of New Referrals to the Psychiatric Out-patient Clinic in Qatar

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ABSTRACT

A Socio-demographic analysis of 438 new referrals seen at the Psychiatric Out-Patient Clinic at Doha, Qatar, during a period of six months showed that the rate of first consultation was 4.6/1000/year for general population, 6.6 for Qataris and 2.6 for non Qataris. Majority of patients were married males in age group 25 - 39. More than half of the patients were suffering from depressive and anxiety disorders. 75 of patients studied were admitted to the psychiatric in-patient unit during the same period.

INTRODUCTION

Qatar is an Arab State on the western coast of the Arabian Gulf. It is a peninsula about 100 miles long and 55 miles across its broadest part, the area being about 4000 square miles.

A large number of studies have considered the relationship of immigration and mental illness (Malzberg, 1969). Nevertheless, there are few comparative studies of psychiatric morbidity among sub-groups of different nationalities living in a community (Carpenter and Brockington, 1980). Many studies have shown that immigrants to Europe, Great Britain and U.S.A. have higher rates of psychiatric disorders (Murphy, 1973), especially schizophrenia (Dean et al., 1981), and