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論文審査の結果の要旨及び担当者

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論文審査の結果の要旨

本論文は、介護の専門家を対象にアンケート調査を行い、認知症の行動および心理症状（BPSD）に対して、介護保険で利用できる介護サービスの中で、どのサービスが有効と考えられているかを報告したものである。形態素解析を用いて、それらの介護サービスが有効と考えられている理由も明らかにした。

BPSDの内容によって、有効と考えられるサービスは異なっていた。具体的には、無為については、レクリエーションへの参加により刺激を受けることができるために通所サービスが有効であると考えられていた。異常行動については、在宅介護が困難になる患者が多いために施設サービスが有効と考えられていた。しかし、多くのBPSDにおいて、施設サービスと在宅サービスの間に、有効性に関する有意差がなかった。このように、本研究は在宅サービスを積極的に利用することで、BPSDのある患者がより長く在宅療養を続けられる可能性を示唆している点で意義があり、博士（医学）の学位授与に値する。

論　文　内　容　の　要　旨
Synopsis of Thesis

氏　名 Name	鈴木　由希子
論文題名 Title	Advantages of different care services for reducing neuropsychiatric symptoms in dementia patients（BPSD に有効な介護サービスに関する調査研究）

論文内容の要旨

〔目　的(Purpose)〕

It is assumed that care services effectively reduce behavioral and psychological symptoms of dementia (BPSD). However, which care services are effective for reducing specific BPSD, is unclear. The aim of this study was to clarify which care services were recognized to be effective for reducing each of 11 BPSD by care specialists.

〔方法ならびに成績(Methods/Results)〕

We sent unsigned questionnaires to care specialists in Japan that asked them to choose the most, second-most and third-most effective service from 12 kinds of care services for reducing each of 11 BPSD. The most effective service was scored as 3 points, the second-most was 2 points, and the third-most was 1 point. They were also asked to describe why they chose each service. The 12 kinds of care services were categorized into 4 service categories: home-visit, outpatient, short-stay, and facility. Total scores for each category were analyzed using a two-way analysis of variance. The reasons why care specialists chose each service were analyzed using morphological analysis, and representative reasons were extracted.

A total of 103 questionnaires were returned. Of the 4 service categories, outpatient services yielded the highest scores for reducing apathy ($p < 0.001$) due to the effectiveness of participating in recreation and receiving stimulation. Facility services yielded the highest score for reducing aberrant motor behavior ($p < 0.001$). Short-stay services yielded the lowest score for reducing depression ($p < 0.001$). For 8 other kinds of BPSD, there were no significant differences between home-visit and facility services or between outpatient and facility services.

〔総　括(Conclusion)〕

Care specialists considered that effective care services for reducing BPSD were different among types of BPSD. In-home care services might be effective at reducing many BPSD except for aberrant motor behavior, suggesting that greater use of in-home care services might enable people with BPSD to live in their homes for longer.