

- 一、基礎體溫的測量可協助婦女瞭解及評估其排卵及預估排卵日期，月經週期中排卵前的體溫約是 36.5 °C 左右，排卵的徵象在基礎體溫的變化是如何？(2 分)此變化是受到哪項促性腺激素激射而導致卵子排出？(3 分)
- 二、請陳述不孕症婦女接受試管嬰兒治療失敗後，常出現的情緒及心理反應；並提出護理目標及適切護理措施。請試舉一案例，並就其情境脈絡加以闡述。(15 分)
- 三、母親與其胎兒/新生兒間的親愛關係，對嬰兒未來情感與健康人際關係有莫大影響。請回答下列二題。
1. 請闡述孕期及產後期，母親如何與其胎兒/新生兒發展並建立親情關係(maternal-child relationship)的連結(binding-in)？(15 分)
 2. 李安導演在多前拍完喜宴後，說過：「與父母親的關係，能夠彼此相愛就夠了，不必製造一個階級觀念。……………。我覺得『孝順』是一個過時的觀念，當然跟中國人講幾百年也講不過去，這是一種根深蒂固的存在。可是在我的思想裡面，我已經不教小孩『孝順』這個東西，只要他感受到我的愛，同時也愛我就夠了。」李安導演的意見是，以「愛」能取代「孝」。
綜合上述第一題母嬰關係論述與李安導演的意見，請闡述你個人的看法與態度。(10 分)
- 四、請陳述質性研究及量性研究的區別，並依據前述不同研究法，分別提出你有興趣的研究題目、研究目的及採用此研究法的理由。(15 分)
- 五、請閱讀下列一篇英文研究報告摘要(見第 2 頁)
Archangelo, S. C. V., Sabino Neto, M., Veiga, D. F., Garcia, E. B., & Ferreira, L. M. (2019). Sexuality, depression and body image after breast reconstruction. *Clinics (Sao Paulo)*, 74, e883.
1. 依下列標題順序，用中文敘述每一段標題及內容意涵。(30 分)
 - (1) Title
 - (2) Objectives
 - (3) Methods
 - (4) Results
 - (5) Conclusion
 2. 請說明如何將上述之研究結果應用於婦女健康護理實務或研究。(10 分)

Title: Sexuality, depression and body image after breast reconstruction

OBJECTIVES:

To evaluate the impact of breast reconstruction after mastectomy on sexual function, body image, and depression.

METHODS:

This cross-sectional, comparative, controlled study was conducted with 90 women between 18 and 65 years of age who had undergone either mastectomy alone (mastectomy group, n=30) or mastectomy combined with breast reconstruction (mastectomy-reconstruction group, n=30) at least one year prior to the study or who had no breast cancer (control group, n=30). Patients were assessed for sexual function, depression, and body image using the validated Brazilian-Portuguese versions of the Female Sexual Function Index, the Beck Depression Inventory, and the Body Dysmorphic Disorder Examination, respectively.

RESULTS:

The three groups were homogeneous for age, marital status, body mass index, and education level. The women in the mastectomy group reported significantly worse sexual function, greater depressive symptoms, and lower body image than those in the mastectomy-reconstruction and control groups. In the mastectomy group, the frequency of sexual dysfunction was significantly greater among patients without a marital partner and those with a higher level of education than among patients in the other two groups with the same characteristics.

CONCLUSION:

Patients who had undergone breast reconstruction after mastectomy reported better sexual function and body image and fewer depressive symptoms than patients who had undergone mastectomy alone. Sexual dysfunction was associated with the absence of a marital partner and a higher level of education and was more frequent in the mastectomy group.