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The relationship between depression, perceived stress, fatigue and anger in clinical nurses

[Article in Korean]

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PURPOSE: The purpose of this study was to identify the relationship between depression, perceived stress, fatigue and anger in clinical nurses. **METHOD:** A descriptive survey was conducted using a convenient sample. Data was collected by questionnaires from four hundred clinical nurses who worked at a university hospital. Radloff's CES-D for depression, Cohen, Kamarck & Mermelstein's Perceived Stress Scale, VAS for Fatigue, and Spielberger's STAXI for anger were used. The data was analyzed using the Pearson correlation coefficient, students' t-test, ANOVA, and stepwise multiple regression with SPSS/WIN 12.0. **RESULT:** The depression of clinical nurses showed a significantly positive correlation to perceived stress($r=.360$, $p=.000$), mental fatigue($r=.471$, $p=.000$), physical fatigue($r=.350$, $p=.000$), trait anger($r=.370$, $p=.000$), anger-in expression($r=.231$, $p=.000$), and anger-control expression($r=.120$, $p=.016$). There was a negative correlation between depression and age($r=-.146$, $p=.003$). The mean score of depression of nurses, 26, was a very high score and 40.8% of clinical nurses were included in a depression group. The main significant predictors influencing depression of clinical nurses were mental fatigue, trait anger, perceived stress, anger-in expression, and state anger, which explained about 32.7%.

CONCLUSION: These results indicate that clinical nurses with a high degree of perceived stress, mental fatigue and anger-in expression are likely to be depressed.

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