Need for Information and Psychological Correlates among Patients with Cardiovascular Diseases

Erika Cappelletti, Marco D’Addario, Andrea Grocco, Maria Elena Maquer, Massimo Vigliorioti, Dario Monzani, Luca Pancani, Marcello Sarani, Marta Scirigno, Luca Vecchio and Patrizia Stecca

Department of Psychology, University of Milan Bicocca, Piazza dell’Aquila 3, Milan, Italy

ABSTRACT

Cardiovascular diseases (CVDs) are currently the largest single contributor to global mortality and will continue to dominate mortality trends in the future (1). Even if it is well known that modifiable factors related to lifestyle habits are major contributors to CVDs (2-4), patients generally fail to adhere correctly to medical advice or to change their unhealthy behaviors, provoking continuous hospital readmissions (7). Literature has shown that the effective provision of appropriate health information is associated with better patient adherence to medical prescription (8), it increases patients’ satisfaction, reduces levels of psychological distress, and enhances perception of control of the disease (9-11). Several studies have underlined the need for personalized healthcare, taking into account patients’ information needs and preferences, to support their proactive health management. Despite these concerns, however, little research has been conducted to determine CVD patients’ information needs from a patient perspective and the psychological factors associated with these needs. Our study aimed to explore the priorities and the correlates of information needs of CVD patients with acute myocardial infarction or acute coronary syndrome.

BACKGROUND

OBJECTIVES

TO IDENTIFY INFORMATION NEEDS IN PATIENTS AFFECTED BY CORONARY DISEASE

TO EXPLORE PSYCHOLOGICAL CORRELATES OF INFORMATION NEEDS

METHOD

PARTICIPANTS: 357 newly diagnosed patients with acute myocardial infarction or acute coronary syndrome (mean age=56.8 years; age range=35-79; SD=7.9; 85% men) completed a questionnaire which assessed:

INFORMATION NEEDS ON:
- Pharmacological Treatment
- Pathology
- Daily Life Activities
- Behavioral Habits
- Distress
- Risk And Complication

PSYCHOLOGICAL FACTORS:
- Orientations to Happiness Scale (OTH; Peterson et al. 2005)
- Brief COPE (Carver, C. S. 1997)
- Hospital Anxiety and Depression Scale (HADS; Zigmond and Snaith 1983)
- Psychological Well Being Scale (PWB; Ryff, 1989)

DATA ANALYSIS: Descriptive analyses were conducted to identify information needs; correlation analyses were conducted to explore the relationship between need for information and psychological factors. All the analysis were conducted using SPSS, version 20.

FINDINGS

Discussions

Overall, patients wanted to be extensively informed in each domain; the key information need was for a full understanding of the disease, while information about Behavioral Habits emerged as a minor theme.

Correlation between Coping Strategies, Anxiety, Orientation to Happiness, Psychological Well-being and Need for Information were found. In particular, Adaptive Coping Strategies were positively associated with the need for further information about Pathology, Anxiety was positively associated with information needs on Distress Management and Risks And Complications of the disease, whereas it was negatively associated with information about Behavioral Habits. Orientation to happiness was negatively associated with information needs on Behavioral Habits and Daily Life Activities, while Psychological Well Being was correlated with Pathology, Behavioral Habits and Distress domains.

Not all patients want and need the same information in order to understand how to adaptively manage their condition. Taking into account the information needs and the relationships between these needs and the psychological factors could enhance quality of chronic disease management, leading health-care system to move toward a patient-tailored care.

Individualized cardiac education programs are essential in achieving optimal self-management and sought health outcomes for patients with CVDs; however, to design effective education programs it is necessary to integrate patients’ perception of need with information needs to know and to understand the psychological factors are associated with each particular need. Patients’ assessment of their own needs and preferences could be integrated into routine clinical assessment in order to develop a health care practice in which the patient is considered a collaborative partner.

REFERENCES