

Quality of Life and Psychological Distress in patients with Dilated Cardiomyopathy

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Introduction

Cardiovascular diseases are the leading cause of death globally. They also cause severe problems in psychological and social aspects.

Those with dilated cardiomyopathy (DCM) have substantial limitations in daily activities; moreover the poor prognosis may result in emotional distress among patients and their families.

Objectives

To measure quality of life and psychological state in patients with dilated cardiomyopathy using standardized measures

Methods

This is an observational cross sectional study. A hundred patients with DCM without previous history of psychiatric disorder were included and compared to hundred healthy controls. physical examination, They underwent echocardiography. Quality of life was assessed using the short form 36 health survey (SF-36). Anxiety and depression were assessed with the hospital anxiety and depression (HAD) scale.

Results

Patients with DCM had a worse quality of life with lower mean SF-36 score (47.9±10.59) compared to the control group (69.9±8.1).

Conclusion

Patients with DCM have a worse quality of life as well as psychological distress (anxiety and depression symptoms) compared to healthy control with standardized references of 69.9 ± 8.1 and 17.3 ± 15.3 for SF-36 and HAD scale respectively. Patients with lower LVEF are at higher risk.



They also had worse HADS (35.2±18.73) compared to the control group (17.3 ± 15.3)

SF-36 score had strong positive correlation with left ventricular systolic function measured by ejection fraction (LVEF) with (r: 0.777, R2: 60.3%, p<0.001)

While HAD scale had a strong negative one with (r: -0.734, R2: 53.9%, p<0.001)



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