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When their relationship is good heart failure, patients and caregivers have lower anxiety and depression: an analysis with the Actor-Partner Interdependence Model

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Topic(s):
Chronic Heart Failure – Treatment

Citation:
Background. Heart Failure (HF) patients and caregiver dyads experience severe psychological issues, such as anxiety and depression that significantly influence their outcome. A variable that was found to improve outcomes in several chronic conditions is mutuality (i.e., the positive quality of the relationship between the patient and the caregiver), which includes the dimensions of Love and Affection, Shared Pleasurable Activities, Shared Values and Reciprocity. To date, no studies have looked at the influence of mutuality and its dimensions in HF patient and caregiver dyads on their anxiety and depression.

Purpose. To evaluate the influence of mutuality and its four dimensions on anxiety and depression in HF patient and caregiver dyads.

Methods. A cross-sectional design was used, and a sample of HF patient–caregiver dyads was enrolled across Italy. Both patient and caregiver mutuality was assessed using the Mutuality Scale; anxiety and depression were assessed using the Hospital Anxiety and Depression Scale. Data were analyzed using the Actor–Partner Interdependence Model (APIM), which allowed for determining the actor effect (i.e., the effect of patient or caregiver mutuality on their own anxiety and depression) and the partner effect (i.e., the effect of patient or caregiver mutuality on their partner’s anxiety and depression).

Results. A sample of 366 HF patients (mean age 71.92 years; 56% males) and their caregivers (mean age 53.81 years; 73.3% females) was enrolled. The APIM showed an actor effect of the MS total score, Love and affection and Reciprocity dimension scores on patient anxiety. In addition, the APIM showed an actor effect of Love and Affection dimension scores on patient depression. The only partner effect was that of Love and Affection dimension on caregiver depression, that is higher Love and Affection in patients determined higher depression in caregivers.

Conclusion. The assessment of mutuality in HF patient and caregiver dyads is important to formulate interventions aimed at improving patient and caregiver anxiety and depression. Caregivers whose HF patients report a high level of mutuality should receive particular attention because caregivers could be at risk for depression.