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Influence of medical and psychological counseling using remote technologies on coping with stressful and problematic situations in patients with risk factors for cardiovascular disease

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Background: Effectiveness of coping with stressful and problematic situations may be connected with ability of patients to maintain healthy lifestyle habits for a long time. Regular remote medical and psychological counseling of patients with risk factors for cardio-vascular disease (RF CVD) gives opportunities to work not only with risk factors themselves, but also with coping strategies of the person.

Purpose: To study the influence of medical and psychological counseling with the use of remote technologies on coping with stressful and problematic situations in patients with RF CVD.

Methods: The study lasted 12 months and included 140 patients with average age 53+/−17 years, 76 men (54%) and 64 women (46%), who were assigned to the group of medical and psychological counseling with the use of remote technologies (experimental, n=70) or to the matched group of standard care (control, n=70). There were no differences in gender composition, age, severity of RF CVD, concomitant diagnoses between groups. Inclusion criteria: 1) age from 18 to 80 years, 2) presence of one or more RF CVD, 3) the patient's ability to use remote technologies. Exclusion criteria: 1) having a mental illness, 2) presence of severe disease or unstable clinical status. Patients of the experimental group received primary face-to-face preventive counseling, including evaluation of coping strategies and setting of individual goals, and afterwards - regular remote consultations by telephone at least once a month, including work with RF CVD and improving coping strategies with stressful and problematic situations; got information materials via internet messengers and received sms-reminders. To conduct the study the questionnaire "Method for psychological diagnostics of coping with stressful and problematic personal situations" was used. The method allows to estimate the frequency of use of main coping strategies: "Confrontation", "Distancing", "Self-control", "Search for social support", "Taking responsibility", "Escape-avoidance", "Planning for problem solution", "Positive reappraisal". In 12 months the coping strategies were compared in two groups.

Results: Initially there were no differences in average values of standard T-scores of all major strategies of coping behavior between groups. After 12 months patients in experimental group significantly more often used such strategies as "Self-control" (p=0,001), "Taking responsibility" (p=0,01), "Planning for problem solution" (p=0,002), and "Positive reappraisal" (p=0,002); there were no significant differences in other strategies.

Conclusion: Extensive medical and psychological counseling using remote technologies (phone calls, sms, internet messengers) may be an effective tool for improving the coping strategies in patients with RF CVD. Such counselling may complement standard care and help patients to be more proactive and maintain healthy lifestyle habits for a long time.