Abstract: P445

Needs for psychological support in heart failure patients

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Heart failure (HF) is a serious health problem that affects a large population worldwide, with great impact on hospitalizations, mortality, costs and quality of life. Our purpose was to identify prevalence of: psychological stress, anxious or depressive symptomatology, associated with HF deterioration.

Material and Method
Patients over 18 years old with a HF diagnosis according to ESC guidelines criteria were included. In addition, with clinical stability six months prior to inclusion, without any HF treatment modification or hospitalizations in absence of psychological disorder diagnosis or treatment. We evaluated demographic, clinical and therapy parameters. Psychological distress level was tested through the Distress Thermometer (DT), adapted for HF patients, Anxiety/Depressive symptomatology, with Hospital Anxiety and Depression Scale (HADS). Comparative bivariate statistics were performed. We declare p value <0.05.

Results
A total of 45 outpatients participated, age 59.3 + 13.3 years, (60% men). History of: diabetes 31.1%, Hypertension 35.5%, ischemic etiology: 33.3%. 84% NYHA class I-II with optimal therapeutic levels. The psychological evaluation indicated that 59.3% of patients tend to have dysfunctional thoughts about their illness, 48.1% have experienced nervousness, 44.4% distress, 66.7% have gradually lost interest in their personal appearance, 35.7% reported perceiving a high level of psychological distress that requires assistance, and only 10.7% have high levels of depressive symptomatology.

Conclusions
Psychological evaluation on HF patients is relevant to assess and identify the main emotional, cognitive and instrumental needs that gives information about the psychological impact, as well as tools for integral management.

This type of studies in HF patients allows to identify psychological support needs, in order to design psychological-intervention programs with specific and personalized topics. These patients have high risk of anxious, depressive symptomatology and psychological distress, we recommend psychological evaluation and effective intervention.