Psihološki profil bolesnika s akutnim infarktom miokarda s elevacijom ST-segmenta koji su podvrgnuti primarnoj perkutanoj koronarnoj intervenciji

Psychological profile of patients with acute ST-segment elevation myocardial infarction who underwent primary percutaneous coronary intervention

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KLJUČNE RIJEČI: psihološki profil, akutni infarkt miokarda s elevacijom ST-segmenta, primarna perkutana koronarna intervencija.

KEYWORDS: psychological profile, acute ST-segment elevation myocardial infarction, primary percutaneous coronary intervention.

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UVOD: Psihokardiologija je dokazala povezanost tipova A (anksiozni) i D (depresivni) ličnosti s nastankom infarkta miokarda te uvodi provođenje probnog testa kardiovaskularnih bolesnika na psihijatrijske bolesti i obrnuto. Cilj istraživanja je utvrditi razlike u psihološkom profilu bolesnika s akutnim infarktom miokarda s elevacijom ST-segmenta (STEMI) podvrgnutih primarnoj perkutanoj koronarnoj intervenciji s kontrolnim skupinama: kardiološki i nekardiološki bolesnici, na temelju tri parametra: depresije, razine pesimizma/optimizma i čimbenika rizika razvoja kardiovaskularne bolesti.

PACIJENTI I METODE: U istraživanju je sudjelovalo 216 ispitanika, od toga skupina STEMI bolesnika sa 72 ispitanika te dvije kontrolne skupine (nekardiološki i kardiološki bolesnici). Za istraživanje je korišten anketni upitnik koji se sastojao od skale optimizam/pesimizam te PRIME-MD probnog testa. Podatci su testirani χ^2 testom i Pearsonovim testom korelacije.

INTRODUCTION: Psychocardiology has proven correlation between types A (anxiety) and D (depressive) personality on the occurrence of myocardial infarction and introduces the implementation of the screening cardiovascular patients on psychiatric illness and reverse. The aim of research is to determine differences in the psychological profile of patients with acute ST-segment elevation myocardial infarction (STEMI) who underwent primary percutaneous coronary intervention, cardiac and non cardiac patients on the basis of three parameters: depression, level of pessimism/optimism and risk factors of developing cardiovascular disease.

PATIENTS AND METHODS: The study included 216 patients, which were 72 of them had STEMI, and others were in two equally large groups of noncardiac and cardiac patients. Research instrument was a questionnaire that contained the scale of optimism/pessimism and the

FIGURE 1.

Distribution of depression levels within different groups of patients.

STEMI = acute ST-segment elevation myocardial infarction.

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FIGURE 2.

Frequency of subjects without depression within experimental groups.

STEMI = acute ST-segment elevation myocardial infarction.

REZULTATI: Prosječan broj čimbenika rizika značajno je viši u bolesnika sa STEMI. Bolesnici sa STEMI na skali pesimizma bilježe najviši, a na skali optimizma najniži rezultat. Najmanje depresivni su nekardiološki, a najdepresivni su kardiološki bolesnici (33% velika depresija, 7% suicidalnih) (slika 1). Utvrđena je značajna razlika među skupinama, izuzev skupina STEMI i kardiološki bolesnici (slika 2). Ne postoji korelacija između čimbenika rizika i depresivnosti, optimizma i pesimizma bez obzira na grupu ispitanika. Postoji negativna korelacija između optimizma i depresije te pozitivna između pesimizma i depresije koja je najznačajnija u skupini bolesnika sa STEMI. Postoje razlike između kardioloških bolesnika s različitim razinama depresije s obzirom na broj rizičnih čimbenika.

ZAKLJUČAK: Postoje značajne razlike u psihološkom profilu nekardioloških i bolesnika sa STEMI te nekardioloških i kardioloških bolesnika. Broj čimbenika rizika ne utječe na razinu pesimizma/optimizma. Postoje značajne razlike u broju čimbenika rizika i razine depresivnosti kod kardioloških bolesnika, dok kod ostalih skupina ne postoje. Razina pesimizma/optimizma svih skupina je u korelaciji s depresijom.

PRIME-MD screening test. Data were tested by the chi-square test and Pearson's correlation test.

RESULTS: The average number of risk factors was significantly higher in STEMI patients. STEMI patients on a scale of pessimism recorded the highest, and on the scale of optimism lowest scores. Least depressive are non cardiac, and the most depressive are cardiac patients (33% major depression, suicidal 7%) (Figure 1). There were significant differences between the groups, except for a group of STEMI and cardiac patients (Figure 2). There is a negative correlation between optimism and depression, and positive between pessimism and depression, which is the most important in group of STEMI patients. There are differences between cardiac patients with varying levels of depression due to a number of risk factors.

CONCLUSIONS: There are significant differences in the psychological profile of non cardiac and STEMI patients, non cardiac and cardiac patients. The number of risk factors does not affect the level of pessimism/optimism. There are significant differences in the number of risk factors and levels of depression in cardiac patients. The level of pessimism/optimism of all groups is correlated with depression.

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