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Impact of Low Social Support on Patients with Acute Myocardial Infarction

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Psychological stress burden and anxiety are often associated with a worse prognosis of cardiac disease and increased risk of adverse cardiac outcomes. Especially social support and the social environment have a further impact on people's mental health, their health-related quality of life and the development of diseases. During the COVID-19 pandemic, infection rate minimization measures and self-isolation were widely implemented, that might cause uncertainty and may result in psychological and physical negative consequences. However, it remains questionable to what extent different levels of social support have an additional impact on different facets of anxiety in AMI patients.

AMI patients were divided into low, medium and high social support groups using the Social Support Questionnaire. These groups were compared in terms of anxiety and depression symptoms, measured with State-Trait-Anxiety Inventory (STAI), Hospital Anxiety and Depression Scale (HADS), Illness Attitude Scale (IAS) and Beck Anxiety Inventory (BAI), using one-way analyses of variances.

112 patients were assessed for mood and anxiety symptoms after admission to the hospital due to acute myocardial infarction. Statistical analyses revealed that AMI patients with low social support showed significantly more state and trait anxiety, more physical symptoms of anxiety, increased health related anxiety, as well more symptoms of depression than the group with high social support. In addition, AMI patients with high social support showed significantly less trait anxiety and depression in comparison with AMI patients with medium social support.

This may support the hypothesis that patients with low social support are more likely to experience negative psychological facets to a greater extent and, in this regard, might be in a higher risk to experience a negative outcome of AMI. Future studies should investigate potential opportunities for improvement in social support.