

Heart attack patients using inefficient coping methods for stress?



Stress is a leading risk factor for heart disease and hypertension, which can impact a patient's quality of life. To deal with their stress, patients with a history of heart attack tend to use emotion-focused coping strategies such as eating more or drinking alcohol, while patients without a history of heart attack or heart disease often employ problem-focused coping strategies, according to a new study presented at the 8th Emirates Cardiac Society Congress held in Dubai.

Researchers in Iran collected data on 220 patients who had experienced a heart attack and 220 patients without any history of heart attack or heart disease to determine their coping method for stress. Data surveyed included demographic information, a live events questionnaire, a stress inventory, a perceived stress questionnaire and a coping inventory for stressful situations.

"We aimed to determine what kinds of coping strategies patients were using to see if there were differences between our patients who have had acute myocardial infarction and those who have not," said lead researcher Nastaran Ahmadi, PhD, of the Yazd Cardiovascular Research Centre at Shahid Sadoughi University of Medical Sciences.

It was found that patients who had a heart attack were more likely to employ emotion-focused strategies to cope with stress, while those in the control group who did not have a heart attack or heart disease were more likely to use problem-focused strategies (90.1 percent and 65.4 percent, respectively). Common types of emotion-focused coping strategies include suppressing negative thoughts or emotions, praying, eating more, drinking alcohol, blame and disclaiming instead of focusing on the actual situation of the problem. Patients who use problem-solving coping strategies use three common techniques to deal with the cause of their problem including taking control, seeking information and evaluating the pros and cons.

In particular, the questionnaire showed that negative stress was perceived by 82.2 percent of the heart attack patients who used emotion-focused strategy and by 72.1 percent of the control group who used problem-focused strategy. And 60.2 percent and 53.6 percent, respectively, had a severe high level of stress.

"Our study suggests people with higher levels of stress are more likely to use inefficient coping strategies," Ahmadi pointed out. "Perhaps problem-focused coping strategies can help myocardial infarction patients reduce the likelihood of future events."

Further research is needed to determine the health impacts of this difference in coping strategies, including an interventional study to train heart attack patients in different coping strategies for stress.

Ahmadi also cites the importance of having clinicians (including cardiologists, psychiatrists and psychologists) discuss with their patients what stress is all about and how they should handle stressful situations.

"If we can change our view about the perception of stress, then we can change our cognition process about stressful situations and make important lifestyle changes," she explained.

Source: [American College of Cardiology](#)
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