

Article: 0619

Topic: EPW02 - e-Poster Walk Session 02: Consultation Liaison Psychiatry and Psychosomatics, Oncology and Psychiatry, Pain and Treatment Options

Quality of Life and Mental Disorders in Patients After Coronary Artery Bypass Grafting

O.M.I.D. Rezaei¹, M. Mandegar², L. Fattah moghaddam³, B. Dolatshahi⁴, R. Komeilian⁵

¹Psychiatry Dept, University of Social Welfare and Rehabilitation Sciences, Tehran, Iran ; ²Department and educational Group Chief Cardiac Surgeon, Tehran University of Medical Science, Tehran, Iran ;

³Department of Psychiatric Nursing, Islamic Azad University Tehran Medical Sciences Branch, Tehran, Iran ; ⁴Psychology Dept, University of Social Welfare and Rehabilitation Sciences, Tehran, Iran ; ⁵Psychology

Dept, Islamic Azad University Science and Research Branch, Tehran, Iran

Introduction: In spite of positive somatic outcomes of Coronary artery bypass grafting for treatment coronary artery disease, psychological distresses persist or appear for the first time after the operation worsening the patient's quality of life. Research studies show the interrelationships between psychological states and quality of life after CABG.

Objectives and Aims :The purpose of this study is to examine the mental disorders, quality of life, and their relationship among patients undergoing CABG.

Methods :135 patients (101 men and 34 women) are randomly selected from the population of patients undergoing CABG at 3 medical centers in Tehran, Iran between December, 2009 and May, 2010. SCL-90-R and SF-36 are used to assess the mental disorders and quality of life, respectively. A structured interview is used to gather and investigate personal data and history of patients. Data analysis using Pearson correlation coefficient and t-tests are done.

Results:This study demonstrated that the prevalence of GSI (General Severity Index) in CABG patients is estimated to be 22.96%, (38.34% for women and 17.6% for men), Depression with 44.22% prevalence is the most prevalent mental disorder followed by sensitivity, paranoia, hostility, anxiety, obsession, somatization, phobia, and psychosis. There is a significant, inverse association between quality of life and GSI ($r=-0.4$, $P<0.01$).

Conclusions : the prevalence of psychological distress is generally high among patients after CABG and indicate importance of evaluation and treatment of psychological distresses after CABG to prevent the decline of quality of life.