Post-MI - Anxiety and Bio-Psychological Measures, in Patients under the Age of 65, A Longitudinal Study

Uri Mandelkorn^{1,2}, Tammy Sagiv-Schifter², Chaim Lotan¹, Yonah Louria¹

Cardiology Department, Hadassah Ein Kerem, Israel

Medical Psychology, Tel-Aviv Yaffo Academic College, Israel

Objectives:

Myocardial Infarction often triggers anxiety which increases Sympathetic arousal, influences the cardiovascular system and various Bio-Psychological measures. The purpose was to examine the younger Segment of patients, in order to assess the patterns of those measures among them. Understanding those patterns could increase the effectiveness of psychological interventions which in turn, could lead to better rehabilitation and outcomes.

Methods:

Post-MI Subjects (n=34) were recruited between Dec'11 and June'12, in the ICCU of Hadassah Ein Kerem Hospital. At Time1, anxiety was assessed within the first 72 hours since admission, by the STAI (State-Trait Anxiety Inventory), accompanied by a demographic questionnaire. At Time2 and Time3, one month and three months later, STAI and a medical cardiac compliance questionnaire were assessed. Medical data was supplied by medical records.

Results:

Higher levels of anxiety during Time1 correlated with longer hospitalization** and more occurrences of readmission to the hospital**. Higher anxiety levels during Time2 correlated with longer hospitalization** and less exercise*. Higher anxiety levels during Time3 correlated with less exercise** and more occurrences of re-admission to the hospital*. Increase in anxiety levels between Time1 and Time2 correlated with lower levels of adherence to medications and less exercise*. A decrease in anxiety levels correlated with participating in cardiac rehabilitation at Time3, while an increase correlated with non-participating**. (P<0.01)**(P<0.05)*

Conclusions:

Anxiety Post-MI was found as a significant psychological predictor for medical rehabilitation and outcomes. Early assessment of anxiety followed by medical psychological Interventions, during hospitalization and later on, may contribute to improvement of the rehabilitation, prevention of additional cardiac events, and to the psychological well being of the patients. Short term interventions, mainly including cognitive behavioral therapy and relaxation techniques are the treatment of choice.