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Healthy living and smart choices - A project for developing a web-based Turkish obesity treatment program

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Introduction Obesity is a major public health problem in the world and getting obesity under control is one of the most important goals of the World Health Organization. Cognitive behavioral therapy techniques are helpful for adjusting lifestyle to stay at a healthy weight range. Success of web-based programs which designed with evidence-based behavioral strategies has been proven with different studies. However, a web-based program suitable for Turkish culture and eating habits is still missing.

Objectives Primary objective of this project is to develop and test a web-based obesity behavioral treatment program in collaboration with experienced academicians from different disciplines.

Aims The aim of this project is to develop a program which will help Turkish primary care physicians in treating and tracking obesity patients.

Method The web-based program will include a 12-week-long core behavioral program. Participants will be asked to record their daily dietary intakes and automatic feedback will be given by the system. Weekly behavioral training videos will be available during the core program. As participants watch the videos and record their daily intakes, they will get instant awards such as virtual diet-coin which they will be able to spend for gifts such as low calorie recipes. One hundred obese patients (with body mass index greater than 30 kg/m²) will be recruited to evaluate the effectiveness of the program. The changes in their blood pressures, body weights and waist circumferences will be recorded.

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Depression and quality of life in hospitalised patients with congestive heart failure (CHF): A cross-sectional study from Karachi, Pakistan

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Introduction There is strong association between depression and mortality rates among patients with CHF. Despite the massive burden of cardiac disease as well as that of depression in Pakistan, there is limited data regarding the prevalence of depression in patients suffering from CHF. The aim of this study was to assess prevalence of

depression in patients with CHF and to compare the health related quality of life of depressed and non-depressed patients with CHF.

Methods A total of 1009 patients diagnosed with CHF were recruited from different public hospitals in Karachi, Pakistan. Depression was assessed at baseline using the Beck Depression Inventory (BDI) and health related quality of life was assessed using Euro Qol (EQ-5D).

Results Of the 1009 participants recruited to the study, 66.4% (n = 670) met the threshold for depression using the BDI measure. Of the depressed patients, 66.7% (n = 447) were male. Preliminary results indicate that participants who were depressed at baseline had poorer health related quality of life on EQ-5D measures as compared to those who were non-depressed (mean EQ-5D descriptive score 10.45 in depressed patients vs 7.37 in non-depressed patients and mean EQ-5D visual scale score 35.09 in depressed patients vs 52.19 in non-depressed patients).

Conclusion Considering the high prevalence of depression and its serious negative impact on quality of life of patients suffering from chronic physical illness, it is important to design and test culturally adapted psychosocial interventions to reduce depression and improve quality of life for these patients.

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Anxiety, depression, poor life-style choices, coronary event - Which causes which?

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Introduction Various risk factors for development of acute coronary syndrome (ACS) have been discovered. ACS has numerous consequences, including physical and mental health disturbances.

Aim To distinguish mental health consequences and risk factors for ACS.

Objectives To explore the interdependence between poor life-style choices (physical inactivity, cigarette smoking, unhealthy diet, alcohol consumption) and development of anxiety or depressive disorders 1 month and 6 months after ACS.

Methods Follow-up study on 120 subjects with ACS, retested after 1 and 6 months. Existence of previous or actual mental disorders were excluded in the first phase.

Instruments Mini International Neuropsychiatric Interview, questionnaire of general sociodemographic data and life-style factors, Acute Stress Disorder Interview and Clinician-administered PTSD Scale. Lipid levels and BMI were tracked.

Results After 1 month 27.5% of the subjects had acute stress disorder (ASD) and 13,8% had major depressive disorder (MDD). After 6 months, 37.5% subjects had PTSD and 27.3% had MDD. Alcohol consumption showed to be predictive for development of MDD in the second phase (P = 0.002; OR = 2.48), and physical inactivity showed to be predictive for development of comorbidity of MDD and ASD in the second phase (P = 0.036; OR = 100.00).

Conclusion Cardiovascular disorders can cause anxious & depressive disorders in frequent alcohol consumers and physically inactive subjects. Since depression, anxiety, physical inactivity, and alcohol consumption cannot only be considered as risk factors for cardiovascular disorders, but also be seen as a consequence of cardiovascular disorders, strategies for primary and secondary pre-

vention of coronary events should include a greater concern for mental health as well.

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Prevention of postoperative delirium - A prospective nurse-led intervention on surgical wards in a general hospital

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Objective Delirium is a frequent postoperative complication in older and cognitively impaired patients in general hospitals. Delirium is associated with prolonged hospital stay as well as with an increased risk of nursing home placement after discharge. We wanted to study whether the implementation of a specialized delirium nurse on a surgical ward leads to a reduction in the frequency of postoperative delirium.

Methods In an open-label study on two surgical wards of a general hospital, first the prevalence rate of postoperative delirium in patients older than 70 years was assessed (March to August 2011). During the following intervention phase (September 2011 to June 2012), a trained geriatric nurse implemented delirium-preventative measures in accordance with the Hospital Elder Life Program (HELP). The second surgical ward provided standard treatment as usual as an in-house control.

Results Overall 20.2%, 95% CI [14.6, 26.4] of patients on both wards without special intervention developed postoperative delirium. By implementing preoperative screening measures and specific interventions by a delirium nurse, the incidence of postoperative delirium was reduced to 4.9%, 95% CI [0.0, 11.5]. The interventions were validation, improving sleep quality, cognitive activation, early mobilisation, improving sensory perception and optimising food and fluid intake. Most important predictors of postoperative delirium were Mini Mental Status Exam results, age and preoperative infection.

Conclusion The establishment of a specialised delirium nurse as well as the implementation of simple preoperative care measures increased postoperative attention, cognitive activation and is associated significantly with reducing risk of postoperative delirium in older and cognitively impaired inpatients.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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Prevention, early detection and effective treatment of the psychological disorders in asthma and chronic obstructive lung disease

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Background Chronic respiratory diseases which embrace asthma and chronic obstructive pulmonary disease (COPD) are common conditions in the population. In a large number of cases, they are diagnosed very late. Statistics of deaths, especially in the case of COPD, are underestimated because morbidity and mortality can be

affected by other comorbid conditions, for example cardiovascular disease.

Objective The objective of this analysis was to find out the correlation between the psychological distress and social factors in patients with asthma and chronic obstructive lung disease.

Methods A literature analysis on this topic was performed. Asthma and COPD impair not only physical functioning of patients but also affect their psychological state. Mood disorders and cognitive function impairment are more often observed in this group than in the general population. It has been proven that the coexistence of psychological dysfunction significantly worsens the functioning of patients (affects, among others, their work, family and social lives) and has an impact on the course of the treatment of the somatic illness. First of all, patients with cognitive deficits have greater problems in applying treatment recommendations. Accordingly, it seems to be important to pay more attention to the problem of mental disorders in patients with obstructive lung diseases.

Conclusions There is a clear need for a multidisciplinary approach that will enable prevention, early detection and effective treatment of the psychological disorders in that group of patients.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV424

Beneficial effect of mindfulness based art therapy in patients with breast cancer - A randomized controlled trial

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Background Mindfulness based art therapy induces emotional relaxation in cancer patients and is a treatment known to improve psychological stability. The objective of this research was to evaluate the treatment effects of MBAT for breast cancer patients.

Methods Twenty-four breast cancer patients were selected as subjects of the study. Two groups, the MBAT group and control group with 12 patients each, were randomly assigned. The patients in the MBAT group were given 12 sessions of treatments. To measure depression and anxiety, low scales of the Personality Assessment Inventory (PAI) was used. Health-related quality of life was evaluated using the European organization for research and treatment of cancer quality of life questionnaire (EORTC-QLQ-C30). The treatment results were analyzed using Ancova and two-way repeated measures Anova.

Results The results showed that depression and anxiety decreased significantly and health-related quality of life improved significantly in the MBAT group. In the control group, however, there was no significant change.

Conclusions MBAT can be seen as an effective treatment method that improves breast cancer patients' psychological stability and quality of life. Evaluation of treatment effects using program development and large-scale research for future clinical application is needed.

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