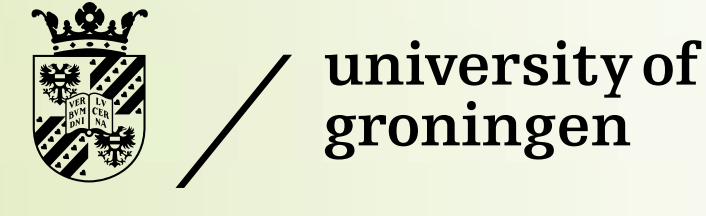


The associations between adolescent patients' self-rated physical and mental health, and their parents' mental well-being

Martina Mergescikova^{1,2}, Iveta Nagyova^{1,2}, Gabriel Kolvek^{1,3}, Daniel Klein⁴, Jaroslav Rosenberger¹, Ludmila Podracka³, Sijmen A Reijneveld⁵, Jitse P van Dijk^{1,5}



¹ Graduate School Kosice Institute for Society and Health, Faculty of Medicine, Safarik University, Kosice, Slovak Republic
² Institute of Public Health - Department of Social Medicine, Faculty of Medicine, Safarik University, Kosice, Slovak Republic
³ 1st Paediatric Department, Faculty of Medicine, Safarik University, Kosice, Slovak Republic
⁴ Institute of Mathematics, Faculty of Science, Safarik University, Kosice, Slovak Republic
⁵ Department of Community & Occupational Health, University Medical Center Groningen, University of Groningen, The Netherlands

Background and aim

End-stage renal disease (ESRD) is a chronic disease with serious consequences on the quality of life of both patients and their family members. Both patients and parents experience a variety of psychosocial strains which may have adverse effects on social and family life. The aim of this study was to assess the self-rated physical and mental health of adolescents with ESRD and to explore their relationships with their parents' well-being.

Methods

SAMPLE

All adolescents with ESRD and between 14-19 years of age (n=21) in Slovakia being treated by dialysis or after receiving kidney graft and their parents

- Adolescents: 17.33±1.49 years; 28.6% girls
- Parents: 40.38±5.54 years; 81.0% mothers

MEASURES

Adolescents:

- Sociodemographic variables: age, gender
- Treatment modality: dialysis, transplantation
- Self-rated health: Short Form Health Survey Questionnaire SF-36 (1); Physical Component Summary (PCS) ($\alpha = 0.77$) and Mental Component Summary (MCS) ($\alpha = 0.83$)

Parents:

- Distress: Parenting Stress Index, PSI (2) ($\alpha = 0.83$ to 0.96); General Health Questionnaire-12, GHQ-12 (3) ($\alpha = 0.53$ - 0.75).
- Anxiety and depression: Hospital Anxiety and Depression Scale, HADS (4) (HADS -A $\alpha = 0.48$; HADS-D $\alpha = 0.87$)

STATISTICAL ANALYSES

- Spearman correlations
- Linear regressions with the bootstrap procedure:
 - Independent variable: adolescent's self-rated health; PCS and MCS
 - Dependent variable: parent's distress, anxiety and depression
 - Controlled for: adolescent's age, gender and treatment modality (dialysis, transplantation)
- All analyses were performed with PASW Statistics 18.0.

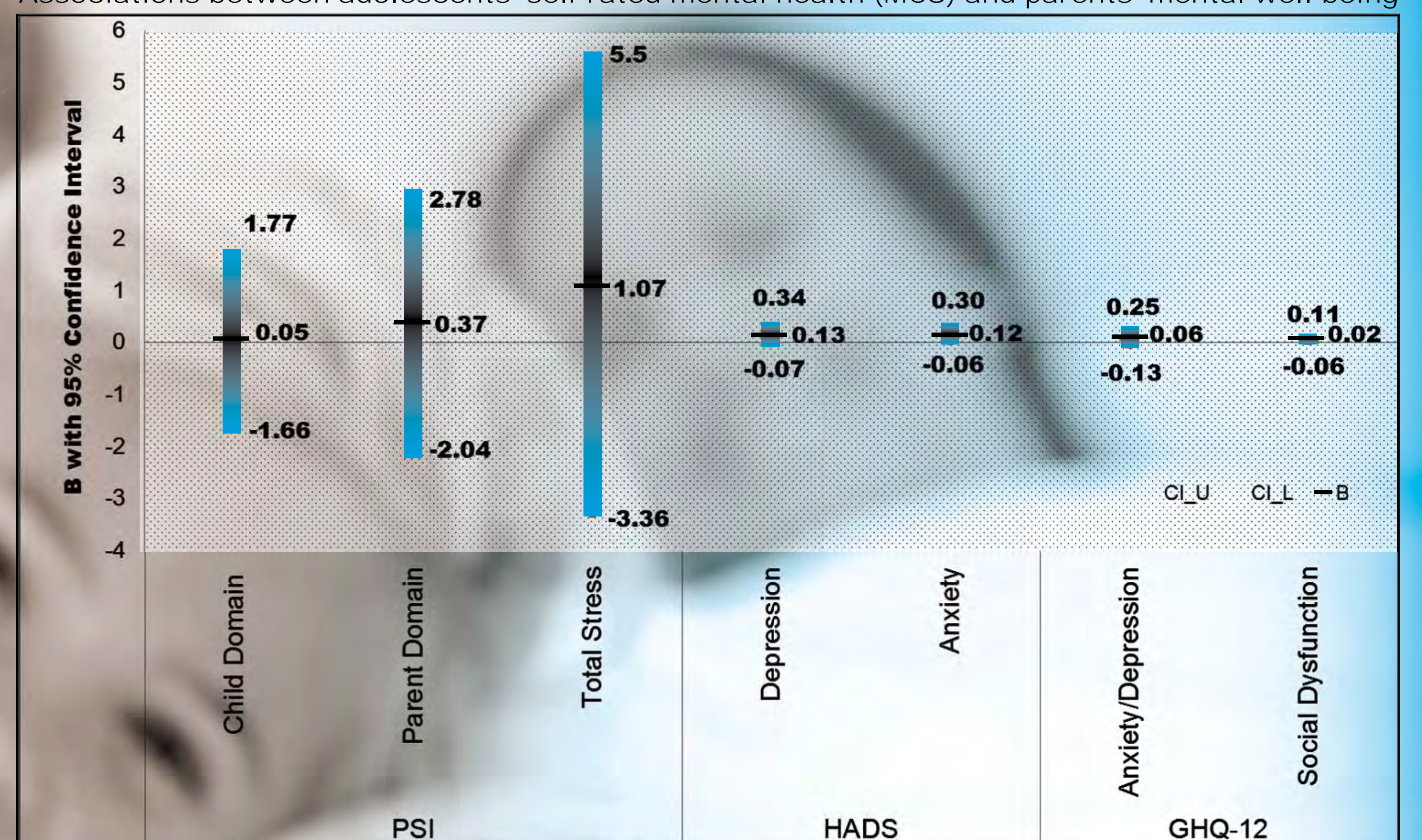
Results

Adjusted for patients' age, gender and treatment modality, patients' PCS was significantly associated with their parents' psychological distress, depression and social dysfunction (Figure 1). Patients' MCS was not associated with parents' mental well-being (Figure 2).

FIGURE 1 Associations between adolescents' self-rated physical health (PCS) and parents' mental well-being



FIGURE 2 Associations between adolescents' self-rated mental health (MCS) and parents' mental well-being



Conclusions

There is a significant association between the self-rated physical health of adolescents with ESRD and their parents' well-being. Support should thus be targeted both at adolescent ESRD patients and at their parents.

REFERENCES

1. Ware, J.E., Kosinski, M., Keller, S.D. (1994). SF-36 Physical and mental summary scales: a user's manual. Boston: The Health Institute
2. Abidin, R.R. (1995). Parenting Stress Index: Professional Manual. 3rd ed., Psychological Assessment Resources, Inc., USA
3. Goldberg D.P., Hillier V.F. (1979). A scaled version of the General Health Questionnaire. *Psychology and Medicine*, 9:139-145
4. Zigmond, A.S., Snaith, R.P. (1983). The Hospital Anxiety And Depression Scale. *Acta Psychiatrica Scandinavica* 67:361-370

CORRESPONDING ADDRESS

Martina Mergescikova MSc
 Institute of Public Health - Department of Social Medicine
 Faculty of Medicine Safarik University Trieda SNP 1, 040 11 Kosice Slovak Republic

ACKNOWLEDGEMENTS

This work was supported by the Slovak Research and Development Agency under contract No. APVV-0220-10 (80%). Furthermore, this work was partially supported by the Agency of the Slovak Ministry of the Education, Science, Research and Sport of the Slovak Republic for the Structural Funds of the EU under project No. ITMS: 26220120058 (20%).



European Journal of Public Health

Official journal of the European Public Health Association

AIMS AND SCOPE

The European Journal of Public Health (EJPH) is a multidisciplinary journal aimed at attracting contributions from epidemiology, health services research, health economics, social sciences, management sciences, ethics and law, environmental health sciences and other disciplines of relevance to public health. The journal provides a forum for discussion and debate of current international public health issues with a focus on the European Region. Bi-monthly issues contain peer-reviewed original articles, editorials, commentaries, book reviews, news, letters to the editor, announcements of events and various other features.

The EJPH is owned by the European Public Health Association, which has more than 4000 individual members throughout Europe. All members are entitled to receive the electronic version of the journal, which ensures an exceptionally large readership consisting of public health researchers, policy-makers and practitioners in all European countries.

The EJPH style and editorial policies conform to the 'Uniform requirements for manuscripts submitted to biomedical journals', as specified by the statements of the International Committee of Medical Journal Editors (www.icmje.org).

EDITOR-IN-CHIEF

Johan P. Mackenbach, Erasmus University, Medical Center, Rotterdam, The Netherlands

EDITORS

Peter Allebeck, Stockholm County Council and Karolinska Institute, Stockholm, Sweden
Martin McKee, London School of Hygiene and Tropical Medicine, London, United Kingdom
Walter Ricciardi, Catholic University, Rome, Italy

MANAGING EDITORS

Edison Manrique-Garcia, Karolinska Institute and National Institute of Public Health, Stockholm, Sweden
Emilie Agardh, Karolinska Institute, Stockholm, Sweden
Sara Sjölund, Karolinska Institute, Stockholm, Sweden

ASSOCIATE EDITORS

Renaldo Battista, Université de Montréal, Montréal, Canada
Lisa Berkman, Harvard School of Public Health, Boston, USA
Helmut Brand, University of Maastricht, The Netherlands
Aileen Clarke, University of Warwick, Coventry, United Kingdom
Eero Lahelma, University of Helsinki, Helsinki, Finland
Thierry Lang, INSERM, Toulouse, France
Reiner Leidl, Ludwig-Maximilians University, Munich, Germany
Colin Mathers, World Health Organization, Geneva, Switzerland
Mark McCarthy, University College London, London, United Kingdom

Tony McMichael, Australian National University, Canberra, Australia

Natasha Muscat, Ministry of Health of Malta, Valletta, Malta

Thomas E. Novotny, University of California, San Francisco, School of Medicine, San Francisco, California, USA

Fred Paccaud, Institut Universitaire de Médecine Sociale et Préventive, Lausanne, Switzerland

Mark Petticrew, MRC Social and Public Health Sciences Unit, Glasgow, United Kingdom

Pekka Puska, National Public Health Institute, Helsinki, Finland

Sijmen A. Reijneveld, University Medical Center Groningen, Groningen, The Netherlands

Vasilij V. Vlassov, Moscow Medical Academy, Moscow, Russia

Witold Zatonski, Cancer Center and Institute of Oncology, Warsaw, Poland

CONSULTING EDITOR FOR STATISTICS

Lennart Bodin, University Hospital, Örebro, Sweden

EDITORIAL OFFICE

Address, correspondence and queries to: Karin Guldbrandsson, Karolinska Institute, European Journal of Public Health, Department of Public Health Sciences, Norrbacka floor 5, S-17176 Stockholm, Sweden (email: ejph@phs.ki.se)

SUBMISSION OF MANUSCRIPTS

The European Journal of Public Health only accepts electronic submissions. Please go to our website (www.eurpub.oxfordjournals.org) for further information, including author instructions. In case of problems, please consult the editorial office.

EUROPEAN PUBLIC HEALTH ASSOCIATION

President: Prof. Constantino Sakellarides, National School of Public Health, Av Padre Cruz, 1649-016 Lisbon, Portugal (email: sak@ensp.unl.pt)

ISSN 1101-1262

The European Journal of Public Health was founded by Per-Gunnar Svensson, with the support of Värmland County Council. The support of Karlstad University for hosting the editorial office from 1998–2005 is gratefully acknowledged. Past editors-in-chief: Per-Gunnar Svensson (1991–1998), Martin McKee (1998–2003). Ombudsman: Professor Lennart Köhler, Nordic School of Public Health, PO box 12133, 402 42 Göteborg, Sweden, tel. +46 31 69 3976, fax +46 31 1777, email: lennart@nhv.se
Responsible under Swedish Press Law: Peter Allebeck, Stockholm, Sweden.

The European Journal of Public Health is indexed and abstracted in: Current Contents/Clinical Medicine, Current Contents/Social and Behaviour Sciences, Social Sciences Citation Index, SciSearch, Research Alert, Social Scisearch, Science Citation Index, Addiction Abstracts, EMBASE, ECHHSR, SOMED, Abstracts on Hygiene and Communicable Diseases, CINAHL, CAB HEALTH, Healthcare Standards Database, IHTA, Sociological Abstracts, SOPODA, LLBA, MEDLINE.

EUROPEAN JOURNAL OF PUBLIC HEALTH

Volume 22 Supplement 2

SUPPLEMENT

5TH EUROPEAN PUBLIC HEALTH CONFERENCE

All Inclusive Public Health

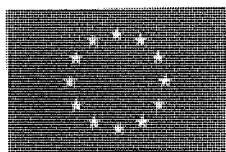
Portomaso, St. Julian's, Malta, 8–10 November 2012

ABSTRACT SUPPLEMENT

Guest editors: Julian Mamo, Dineke Zeegers Paget

CONTENTS

1. Welcome: EUPHA and ASPHER
2. Welcome: Conference chair
3. Plenary presentations: abstracts
4. Oral presentations: abstracts
5. Moderated poster sessions: abstracts
6. List of authors



This publication arises from the conference "5th European public health conference" which has received funding from the European Union in the framework of the Health Programme.



www.visitMALTA.com

Conclusions

Education, occupational class, and individual income remained all independent determinants of sickness absence. The absolute inequalities remained large from 2001 to 2011,

but relative importance changed. The results reflect also overall increase in educational level and decrease of the number of manual workers in the workforce. Increase of the importance of individual income needs more research.

M.7 QUALITY OF LIFE IN CHRONIC DISEASES

The associations between adolescent patients' self-rated physical and mental health, and their parents' mental well-being

Martina Mergesčíková

M Mergesčíková^{1,2}, I Nagyova^{1,2}, G Kolvek^{1,3}, D Klein⁴, J Rosenberger¹, L Podracká², SA Reijneveld⁵, JP van Dijk^{1,5}

¹Graduate School Kosice Institute for Society and Health, Faculty of Medicine, Safarik University, Kosice, Slovak Republic

²Institute of Public Health-Department of Social Medicine, Faculty of Medicine, Safarik University, Kosice, Slovak Republic

³1st Paediatric Department, Faculty of Medicine, Safarik University, Kosice, Slovak Republic

⁴Institute of Mathematics, Faculty of Science, Safarik University, Kosice, Slovak Republic

⁵Department of Community & Occupational Health, University Medical Center Groningen, University of Groningen, The Netherlands

Contact: martina.mergescikova@upjs.sk

Background

End-stage renal disease (ESRD), is a progressive chronic disease with serious consequences on quality of life of patients and also their family members. Both the patients and parents experience a variety of psychosocial strains which may have adverse effects on social and family life. Previous studies focused either on adolescents' or parents' health but did not evaluate the association between adolescent's physical and mental health and their parents' well-being. The aim of this study was to assess the self-rated physical and mental health of adolescents with ESRD and to explore their relationships with their parents' well-being.

Methods

The sample consisted of all adolescents with ESRD in Slovakia treated by dialysis or after receiving kidney graft; $n=21$ patients of age 14–19 years (15.97 ± 2.63 years, 28.6% girls). Medical and sociodemographic data were obtained from medical records and a structured interview. Self-rated health was measured using the Short Form Health Survey 36 (SF-36) from which the Physical and Mental Components Summary (PCS, MCS) were calculated. The adolescents' parents (age 41.14 ± 6.27 years; 81.0% mothers) completed forms for distress (PSI, GHQ-12) and anxiety and depression (HADS). Data were analysed using linear regression analyses with the bootstrap procedure.

Results

Adjusted for patients' age, gender and treatment modality, patients' PCS was significantly associated with their parents' psychological distress ($B=0.16$, 95%CI=0.01; 0.32), depression ($B=0.17$, 95%CI=0.00; 0.33) and social dysfunction ($B=0.17$, 95%CI=0.00; 0.33). Patients' MCS was not associated with parents' mental well-being.

Conclusions

There is a significant association between self-rated physical health of adolescents with ESRD and their parents' well-being. Support should thus be targeted both at adolescent ESRD patients and at their parents.

Depression and diabetes: are there any consequences on self-care?

Corina-Aurelia Zugravu

C Zugravu¹, A Baciu², D Patrascu¹, M Tarcea³, A Stoian⁴

¹Dept. of Hygiene, University of Medicine and Pharmacy Carol Davila, Bucharest, Romania

²Institute of Anthropology Francisc Reiner, Bucharest, Romania

³University of Medicine, Targu Mures

⁴Dept of Hygiene, University of Medicine, Craiova, Romania

Contact: dr_corinazugravu@yahoo.com

Background

Diabetes is a medical condition growing in number swiftly. The medical community agrees that optimal outcomes in diabetes require diligent self-management, including eating a healthy diet, exercising, and regular glucose monitoring. Unfortunately among diabetic patients depression is twice as common as compared with subjects without diabetes. Depression not only affects mood but compromises functioning as well.

Methods

In the present cross sectional study, we investigated the presence of depression and its consequences of self management of diabetes. in a representative sample of 477 diabetics, in evidence of the ambulatory services of two major hospitals from Romania, in 2011. The patients were asked to answer to a questionnaire with demographical items. Self management behaviors were evaluated by using the revised version of the Summary of Diabetes Self-Care Activities and The Patient Health Questionnaire was used to assess depressive illness. Important elements of evolution and treatment were obtained from their medical records. Data was statistically analyzed

Results

The sample was in majority formed by type 2 diabetics, average age being 53.5 (min: 18; max 85). Depression was found at 14.5% of the sample, major depression at 8.2%. Depression increased with age and was more frequent for women; only major depression correlated significantly with gender (exact sig. two sided=.036). Depressed patients were prone not to know the last value of their glycated hemoglobin. Depression (major or not) predicted an inadequate behavior regarding a minimal exercising plan (at least 30 min per day) ($U=911$, $z=-3.17$, $p=.002$, $r=-.25$). Though non statistically significant, the number of days per month in which the diet plan and the foot hygiene measures were carried out was smaller for depressive patients.

Conclusions

This study highlights suboptimal coping with self care management measures in patients with depression. These patients need support for self-management activities such as lifestyle modifications and medication adherence. Further research is needed to evaluate whether integrating depression screening and treatment into comprehensive care of diabetes could enhance self-management and patient outcomes.

Coping and its importance for quality of life in patients with multiple sclerosis

Pavol Mikula

P Mikula¹, I Nagyova¹, M Krokavcova¹, M Vitkova², J Rosenberger³, J Szilasiova⁴, Z Gdovinova³, JW Groothoff⁴, JP van Dijk⁵

¹Institute of Public Health-Department of Social Medicine, Faculty of Medicine, Safarik University, Kosice, Slovakia, Graduate School Kosice Institute for Society and Health, Safarik University, Kosice, Slovakia

²Graduate School Kosice Institute for Society and Health, Safarik University, Kosice, Slovakia

³Department of Neurology, Faculty of Medicine, Safarik University, Kosice, Slovakia

⁴Department of Community and Occupational Health, University Medical Center Groningen, University of Groningen, The Netherlands

⁵Graduate School Kosice Institute for Society and Health, Safarik University, Kosice, Slovakia, Department of Community and Occupational Health, University Medical Center Groningen, University of Groningen, The Netherlands

Contact: pavol.mikula@upjs.sk