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# **The impact of chronic diseases on patients also depends on their perception of the disease**

October 21st, 2010

What do we mean by "common sense" when we talk about a disease? What affects the ideas and beliefs that patients have of their disease? Researchers at the University of Granada have developed a test for measuring and assessing chronic patients' cognitive representation of their disease. This advance will enable the development of clinical psychological treatments much more efficient than those currently employed.

The cognitive representation of a disease is the ideas and beliefs that patients have in relation to their condition, at a given time. These ideas are based around five aspects: symptoms, causes, impact of the disease on patients' lives, way and measures for controlling the condition, time-line and progression of the disease.

Cognitive representation is said to be based on "common sense", since patients are not experts and their ideas and perception of their disease are based on their own experience, self-knowledge and other sources (social, family environment, health center, etc). The researchers state that "the idea that patients have of their disease affects their own coping and adaptation to it".

This study was conducted by **Macarena De los Santos Roig**, at the department of Social Psychology and Methodology of Behavioral Sciences of the University of Granada, and led by professor **Cristino Pérez Meléndez**.

## **155 Patients**

To carry out this study, the researchers used a sample of 155 patients with diabetes Type 1, treated at the Department of Endocrinology of the University Hospital San Cecilio, Granada. Patients were given different tests and, although the study centered on patients with diabetes, this test is intended to be applicable to any patient with a chronic disease.

The study revealed that the profile of diabetic patients reporting many symptoms, with the perception of their disease having heavy impact on their lives, low perceived controllability, and a chronic course present significantly worse physical, psychological and social functioning, as well as a poor mental health, lower vitality and worse overall (physical) health, than those who represent their disease differently.

Conversely, patients face their disease more actively, (they seek social support, apply behavioral coping and express their emotions), when they perceive that their disease has significant impact on their lives, but some control is observed. Such results confirm the reliability of the scores obtained on the scale developed in this study. Thus, its effectiveness is demonstrated.

Although other similar assessment tools already existed in other countries, they had been deficiently translated (not adapted, and presenting some deficiencies) into Spanish by national researchers. Consequently, the tool developed by the University of Granada is the most complete and reliable of all existing assessment tools.

Provided by University of Granada

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