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The Journal of Heart and Lung Transplantation

Volume 26, Issue 4, April 2007, Pages 384-389

Quality of life

Mechanical Circulatory Support as a Bridge to Heart Transplantation: What Remains? Long-term Emotional Sequelae in Patients and Spouses

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<https://doi.org/10.1016/j.healun.2007.01.025>

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Background

Implantation of a ventricular assist device (VAD) reduces short-term mortality and morbidity and provides patients with reasonable quality of life even though it may also be a long-lasting emotional burden. This study was conducted to analyze the long-time emotional consequences of VAD implantation, followed by heart transplantation in patients and spouses.

Methods

This cross-sectional study used the Impact of Event Scale-Revised (IES-R) Version,

recording avoidance, intrusion, and hyperarousal, to investigate symptoms of post-traumatic stress disorder (PTSD), and VAD-related fears and concerns. The study cohort comprised 38 patients (36 men, 2 women) and 27 spouses (26 women, 1 man), 6 to 135 months post-operatively.

Results

Seven (26%) of the 27 spouses but none of the patients met the criteria for PTSD. Patients who were operated at the early stage of our VAD program ($82.0 \hat{\pm} 31.4$ months between implantation and evaluation) were significantly more likely to have a spouse with PTSD syndromes than those whose operation took place later on ($42.1 \hat{\pm} 31.1$ months, $p = 0.007$). Patients with higher avoidance scores and a higher level of hyperarousal were significantly more often affiliated with a PTSD spouse than those with lower avoidance ($p = 0.008$) and hyperarousal scores ($p = 0.001$). Spouses displayed significantly higher scores in all IES-R dimensions, and they worried more about device-related problems (malfunctioning, pain, infection, and stroke) than the patients themselves. The noise of the device system was not a crucial issue.

Conclusion

Our study found that implantation of a VAD, followed by transplantation, does not lead to PTSD in patients but it does in their spouses in the long run. Their emotional well being deserves much closer attention.



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