



EUROPEAN
SOCIETY OF
CARDIOLOGY®

European Journal of
**Cardiovascular
Nursing**

Journal of the Council on Cardiovascular
Nursing and Allied Professions

Final Programme and Abstract Book
from the 12th Annual Spring Meeting on
Cardiovascular Nursing

Editor-in-Chief: **Tiny Jaarsma**

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**12th Annual
Spring Meeting**
on Cardiovascular Nursing

16 – 17
March 2012

Denmark
COPENHAGEN

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Förtryck: Anslut till Kallblowebbet: www.kallblowebbet.se

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outcomes. A qualitative analysis exploring the content of dyads' needs for support is ongoing.

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Measuring fatigue with the multidimensional fatigue inventory (MFI-20) in persons treated for myocardial infarction

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Purpose: During recovery from acute myocardial infarction, about 50% of the patients report fatigue. Early identification of a person experiencing fatigue could create conditions for better support in person-centred fatigue relief strategies. In clinical assessment of post-myocardial infarction fatigue, a short instrument is preferable. Therefore, the purpose of the present study was, first, to validate the Multidimensional Fatigue Inventory (MFI-20) and, second, to test whether the subscale General Fatigue could be used in screening for fatigue in persons who have been treated for myocardial infarction. Thus far, validation studies of MFI-20 including patients with coronary heart diseases have been lacking.

Method: The sample consisted of 204 consecutive patients (59 women, 145 men, mean age 64 year) who have been treated for myocardial infarction at the coronary care unit in a rural Swedish hospital. Four months after the acute heart attack, study participants answered the MFI-20. Data were analysed using Confirmatory factor analysis and Rasch-analysis.

Results: The confirmatory factor analyses revealed that the MFI five-factor model had a mediocre fit (RMSEA = 0.091; $\chi^2 = 432.079$, $p < 0.001$). However, fitting data to the Rasch model with each domain grouped as testlets gave significant item-trait interactions, supporting the five-factor model. Also, when the five MFI-20 domains were analysed separately, they worked according to the model and there was support for using at least four of five MFI subscales - General Fatigue, Physical Fatigue Mental fatigue and Reduced Activity, (PCI between 0.73–0.81) – as measures of post-myocardial infarction fatigue.

Conclusion: To conclude, the MFI-20 can be used in assessment of post - myocardial infarction fatigue. If a very

short instrument is needed, the subscale General Fatigue can be used as an initial screening instrument.

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Stroke survivors who like art have a better quality of life than those who do not

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Purpose: A sudden emergence of brain vascular damage can cause functional and psychological disability in stroke survivors (SS). Art exposure might play a significant role in preserving and/or enhancing patients' quality of life (QOL). The aim of the present study was to evaluate how previous exposure to art, as an enrichment of the socio-cultural individual's background, might have positively influenced the level of quality of life after stroke.

Methods: A cross-sectional comparative study was used to analyze 192 SS divided in two groups: group Alpha consisting of 105 patients who were interested in art; group Beta consisting of 87 patients who were not. The following clinical evaluating scales were used: Stroke Impact Scale 3.0, a stroke-specific QOL measure with 8 individual scales; the Barthel Index, to evaluate patients' functional autonomy; the SF-36, a generic instrument measuring QOL in eight domains; and the National Institute of Health Stroke Scale (NIHSS), in order to assess specific neurological functions. T-test for independent samples was used for statistical comparison of the two groups of SS.

Results: Patients were 70 years old on average and were equally distributed between men and women. Patients interested in art (group Alpha) showed better physical functioning ($p = 0.043$), better general health ($p = 0.000$), vitality ($p = 0.006$), mental health ($p = 0.000$), memory ($p = 0.000$), emotion ($p = 0.000$) and communication ($p = 0.000$) than patients who were not (group Beta). No significant differences were observed between the two groups regarding socio demographic variables, functional autonomy ($p = 0.095$) and neurological functions ($p = 0.086$).

Conclusions: Stroke survivors who were familiar with art, and expressed appreciation towards music, painting, theatre, etc, showed significantly better quality of life than patients who did not. These findings indicate that art sensitivity might have facilitating effects on clinical recovery after a stroke. Therefore, the introduction of art exposure in nursing care after stroke might contribute to SSS' quality of life improvement.