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EFFECT OF DEPRESSION AND LIFE SATISFACTION AMONG CARDIOVASCULAR PATIENTS

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ABSTRACT

uring survey of 120 cardiovascular patients between 60 males and 60 females resulted that level of depression is high and life satisfaction is low in females and readmitted patients as compare to males and first time admitted patients

Key words: cardiovascular patients, Siddiqui shah depression scale (SSDS), life satisfaction scale

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1. Introduction

Cardiovascular disease is a division of diseases that involve the heart and bloodvessels. It occurs when a blood clot blocked the blood flow to a part of heart. If the clot of blood flow completely cut of, arteries begin to die due to part of heart muscles provide. The majority people stay alive after their first heart attack. They return to their standard lives to enjoytheir dynamic movement. After a cardiovascular disordermeans that you must have to make some changes in life styles. The heart surgeon will recommend the medications and counsel about lifestyle changes according to how badly the heart isnot working and what level of heart problemcause the heart attack.

Heart collapse doesn't indicate that the heart stops working or beating. Sometimes heart failure is called congestive heart failure, which means that the heart isn't pump blood as it is required for normal blood flow. The heart keeps working, however the body must need have to blood and oxygen isn't mortalaccumulate. If the treatment of heart problem can't take at the accurate time it must be worse for life.

A lot of risk factors include for heart problems like age, gender, tobacco use and intoxication, physical laziness, extreme alcohol use, injurious diet, fatness, family record of cardiovascular disease, raise blood pressure (hypertension), raised blood sugar (diabetes), raised blood cholesterol, psychosocial factor, deficiency and low educational position.

Depression is nothing but more than just unhappiness. People who have depression may concern a loss of curiosity and glee in daily activities, foremost weight loss or gain, sleeplessness or excessive sleeping, deficiency inliveliness, failure to give attention, feelings of insignificance or excessive guilt and usual thoughts of death or suicide

Satisfaction of life is the approach of a person who evaluates his or her life and how he or she feels about where they will work in the future. It must be evaluate of well-being and may be assess in conditions of frame of mind, satisfaction with relationships with others and attained goals, concepts, and personal seeming of ability to cope with daily life. Satisfaction of life must be en calculated in relation to financial rank, education, experiences, and residence, as well as many other topics.

People who have a heart illness have more possibility to suffer from depression. After angina and heart attacks people are more closely associated with depression. Researchers have confusion about that some symptoms of depression may reduce your general physical and mental health. Depression can also raise risk of death after a heart attack. People with no record of depression happen to depressed after a heart attack or after rising heart failure.

After a heart stroke, people feel low and depress. Short-rangeway of thinking of unhappiness istypical, but it should steadilygo within a few weeks, and people come back to your normal routine and activities. Sometimes, depressed mood can prevent you from leading a normal life. Leo.Pozuelo.Md, Department of Psychiatry and Psychology

Socio-demographics, arousingstrength, and social hold were significant determinantsof Satisfaction of lifewith the CHD patients. The adults with CHD had reduced Life Satisfaction than non-CHD peers in developing country. (BEslami - 2013)

CVD risk in sparkle adults of both sexes affected due to dissatisfaction of long lasting negative effects.(M Łopuszańska - 2013).

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It must have knowledge about the studyof thecontrast the experiences of men and women. There is must berequired for work that takes masculinity and gender roles inrelationwhiledescribing the experiences of men with coronary heart disease (CHD). Emslie, C. (2005).

The **hypotheses** of the present study are:

- 1. Level of depression in cardiovascular patients would high in female as compare to male.
- 2. Level of depression would greater in readmitted patients of cardiovascular and their quality of life will be low.
- 3. In cardiovascular patients if rate of depression is high then life satisfaction will be low.

2. Methodology

2.1.Sample

120 cardiac patients with age range 35 to onwardbe taken as a sample from Faisalabad Institute of cardiology (different cardiac wards). 60 males and 60 females used as a sample. Purposive sampling technique and co relational research design were used for the current study. Cardiac patients with any other physiological diseases and taking any psychological treatment were excluded.

2.2.Measures

Siddiqui Shah Depression Scale

SSDS was initially originated in urdu by Siddiqui and Shah (1997) to monitor depression. There are 36 items in this scale. All items is rated by 0-3 rating scale. The whole score is obtained by summing all items scores. The scoresrange is 0 to 108. Low scores specify the lack or lower levels of depression and high scores specifyhigh levels of depression.

Satisfaction with Life Scale

Satisfaction with Life Scaleinvented by Diener 1985, it has five statements about life satisfaction. Anila and Ismail (2005) translated in urdu version. Responses of each items on 7 point, strongly disagree to strongly agree from which total score is obtained by summing up score. The minimum score is 5 and maximum score is 35. Low scores indicate less satisfaction and high scores indicate more satisfaction with life.

2.3.Procedure

The concerned establishment and ethical committee were contacted for informed consent to conduct the study by the researcher. It has been guaranteed to the participants in the research procedure that the information provided by them would not be exposed and used for any other purpose except the current research. The verbal descriptions was taken from the participants after debriefing the study, also keeping in mind their comfort level due to their physical condition. After data collection the participants were respected for their time and cooperation.

3. Results and Discussion

Result shows that significant alteration of depression level in male and female cardiovascular patients. Female cardiac patients attain high score in the SSDS and low score on life satisfaction scale.Rather than males acquired lower level in SSDS and life satisfaction. And readmitted patients have high level of depression and lower level of satisfaction from life rather than the first time admitted patients have low or moderate level of depression and they are temperately satisfied from their lives.

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Table 1. Descriptive Statistics

	Normal		Minimu m	Maximu m			ъ	Varianc e	Skewnes	s
						Std.				Std.
	Statistic	Statistic	Statistic	Statistic	Statistic	Error	Statistic	Statistic	Statistic	Error
Depression high then life satisfaction	120	3	1	4	2.25	.100	1.094	1.197	.191	.221

FREQUENCIES VARIABLES=Condition Depressionhigh /STATISTICS=STDDEV VARIANCE RANGE MEAN MEDIAN MODE SKEWNESS SESKEW /ORDER=ANALYSIS.

Table 2.Admitted or Readmitted

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	admitted	60	49.2	50.0	50.0
	readmitted	60	49.2	50.0	100.0
	Total	120	98.4	100.0	

Table 3. Depression high then life quality

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Satisfactory	42	34.4	35.0	35.0
	Moderate	24	19.7	20.0	55.0
	Low	36	29.5	30.0	85.0
	unsatisfactory	18	14.8	15.0	100.0
	Total	120	98.4	100.0	

FREQUENCIES VARIABLES=Condition Depressionhigh /STATISTICS=STDDEV VARIANCE RANGE MEAN MEDIAN MODE SKEWNESS SESKEW /HISTOGRAM /ORDER=ANALYSIS

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4. Conclusion

It is hypothesized that female patients have high level of depression as compare to males. The hypothesis is maintained by the data and findings that female patients are as alwaysgreatlysensible about everything that's why they depressed significantly rather than males and the male patients have not taken any type of nervousnessgreatly that's why they are considerable satisfied as relate to females

One more hypothesis of this study that readmitted patients have high level of depression as compare to firstly admitted because they treated numerous times even they loss their ability and competency to do anything. They have been assumed that their lives cannot improve as well as before that's why they have great depression and less satisfy with their lives.

It is concluded that level of depression is higher in females and readmitted patients and they have low satisfaction of their lives.

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