

CARDIAC SYMPTOMS THROUGH THE LENS OF A PSYCHODYNAMICS APPROACH: A CASE REPORT OF MYOCARDIAL INFARCTION

Sara Medved, Darko Marčinko, J. Bulum & Alma Mihaljević-Peješ

Department of Psychiatry and Psychological Medicine, University Hospital Centre Zagreb, Zagreb, Croatia
School of Medicine, University of Zagreb, Zagreb, Croatia
Department of Cardiovascular Diseases, University Hospital Centre Zagreb, Zagreb, Croatia

Despite having been in focus of psychodynamic perspectives for many decades, coronary symptoms are still a clinical challenge. We postulate a psychodynamic approach in a case of Mr. V who presented with non-ST-elevation myocardial infarction (MI) at University Hospital Centre Zagreb. Mr. V described a traumatic childhood with out-of-home foster placement with grandparents as caregivers. He often witnessed grandmothers cardiac problems. Due to academic misfortune, he started to work at a construction site from an early age, and during the interview described building his family house in depth. Recent admonition from his investor was understood as a trigger for cardiac symptoms. We analyze possible psychological etiological mechanisms observed in this patient for MI development.

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ANXIETY OF PATIENTS AT MAGNETIC RESONANCE IMAGING SCREENING

Danijela Delić¹, Dragan Babić^{1,2}, Darjan Franjić³ & Berina Hasanefendić⁴

¹*Faculty of Health Studies, University of Mostar, Mostar, Bosnia and Herzegovina*

²*Department of Psychiatry, University Clinical Hospital Mostar, Mostar, Bosnia and Herzegovina*

³*Department of Oncology, University Clinical Hospital Mostar, Mostar, Bosnia and Herzegovina*

⁴*Faculty of Health Studies, University of Sarajevo, Sarajevo, Bosnia and Herzegovina*

Introduction: Anxiety is a state of feeling helpless and insecure, a state of anticipation and concern that something bad will happen. Fear of pain and the unknown, as well as fear of screening results can increase anxiety. Severe anxiety during magnetic resonance imaging (MRI) can cause patient's movement, leading to poorer imaging and reduction in the quality of the diagnostic test. To determine the anxiety of patients before and after magnetic resonance imaging and to investigate the relationship between the tested anxiety and the socio-demographic characteristics of the patients.

Methods: The study was conducted at the Department of Radiology of the University Clinical Hospital Mostar in the period from February 1st 2020 to March 31st 2020. The study included 100 subjects who were prescribed an MRI screening at the time of the study. A socio-demographic questionnaire specifically designed for this study was used to obtain data on subjects such as gender, age, place of residence, smoking, drinking alcohol, economic status, religiosity. The Anxiety Questionnaire as a State-Trait Anxiety Inventory (STAI) was used to examine anxiety.

Results: A statistically significantly higher degree of anxiety was determined after MRI screening ($p < 0.001$). Male subjects achieved a statistically significantly higher degree of anxiety before ($p = 0.019$) and after ($p = 0.034$) MRI screening. There were no statistically significant correlations between the age of the subjects and the results achieved on the anxiety tests before and after the MRI screening.

Conclusion: Subjects who were prescribed an MRI screening have a statistically significantly higher degree of anxiety after the screening. Male subjects had a statistically significantly higher degree of anxiety on MRI screening.

Key words: anxiety - magnetic resonance

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THE ROLE OF FAMILY PHYSICIANS IN THE PREVENTION AND EARLY DETECTION OF CANCER IN HERZEGOVINA-NERETVA AND WEST-HERZEGOVINA CANTON

Inga Marijanović, Marija Kraljević & Teo Buhovac

Oncology Clinic, University Clinical Hospital Mostar, Mostar, Bosnia and Herzegovina

Background: This study aimed to investigate and analyze the role of family physicians (FPs) in counseling and encouraging early cancer prevention, their perception of value systems towards health and disease

(especially malignant diseases), knowledge and experience with the national and local cancer early detection program.

Subjects and methods: A cross-sectional observational study included 38 general practitioners (GPs)/FPs from nine municipalities in the Hercegovina-Neretva and West Herzegovina canton. Data were collected by using an Individual questionnaire for all GPs/FPs which was prepared according to the Questionnaire for family physicians on implementing the Cancer Control Program, which is used in Croatia.

Results: Statistical analysis showed that most FPs carried out activities on primary cancer prevention (educating patients about smoking, alcohol, diet, physical activity, cancer education, and screening). The majority of respondents stated that it was not profitable to do screening for lung cancer and stomach cancer. Most FPs (73.7%) recommended mammography to women individually, sporadically, according to individual risk assessment.

Conclusions: The scientific contribution and the results of this work can be applied in practice in local communities. Given its position in the health system, ongoing contact with the population that elected it, and its impact on the local community in which it operates, FP plays an important role in the prevention of disease. Integration of preventive activities into the daily work of the doctor plays the most important role in achieving excellent results. Family medicine is primarily focused on primary and secondary prevention, which is carried out through a continuous approach and long-term management of patients.

Key words: neoplasms - preventive medicine - physicians - family

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INFORMED PATIENT IS SATISFIED PATIENT - QUALITATIVE STUDY OF PATIENTS' EXPERIENCE AFTER TOTAL HIP ARTHROPLASTY

Marko Milić¹, Martin Nonković¹, Antea Buterin¹, Šime Devčić² & Ksenija Vitale³

¹*Special hospital for orthopedics Biograd na Moru, Biograd na Moru, Croatia*

²*Clinical Hospital Centre Split, Department of Orthopedics and traumatology, Split, Croatia*

³*School of Medicine, Andrija Stampar Teaching Institute of Public Health, University of Zagreb, Zagreb, Croatia*

Background: Total hip arthroplasty is “gold standard” in surgical treatment of hip osteoarthritis but we still lack quality information on patients' perspective. Preoperative narrative approach as instrument of patient-centered paradigm that provide detailed information tailored to the patients' needs, might give patient control over the whole process and better outcomes. The aim of this article is to explore the lived experience of patients from onset of disease to final treatment.

Subjects and methods: This is a qualitative study using direct content analysis. Data were collected through semi-structured interviews with 33 patients who undergone total hip arthroplasty in Special hospital for orthopedics in Biograd na Moru, Croatia, 6 to 9 months after surgery. Interviews were coded and organized to themes.

Results: Three main themes emerged and all themes were closely related to information available: 1) Pre-operation information (information about disease and coping with it, pain management, exercise for muscle and joint function maintenance), 2) Information about operation and technical information (waiting list transparency, type of implant, possible complications and risks), 3) After operation information (early rehabilitation, stationary rehabilitation, quality of life after operation).

Conclusion: Our findings reveal that patients experience lack of information prior to referral to our hospital. Involving patients in the process through good communication with doctor and providing extensive information on what to expect before and after surgery, and how surgery will affect quality of life, make them feel that they progress better. Identifying hidden barriers and enablers might help in patients' healing process. Our results indicate that preoperative narrative approach was a worthy time investment that contributed to patient general satisfaction.

Key words: patient-centered care - total hip arthroplasty - direct content analysis - narrative approach - patients' satisfaction

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