


Sinergija empatije zdravstvenih djelatnika i rezilijencije kardiovaskularnih bolesnika

The Synergy of the Empathy of Healthcare Professionals and the Resilience of Cardiovascular Patients

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SAŽETAK: *Uvod:* Psihokardiologija je interdisciplinarno područje koje povezuje psihologiju i kardiologiju kako bi osigurala cjelovitu skrb bolesnicima s kardiovaskularnim (KV) bolestima. Psihološki čimbenici, poput stresa i depresije, znatno utječu na tijek ovih bolesti, dok su empatija i rezilijencija ključni u poboljšanju ishoda liječenja.

Metode: Proveden je sustavan pregled literature u bazama podataka PubMed i Google Scholar za razdoblje od 2011. do 2023. godine. Analizirana su istraživanja koja procjenjuju utjecaj empatije i rezilijencije na zdravstvene ishode KV bolesnika te evaluiraju intervencije usmjerene na razvoj ovakvih osobina. Kriteriji uključivanja obuhvatili su kvantitativna i kvalitativna istraživanja koja prate dugoročne ishode terapija bolnički liječenih pacijenata.

Rezultati: Empatičan pristup u kardiološkoj skrbi povezan je s višom stopom pridržavanja terapijskih uputa i smanjenjem hospitalizacija. Bolesnici koji su osjetili empatiju zdravstvenih djelatnika imali su 25 % višu stopu pridržavanja terapije i 40 % manje ponovnih hospitalizacija unutar godine dana. Rezilijencija je povezana s boljom prilagodbom bolesnika na kroničnu bolest, što smanjuje stres i potiče zdravije životne odluke. Intervencije, poput edukacije i podrške, znatno unaprjeđuju ove osobine, čime se smanjuje rizik od komplikacija i poboljšava oporavak.

Zaključak: Empatija i rezilijencija imaju ključne uloge u skrbi za bolesnike s KV bolestima, pozitivno utječući na njihove psihološke i tjelesne ishode. Uključivanje programa za jačanje empatije u zdravstvenih djelatnika i rezilijencije kod bolesnika može unaprijediti kvalitetu liječenja i ukupnu dobrobit KV bolesnika.

SUMMARY: *Introduction:* Psychocardiology is an interdisciplinary field that connects psychology and cardiology in order to provide comprehensive care for patients with cardiovascular (CV) diseases. Psychological factors such as stress and depression significantly influence the progression of these diseases, while empathy and resilience play a crucial role in improving treatment outcomes.

Methods: A systematic literature review was conducted using the PubMed and Google Scholar databases for the period between 2011 and 2023. Studies assessing the impact of empathy and resilience on health outcomes in CV patients were analyzed, as well as studies evaluating interventions aimed at developing these traits. Inclusion criteria encompassed both quantitative and qualitative studies that tracked long-term treatment outcomes in hospitalized patients.

Results: An empathetic approach in cardiological care was associated with higher adherence rates to therapeutic recommendations and reduced hospitalizations. Patients who experienced empathy from healthcare professionals had a 25% higher adherence rate to treatment and 40% fewer hospital readmissions within a year. Resilience was linked to better patient adaptation to chronic illness, reducing stress and promoting healthier lifestyle choices. Interventions such as education and support significantly enhanced these traits, thereby lowering the risk of complications and improving recovery.

Conclusion: Empathy and resilience play key roles in the care of CV patients, positively influencing their psychological and physical outcomes. Implementing programs to strengthen the empathy of healthcare professionals and the resilience of patients can improve treatment quality and overall well-being in CV patients.

KLJUČNE RIJEČI: psihokardiologija, empatija, rezilijencija, skrb za bolesnike.

KEYWORDS: psychocardiology, empathy, resilience, patient care.

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Uvod

Psihokardiologija je multidisciplinarno područje koje povezuje psihologiju i kardiologiju, sa svrhom pružanja sveobuhvatne skrbi bolesnicima s kardiovaskularnim (KV) bolestima.¹ Psihološki čimbenici, poput stresa, anksioznosti i depresije, često imaju znatan utjecaj na razvoj i ishod KV bolesti.² Bolesnici s kroničnim bolestima srca često pate od depresije, dok je dugotrajni stres povezan s povišenim arterijskim tlakom (AT) i povećanim rizikom od akutnog infarkta miokarda (AIM).³ Takve povezanosti naglašavaju važnost psihološkoga zdravlja u kardiološkom liječenju.

Empatija i rezilijencija ključni su čimbenici u skrbi za bolesnike s KV bolestima, osobito unutar područja psihokardiologije. Ovakvi koncepti pridonose razumijevanju i pristupu bolesnicima ne samo s tjelesnog nego i s emocionalnog aspekta, što omogućuje cjelovitu brigu o zdravlju. Empatija se odnosi na sposobnost razumijevanja i dijeljenja emocija drugih, a u kontekstu skrbi za KV bolesnike, ona pomaže u stvaranju povezanosti između medicinskog osoblja i bolesnika.⁴ Kroz empatičan pristup bolesnici se osjećaju shvaćeno, prihvaćeno i emocionalno podržano, što smanjuje njihov psihološki stres i pridonosi oporavku. Kada zdravstveni djelatnici pokazuju empatiju, dolazi do poboljšanja komunikacije, što ne samo da umanjuje strah i tjeskobu bolesnika nego pozitivno utječe i na njihovu motivaciju za poštivanje terapijskih planova.⁵ Bolja komunikacija omogućuje bolesnicima da se aktivnije uključe u vlastito liječenje i oporavak. Rezilijencija, kao sposobnost prilagodbe stresu, traumama i izazovima, važna je u kontekstu kroničnih KV bolesti. Ova im prilagodba omogućuje da lakše prebrode tjelesne i emocionalne poteškoće koje prate bolest.^{6,7} Osnaženi bolesnici, koji razvijaju sposobnost suočavanja s izazovima, imaju i bolju prognozu. Osobe koje su otpornije na stres i emocionalne izazove imaju tendenciju donositi zdravije životne odluke, održavati stabilnije emocionalno stanje i učinkovitije se pridržavati medicinskih preporuka.⁸

Unutar područja psihokardiologije, empatija i rezilijencija komplementarni su koncepti koji međusobno djeluju u svrhu pružanja cjelovite skrbi. Razvijanje ovih osobina u bolesnika i medicinskog osoblja može znatno poboljšati ishode liječenja, smanjiti razinu stresa te dugoročno unaprijediti kvalitetu života KV bolesnika. Jačanje empatije zdravstvenih djelatnika može se postići edukacijom i treningom fokusiranim na emocionalnu inteligenciju i komunikacijske vještine. Programi koji uključuju simulacije i refleksivnu praksu pomažu u razvijanju dubljeg razumijevanja potreba bolesnika. Suradnja među timovima zdravstvenih djelatnika potiče dijeljenje iskustava i jača empatiju. Osim toga, programi podrške i supervizije nude emocionalnu pomoć, što povećava emocionalnu otpornost zdravstvenih djelatnika.⁹ Rezilijencija bolesnika može se poboljšati informiranjem o KV bolestima i tehnikama upravljanja stresom, što im povećava kontrolu nad zdravljem. Psihološka podrška i grupe podrške omogućuju bolesnicima suočavanje s emocionalnim izazovima. Učenje tehnika upravljanja stresom, kao što su meditacija, dodatno poboljšava emocionalnu dobrobit. Postavljanje realnih ciljeva za zdravlje povećava motivaciju, dok socijalna podrška iz obitelji i prijatelja olakšava prevladavanje izazova povezanih sa zdravljem.

Svrha je ovog rada analizirati ulogu empatije i rezilijencije u skrbi za bolesnike s KV bolestima, uzimajući u obzir najnovije spoznaje iz relevantnih istraživanja. Analizom postojećih studija istražiti će se kako emocionalna podrška i razu-

Introduction

Psychocardiology is a multidisciplinary field that integrates psychology and cardiology in order to provide comprehensive care for patients with cardiovascular (CV) diseases¹. Psychological factors such as stress, anxiety, and depression often have a significant impact on the development and outcomes of CV diseases². Patients with chronic heart conditions frequently suffer from depression, while prolonged stress is associated with elevated arterial blood pressure (BP) and an increased risk of acute myocardial infarction (AMI)³. These associations highlight the importance of psychological well-being in cardiological treatment.

Empathy and resilience are key factors in the care of patients with CV diseases, particularly within the realm of psychocardiology. These concepts facilitate understanding and approaching patients not only from a physical but also from an emotional perspective, enabling holistic health care. Empathy refers to the ability to understand and share the emotions of others, and in the context of CV patient care it helps build a connection between medical staff and patients⁴. Through an empathetic approach, patients feel understood, accepted, and emotionally supported, which reduces their psychological stress and aids recovery. When healthcare professionals demonstrate empathy, communication improves, which not only alleviates fear and anxiety in patients but also positively influences their motivation to adhere to therapeutic plans⁵. Improved communication enables patients to take a more active role in their own treatment and recovery. Resilience, as the ability to adapt to stress, trauma, and challenges, is significant in the context of chronic CV diseases. This adaptability allows patients to better navigate the physical and emotional difficulties associated with their condition^{6,7}. Empowered patients who develop coping mechanisms tend to have better prognoses. Those more resistant to stress and emotional challenges are inclined to make healthier lifestyle choices, maintain a more stable emotional state, and adhere more effectively to medical recommendations⁸.

Within the field of psychocardiology, empathy and resilience are complementary concepts that work together in providing holistic care. Enhancing these traits in both patients and medical professionals can significantly improve treatment outcomes, reduce stress levels, and ultimately enhance the quality of life for CV patients. Strengthening the empathy of healthcare professionals can be achieved through education and training focused on emotional intelligence and communication skills. Programs incorporating simulations and reflective practice help foster a deeper understanding of patient needs. Collaboration among healthcare teams encourages experience sharing and strengthens empathy. Additionally, support programs and supervision offer emotional assistance, enhancing the emotional resilience of healthcare workers⁹. The resilience of patients can be improved through education on CV diseases and stress management techniques, empowering them to take control of their health. Psychological support and peer support groups help patients cope with emotional challenges. Learning stress management techniques such as meditation further enhances emotional well-being. Setting realistic health goals increases motivation, while social support from family and friends facilitates overcoming health-related challenges.

The aim of this paper is to analyze the role of empathy and resilience in the care of patients with cardiovascular (CV) diseases, considering the latest insights from relevant re-

mijevanje medicinskog osoblja mogu dovesti do smanjenja stresa u bolesnika te time pozitivno utjecati na njihove ishode liječenja. Također će se istražiti kako jačanje rezilijencije u KV bolesnika može povećati njihovu sposobnost da se prilagode izazovima koji proizlaze iz kroničnih zdravstvenih stanja, smanjujući rizik od emocionalnih kriza i poboljšavajući opće zdravstvene ishode.

Materijali i metode

Ovaj se rad temelji na sustavnom pregledu relevantne literature iz područja psihokardiologije, s posebnim naglaskom na ulogu empatije i rezilijencije u liječenju KV bolesnika. Pretražene su baze podataka *PubMed* i *Google Scholar*, a u obzir su uzeta istraživanja objavljena od 2011. do 2023. godine. Ključne riječi uporabljene u pretraživanju uključivale su ove: empatija i kardiovaskularne bolesti, rezilijencija i oporavak srčanih bolesnika, emocionalna podrška i terapijski ishodi, psihološke intervencije u kardiološkoj rehabilitaciji, pridržavanje terapije i psihološki čimbenici te mentalno zdravlje KV bolesnika.

Ukupno su identificirana 142 istraživanja, od kojih je u prikaz uključena 21 najrelevantnijih. Odabrana se istraživanja temelje na kliničkim uzorcima bolesnika s AIM-om ili kroničnim KV bolestima, omogućujući primjenjivost rezultata na dugoročnu zdravstvenu skrb. Uključena su longitudinalna istraživanja koje prate bolesnike od šest mjeseci do godine dana, omogućujući analizu dugoročnih učinaka empatije na pridržavanje terapije i mentalno zdravlje. Veći uzorci ispitanika od 100 do više od 5000 osiguravaju statističku snagu i pouzdanost rezultata. Proučeni su i psihološki čimbenici, poput empatije i rezilijencije, koji utječu na anksioznost, depresiju i emocionalnu podršku. Također su uključene intervencijska istraživanja koje ispituju učinke psiholoških terapija, kao što su kognitivno-bihevioralne terapije i *mindfulness*, te istraživanja iz Hrvatske i Bosne i Hercegovine kako bi se osigurao uvid u lokalne izazove i mogućnosti primjene psihološke skrbi.

Rezultati

EMPATIJA U ZDRAVSTVENOJ SKRBI ZA BOLESNIKE S KARDIOVASKULARNIM BOLESTIMA

Empatija je ključna komponenta kvalitetne zdravstvene skrbi za KV bolesnike jer omogućuje zdravstvenim djelatnicima bolje razumijevanje emocionalnih, psiholoških i tjelesnih potreba pacijenata.

Kim *i sur.* proveli su istraživanje u 800 bolesnika liječenih zbog AIM-a. Prosječna dob ispitanika bila je 62 godine, uz omjer muškaraca i žena 3 : 2. Bolesnici su praćeni tijekom jedne godine nakon otpusta iz bolnice da bi se procijenila stopa pridržavanja terapijskih preporuka. Rezultati su pokazali da su bolesnici koji su doživjeli empatičan pristup liječnika i medicinskih sestara imali 25 % višu stopu pridržavanja terapijskih preporuka, uključujući uzimanje lijekova i prilagodbu životnoga stila. Empatija medicinskog osoblja znatno je smanjila razinu anksioznosti u bolesnika, čime su olakšani proces rehabilitacije i poboljšana kvaliteta života.¹⁰

Johnston *i sur.* analizirali su 100 bolesnika hospitaliziranih nakon AIM-a kako bi ispitali važnost emocionalne podrške u rehabilitaciji. Prosječna je dob ispitanika bila 63 godine, s omjerom muškaraca i žena 3 : 2. Većina je ispitanika imala

search. By reviewing existing studies, this paper will examine how emotional support and understanding from medical professionals can reduce patient stress and positively influence treatment outcomes. Additionally, it will explore how strengthening resilience in CV patients can enhance their ability to adapt to challenges arising from chronic health conditions, thereby reducing the risk of emotional crises and improving overall health outcomes.

Materials and Methods

This study is based on a systematic review of relevant literature in the field of psychocardiology, with a particular focus on the role of empathy and resilience in the treatment of CV patients. The PubMed and Google Scholar databases were searched for studies published between 2011 and 2023. The keywords used in the search included: *empathy and cardiovascular diseases, resilience and recovery in cardiac patients, emotional support and therapeutic outcomes, psychological interventions in cardiac rehabilitation, therapy adherence and psychological factors, and mental health in CV patients.*

A total of 142 studies were identified, of which the 21 most relevant were included in the review. The selected studies are based on clinical samples of patients with AMI or chronic CV diseases, ensuring the applicability of the findings to long-term healthcare. Longitudinal studies following patients for six months to one year were included, allowing for an analysis of the long-term effects of empathy on therapy adherence and mental health. Larger sample sizes, ranging from 100 to over 5,000 participants, provided statistical power and reliability to the results. Psychological factors such as empathy and resilience, which influence anxiety, depression, and emotional support, were examined. Additionally, interventional studies assessing the effects of psychological therapies, such as cognitive-behavioral therapy and mindfulness, were also included. Research from Croatia and Bosnia and Herzegovina was also considered in order to provide insight into local challenges and the potential application of psychological care.

Results

EMPATHY IN HEALTHCARE FOR CARDIOVASCULAR PATIENTS

Empathy is a key component of high-quality healthcare for CV patients, as it enables healthcare professionals to better understand the emotional, psychological, and physical needs of their patients.

Kim *et al.* conducted a study on 800 patients treated for AMI. The average age of participants was 62 years, with a male-to-female ratio of 3:2. Patients were followed for one year after hospital discharge to assess their adherence to therapeutic recommendations. The results showed that patients who experienced an empathetic approach from doctors and nurses had a 25% higher adherence rate to therapeutic recommendations, including medication compliance and lifestyle adjustments. Empathy from medical staff significantly reduced anxiety levels in patients, facilitating the rehabilitation process and improving quality of life.¹⁰

Johnston *et al.* analyzed 100 patients hospitalized after AMI to examine the importance of emotional support in rehabilitation. The average age of participants was 63 years, with a

srednju stručnu spremu (65%), dok je 10% njih imalo osnovno, a 25% višu stručnu spremu. Bolesnici su praćeni šest tjedana nakon otpusta iz bolnice, a analiza je pokazala da su oni koji su imali kontinuiranu emocionalnu podršku medicinskog osoblja imali 40% manje hospitalizacija u usporedbi s onima koji su osjećali manjak empatije. Osjećaj da su slušani, razumljeni i podržani smanjuje psihološki stres u bolesnika, što je bilo povezano s boljim zdravstvenim ishodima.¹¹

Wu *i sur.* istraživali su odnos između empatične komunikacije i pridržavanja zdravih životnih navika, poput prehrane i tjelesne aktivnosti, u KV bolesnika. Istraživanje je uključilo 3289 bolesnika, od kojih je 520 bilo hospitalizirano zbog različitih KV komplikacija. Prosječna dob sudionika bila je 61 godina, s jednakim omjerom muškaraca i žena. Ispitanici su praćeni šest mjeseci nakon otpusta iz bolnice, a rezultati su pokazali da su bolesnici koji su osjećali emocionalnu podršku medicinskog osoblja imali 33% veću vjerojatnost da će dosljedno slijediti preporuke vezane za dijetu, prestanak pušenja i redovitu tjelesnu aktivnost, u usporedbi s onima koji su osjećali manjak emocionalne podrške.¹²

Rao *i sur.* analizirali su 5908 bolesnika rehabilitiranih nakon AIM-a, s prosječnom dobi od 61 godine i omjerom muškaraca i žena 4:1. Većina je ispitanika imala srednju stručnu spremu. Bolesnici su praćeni šest mjeseci nakon završetka rehabilitacije, a istraživanje je pokazalo da su pacijenti koji su doživljavali visoku razinu emocionalne podrške imali mnogo manje simptoma anksioznosti i depresivnosti šest mjeseci nakon KV događaja.¹³

REZILIJENCIJA KAO ZAŠTITNI ČIMBENIK U LIJEČENJU

Razvijena rezilijencija omogućuje bolesnicima da lakše upravljaju stresnim situacijama i ostanu fokusirani na rješenja umjesto na probleme.

Plüss *i sur.* proučavali su 500 bolesnika s kroničnim KV bolestima te su otkrili da oni koji sudjeluju u programima jačanja rezilijencije imaju 30% niži rizik od ponovnog infarkta miokarda unutar pet godina. Ovo je istraživanje istaknulo važnost intervencija koje pomažu bolesnicima da razviju strategije suočavanja sa stresom i dugotrajnim tjelesnim i psihološkim izazovima.¹⁴

Najčešće intervencije za jačanje rezilijencije KV bolesnika uključuju kognitivno-bihevioralne intervencije¹⁵, *mindfulness*¹⁶, grupne terapije¹⁷ i tjelesnu aktivnost¹⁸. Rao *i sur.* prikazali su rezultate bolesnika koji su sudjelovali u šestomjesečnom programu koji je uključivao *mindfulness* i kognitivno-bihevioralne tehnike suočavanja sa stresom, imali su smanjenje simptoma anksioznosti za 35% u usporedbi s kontrolnom grupom. Taj je program uključivao vježbe svjesnog disanja, progresivne relaksacije, kao i promjene negativnih misaonih obrazaca koji često prate kronične bolesti. Autori su zaključili da su bolesnici razvili bolju emocionalnu regulaciju, što je rezultiralo boljim psihološkim stanjem i većom kontrolom nad svojim srčanim stanjem.¹³ Wu *i sur.* istraživali su učinke grupne terapije usmjerene na jačanje rezilijencije u 520 bolesnika s KV bolestima. Grupa je bila strukturirana oko rasprava o strategijama suočavanja, poticanju pozitivnog mišljenja i jačanju osjećaja kontrole nad vlastitim zdravljem. Istraživanje je dokazalo da su bolesnici koji su sudjelovali u grupnim terapijama imali 28% manje simptoma depresivnosti i 20% nižu stopu ponovnih infarkta miokarda.¹²

male-to-female ratio of 3:2. Most participants had a secondary education (65%), while 10% had primary and 25% had higher education. Patients were followed for six weeks post-discharge, and the analysis showed that those who received continuous emotional support from medical staff had 40% fewer hospitalizations compared with those who reported a lack of empathy. The sense of being heard, understood, and supported reduced psychological stress, which was linked to better health outcomes.¹¹

Wu *et al.* investigated the relationship between empathetic communication and adherence to healthy lifestyle habits, such as diet and physical activity, in CV patients. The study included 3,289 patients, of whom 520 were hospitalized for various CV complications. The average age of participants was 61 years, with an equal male-to-female ratio. Patients were followed for six months after discharge, and the results showed that those who reported emotional support from medical staff were 33% more likely to consistently follow recommendations related to diet, smoking cessation, and regular physical activity compared with those who lacked emotional support.¹²

Rao *et al.* analyzed 5,908 patients rehabilitated after AMI, with an average age of 61 years and a male-to-female ratio of 4:1. Most participants had a secondary education. Patients were followed for six months after completing rehabilitation, and the study found that those who experienced high levels of emotional support had significantly lower symptoms of anxiety and depression six months after their CV event.¹³

RESILIENCE AS A PROTECTIVE FACTOR IN TREATMENT

Developing resilience enables patients to manage stressful situations more effectively and remain solution-focused rather than problem-focused.

Plüss *et al.* studied 500 patients with chronic CV diseases and found that those participating in resilience-strengthening programs had a 30% lower risk of recurrent myocardial infarction within five years. This study highlighted the importance of interventions that help patients develop coping strategies for stress and long-term physical and psychological challenges.¹⁴

The most common interventions for enhancing resilience in CV patients include cognitive-behavioral interventions¹⁵, *mindfulness*¹⁶, group therapy¹⁷, and physical activity¹⁸. Rao *et al.* reported that patients who participated in a six-month program incorporating *mindfulness* and cognitive-behavioral stress management techniques experienced a 35% reduction in anxiety symptoms compared with the control group. This program included *mindful* breathing exercises, progressive relaxation, and reframing negative thought patterns commonly associated with chronic illnesses. The authors concluded that patients developed better emotional regulation, leading to improved psychological well-being and greater control over their cardiac condition.¹³ Wu *et al.* investigated the effects of resilience-focused group therapy in 520 CV patients. The group sessions were structured around discussions on coping strategies, fostering positive thinking, and strengthening a sense of control over one's health. The study found that patients who participated in group therapy had 28% fewer symptoms of depression and a 20% lower recurrence rate of myocardial infarction.¹²

Iskustva iz Hrvatske i Bosne i Hercegovine

U kontekstu sinergije empatije zdravstvenih djelatnika i rezilijencije pacijenata kombinacija psiholoških resursa (kao što su optimizam i osjećaj svrhovitosti) s pružanjem emocionalne podrške i psihološke skrbi stvara holistički pristup u optimizaciji zdravstvene skrbi KV bolesnika.

Kruhek Leontić ističe važnost zaštitnih psiholoških čimbenika za KV bolesti, uključujući optimizam, zahvalnost i otpornost, koji mogu pozitivno utjecati na zdravlje srca. Zdravstveni djelatnici koji pružaju emocionalnu podršku i potiču pozitivna psihološka stanja mogu ojačati rezilijenciju bolesnika, što pridonosi boljoj optimizaciji zdravstvene skrbi. Osnaživanje zaštitnih čimbenika, poput optimizma i duhovne dobrobiti, povezano je s poboljšanjem zdravstvenih ishoda, što implicira da empatija zdravstvenih djelatnika može pozitivno utjecati na psihičku dobrobit i sposobnost oporavka¹⁹.

Tuzla *i sur.* istraživali su psihološke probleme KV bolesnika nakon AIM-a i važnost psihološke skrbi u sklopu programa KV rehabilitacije. Pružanjem cjelovite psihološke podrške, uključujući smanjenje anksioznosti i depresivnosti, može se poboljšati oporavak. Uloga zdravstvenih djelatnika u pružanju empatije i emocionalne potpore postaje ključna u procesu smanjenja psiholoških simptoma i u poticanju pacijentove rezilijencije. Zdravstveni djelatnici koji prepoznaju emocionalne izazove bolesnika i odgovaraju na njih s pažnjom i razumijevanjem mogu znatno poboljšati kvalitetu oporavka i smanjiti rizik od ponovljenih KV događaja²⁰.

Prema istraživanju Mašića *i sur.*, psihosocijalni čimbenici jedan su od važnih preventabilnih čimbenika rizika za koronarnu bolest srca (KBS), što naglašava važnost empatije zdravstvenih djelatnika u smanjenju stresa i u pružanju psihološke podrške KV bolesnicima. Usto, istraživanje je potvrdilo da promjena životnoga stila i kontrola čimbenika rizika ima ključnu ulogu u primarnoj prevenciji, pri čemu empatični zdravstveni djelatnici mogu znatno pridonijeti motivaciji za pridržavanje terapije i usvajanje zdravijih navika. Nadalje, istraživanje ističe da liječnici primarne zdravstvene zaštite trebaju imati aktivnu ulogu u procjeni čimbenika rizika za KBS-a, pri čemu njihove komunikacijske vještine i emocionalna inteligencija mogu pomoći u prepoznavanju psihosocijalnih prepreka i u jačanju rezilijencije. Također se naglašava potreba za jačanjem preventivne medicine, jer se pokazalo da empatija zdravstvenih djelatnika i rad na psihološkoj otpornosti bolesnika mogu smanjiti potrebu za agresivnim medicinskim intervencijama.²¹

Zaključak

Empatija zdravstvenih djelatnika i jačanje rezilijencije bolesnika važni su čimbenici koji znatno pridonose uspješnu oporavku i poboljšanju kvalitete života osoba s KV bolestima. Dok empatija osigurava emocionalnu podršku, povjerenje i motivaciju bolesnika za aktivno sudjelovanje u liječenju, rezilijencija pruža alate za bolji način suočavanja sa stresom i izazovima koji prate kronične bolesti.

Dosadašnja su istraživanja pokazala da empatija zdravstvenih djelatnika povećava pridržavanje terapijskih uputa, poput uzimanja lijekova i promjena životnih navika, smanjuje broj ponovnih hospitalizacija te ublažuje simptome anksi-

Experiences from Croatia and Bosnia and Herzegovina

In the context of the synergy between the empathy of healthcare professionals and the resilience of patients, the combination of psychological resources (such as optimism and a sense of purpose) with the provision of emotional support and psychological care creates a holistic approach to optimizing healthcare for CV patients.

Kruhek Leontić highlighted the importance of protective psychological factors for CV diseases, including optimism, gratitude, and resilience, which can positively impact heart health. Healthcare professionals who provide emotional support and encourage positive psychological states can strengthen patient resilience, contributing to better healthcare optimization. Enhancing protective factors, such as optimism and spiritual well-being, is associated with improved health outcomes, implying that empathy in healthcare professionals can positively influence psychological well-being and recovery capacity.¹⁹

Tuzla *et al.* investigated psychological issues in CV patients following AMI and the importance of psychological care within CV rehabilitation programs. Providing comprehensive psychological support, including anxiety and depression reduction, can improve recovery. The role of healthcare professionals in delivering empathy and emotional support is crucial in reducing psychological symptoms and fostering patient resilience. Healthcare professionals who recognize patients' emotional challenges and respond with attentiveness and understanding can significantly enhance recovery quality and reduce the risk of recurrent CV events.²⁰

According to Mašić *et al.*, psychosocial factors are among the significant preventable risk factors for coronary heart disease (CHD), emphasizing the importance of empathy in healthcare professionals for stress reduction and psychological support in CV patients. The study also confirmed that lifestyle changes and risk factor control play a key role in primary prevention, where empathetic healthcare professionals can significantly contribute to motivation for therapy adherence and adoption of healthier habits. Furthermore, the study highlighted that primary care physicians should take an active role in assessing CHD risk factors, where their communication skills and emotional intelligence can help identify psychosocial barriers and strengthen resilience. Additionally, the need to strengthen preventive medicine was emphasized, as it has been shown that empathy in healthcare professionals and efforts to enhance psychological resilience in patients can reduce the need for aggressive medical interventions.²¹

Conclusion

The empathy of healthcare professionals and the enhancement of patient resilience are crucial factors that significantly contribute to successful recovery and improved quality of life in individuals with cardiovascular (CV) diseases. While empathy provides emotional support, trust, and motivation for patients to actively participate in treatment, resilience equips them with tools to better cope with stress and challenges associated with chronic illnesses.

Previous research has shown that the empathy of healthcare professionals increases adherence to therapeutic guidelines, such as medication compliance and lifestyle changes, reduces

oznosti i depresivnosti. Bolesnici koji se osjećaju slušanima i razumljenima iskazuju veću motivaciju za suradnju i aktivno sudjelovanje u vlastitu oporavku. S druge strane, programi jačanja rezilijencije, poput *mindfulnessa*, kognitivno-bihevioralnih terapija i grupnih terapija, dokazano smanjuju simptome psihološkoga stresa, snižuju razine kortizola te poboljšavaju tjelesne pokazatelje poput AT-a. Kombinacija emocionalne i tjelesne otpornosti pokazuje se ključnom za dugoročno upravljanje KV bolestima i osiguravanje boljih ishoda liječenja.

hospital readmission rates, and alleviates symptoms of anxiety and depression. Patients who feel heard and understood demonstrate greater motivation to collaborate and actively engage in their recovery process. On the other hand, resilience-strengthening programs, such as mindfulness, cognitive-behavioral therapy, and group therapy, have been shown to reduce psychological stress symptoms, lower cortisol levels, and improve physical indicators such as blood pressure. The combination of emotional and physical resilience is proving to be essential for long-term management of CV diseases and ensuring better treatment outcomes.

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