

Impacto de la fatiga en el funcionamiento y la calidad de vida en pacientes con Esclerosis Múltiple

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Resumen

El síntoma más común reportado en las personas con Esclerosis Múltiple (EM) es la fatiga, la cual ha sido descrita en un 53% hasta un 90% de los pacientes (Tabrizi, Radfar, 2015). Diferentes estudios han demostrado que la fatiga perjudica considerablemente las funciones laborales y sociales de los pacientes, llegando incluso a ser su mayor causa de desempleo (Olascoaga, 2010). El objetivo de este estudio era evaluar el impacto que causa la fatiga en el funcionamiento y la calidad de vida en pacientes con EM, empleando escalas de funcionamiento nunca antes usadas para este propósito. Se utilizaron 4 escalas diferentes: BECAD F1 (evalúa funcionamiento cognitivo) , BECAD F5 (autocuidado), MFIS (percepción de fatiga) y SF36 (percepción del estado de salud). La muestra está compuesta por 18 sujetos, y a cada uno se le administran las 4 tras obtener su consentimiento informado.

Los cálculos estadísticos utilizados fueron correlaciones de Pearson y ANOVA de 1 factor, para determinar si habían diferencias entre los sujetos con más fatiga y los que mostraban menores niveles de fatiga. Los resultados obtenidos confirman solo dos hipótesis de las 8 planteadas: que los sujetos con mayor percepción de fatiga muestran una peor percepción de su salud física y mental. Aunque se obtuvo significación en otros dominios específicos, no contemplados en las hipótesis, pero que suponen un nuevo hallazgo en este campo. Estos dominios son la capacidad de expresar mensajes mediante gestos, la capacidad de copia, y la capacidad de expresar mensajes escritos. Los hallazgos no solo apoyan a la literatura, sino que aportan datos para posibles estudios futuros acerca del impacto de la fatiga en dominios del funcionamiento más específicos.

Summary

The most common symptom reported in people with Multiple Sclerosis (MS) is fatigue, which has been described in 53% to 90% of patients (Tabrizi, Radfar, 2015). Studies have shown that fatigue significantly damages the laboral life and social functions of patients, even becoming its main cause of unemployment (Olascoaga, 2010). The objective of this study was to evaluate the impact that fatigue causes on the functioning and quality of life in patients with MS, using operating scales never used before for this purpose. Four different scales were used: BECAD F1 (evaluates cognitive functioning), BECAD F5 (self-care), MFIS (perception of fatigue) and SF36 (perception of health condition). The sample consists of 18 subjects, and each one is administered the 4 scales plus an informed consent.

The statistical analysis used were Pearson and 1-factor ANOVA correlations to determine if there were differences between the subjects with more fatigue and those who showed lower levels of fatigue. The results obtained confirm only two hypotheses of the 8 proposed: the subjects with greater perception of fatigue show a worse perception of their physical and mental health, although significance was obtained in other specific domains, not included in the hypotheses, but which represent a new find in this field. These domains are the ability to express messages through gestures, the ability to copy, and the ability to express written messages. The findings not only support the literature, but also provide data for possible future studies on the impact of fatigue on more specific domains of functioning.

Study on the impact of fatigue on functioning and quality of life in patients with Multiple Sclerosis



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Introduction

Multiple sclerosis (MS) is a chronic, inflammatory and autoimmune disease of the central nervous system that mainly affects young adults, with a higher incidence in women. Fatigue is the most common symptom in MS, reported in 53% to 90% of patients (Tabrizi, Radfar, 2015)

The most impaired cognitive functions in MS are: processing speed, working memory, long-term memory, phonetic fluency, semantics and attention (Chiaravallot, Deluca, 2008). Moreover, fatigue affects the laboral life and social functions of patients (Olascoaga, 2010).

The objective of this study is to assess the impact of fatigue on functioning and quality of life in patients with MS. Our hypotheses suggest a worse performance of patients who suffer more fatigue in domains such as reading, calculation, the ability to eat and drink, and a worse perception of their physical and mental health.

Method

Participants: 18 subjects
10 women, 8 men
Average age 56 years
Average chronicity 21 years

Materials and procedure: over 30-60 minutes of assessment per patient.

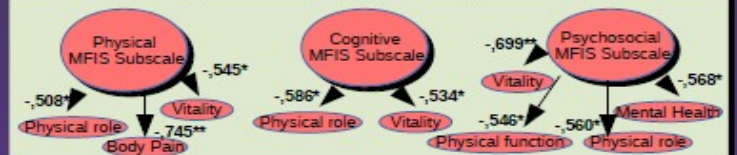


Statistical analysis:
Pearson correlation
One-way ANOVA (MFIS subscales used as factors). Two groups for each subscale: high and low fatigue

Results

| ANOVA (PHYSICALGROUPED) | | | | | | |
|-------------------------|------------------|----------------|----|-------------|-------|------|
| | | Sum of Squares | df | Mean Square | F | Sig. |
| PHYSICALROLE | Between subjects | 5316,840 | 1 | 5316,840 | 6,827 | ,010 |
| | Within subjects | 12460,938 | 16 | 778,809 | | |
| | Total | 17777,778 | 17 | | | |
| VITALITY | Between subjects | 26609,444 | 1 | 26609,444 | 5,781 | ,028 |
| | Within subjects | 2376,000 | 16 | 148,500 | | |
| | Total | 10044,444 | 17 | | | |
| MENTALSUBSCALE | Between subjects | 1061,000 | 1 | 1061,000 | 6,123 | ,032 |
| | Within subjects | 3311,000 | 16 | 206,938 | | |
| | Total | 4992,000 | 17 | | | |

| ANOVA (PSYCHOSOCIALGROUPED) | | | | | | |
|-----------------------------|------------------|----------------|----|-------------|--------|------|
| | | Sum of Squares | df | Mean Square | F | Sig. |
| PHYSICALFUNCTION | Between subjects | 3121,111 | 1 | 3121,111 | 8,222 | ,011 |
| | Within subjects | 6073,333 | 16 | 379,583 | | |
| | Total | 9194,444 | 17 | | | |
| PHYSICALROLE | Between subjects | 13444,444 | 1 | 13444,444 | 49,841 | ,000 |
| | Within subjects | 4333,333 | 16 | 270,833 | | |
| | Total | 17777,778 | 17 | | | |



Discussion

Only two hypotheses of 8 are met: the more fatigue, the worse perception of mental and physical health. Significance was also found in specific domains not studied in the literature: communicate messages by gestures (0.042), copy (0.035) and communicate written messages (0.024). These results support previous evidence and provide new data for the impact of fatigue on specific domains not yet studied.

Study limitations:

- Little sample
- The effect size could not be calculated
- Possible anosognosia of some patients may influence their results
- Only the perception of fatigue is measured, not the fatigability
- The groups were very unequal regarding the number of subjects.

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