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## The effect of a training program on psychological distress in patients with hypertension: A clinical trial study

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**Statement of the Problem**: Stress is a normal part of life. It can cause hypertension through repeated blood pressure elevations as well as by stimulation of the nervous system to produce large amounts of vasoconstricting hormones that increase blood pressure. Reducing stress is helpful for lowering high blood pressure.

**Aim**: This study aimed to determine the effectiveness of a training program on psychological distress in patients with hypertension.

Materials & Methodology: The clinical trial was conducted on 190 hypertensive patients aged 36 to 80 in 2015-2016. Patients randomly were assigned to an intervention and a control group which matched for age, sex, marital status, years of schooling, social class and duration of illness. The intervention plan was 2-hour education sessions for intervention group and a family member. Then, follow up was done by phone call for six months. The material covered in the group training sessions included training on definition of stress, stress management, methods to defy stress, the advantages of stress management, the effect of stress and tension on blood pressure, non-pharmacological treatments available and healthy lifestyle choices, such as proper physical activity, restrictions on smoking, and the importance of a healthy diet. There was no intervention in control group. Levels of psychological distress using the 12-item General Health Questionnaire (GHQ) were measured. A total score of  $\geq$ 4 was considered high GHQ (i.e. high stress).

**Results**: High stress levels ( $GHQ \ge 4$ ) were observed in 30% (N=57) of total, 35.2% (N=32) women, and 25.3% (N=25) of men. In the intervention group, there was statistically significant difference between the levels of high GHQ before (24.5%) and six months after (9.6%) the training (P<0.05). No significant differences were observed in the control group. The two groups were not significantly different in levels of GHQ before the intervention. Six months after, however, the levels of high GHQ were significantly lower in the intervention group compared to the controls (P<0.05).

**Conclusions**: Based on the results, a training program is effective in improving stress management. These findings may support the effectiveness of this interventional program in reducing stress level.

## **Recent Publications**

- 1. Roohafza H et al. (2012) The effectiveness of stress management intervention in a community-based program: Isfahan Healthy Heart Program. ARYA Atherosclerosis. 7(4):176-183.
- 2. Eghbali Babadi M (2017) Design and implementation of a combined observational and interventional study: trends of prevalence, awareness, treatment and control hypertension and the effect of expanded chronic care model on control, treatment and self-care. ARYA Atheroscler. 13(5):211-220.
- 3. McCraty R, Atkinson M and Tomasino D (2003) Impact of a workplace stress reduction program on blood pressure and emotional health in hypertensive employees. Journal of Alternative & Complementary Medicine. 9(3):355-69.
- 4. Montazeri A et al. (2003) The 12-item General Health Questionnaire (GHQ-12): translation and validation study of the Iranian version. Health and Quality of Life Outcomes. 1(1):66.
- 5. Hamer M, Batty G D, Stamatakis E and Kivimaki M (2010) Hypertension awareness and psychological distress. Hypertension. 56(3):547-50.

## Biography

Maryam Eghbali Babadi is currently a PhD candidate in Hypertension at Isfahan University of Medical Sciences, Iran. She has been an Academic Member of Nursing and Midwifery Department at the same university for 25 years. She has published more than 10 papers in reputed journals and more than 10 books.

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