PARALLEL SESSION 7 – SATURDAY JUNE 22ND 2019, 10h30 – 12h00
Combined symposium 11: Air, Breath and Psycho-pulmonology

- S. Selinheimo: Psychosocial treatments for employees with indoor air associated persistent and non-specific health complaints: 12-month follow-up randomized controlled trial results
- Th. H. Loew, L. Frank: Slow paced breathing (SPB) in dental phobia: A randomized controlled study using a tactile rhythm device
- M. Wessels-Bakker: Prevalence of psychological distress and the association with medication non-adherence among lung transplant patients
- T. Loew: Slow paced breathing (SPB) in asthma patients: A randomized controlled study using a tactile rhythm device
- I. Alexeeva, M. Martin: Autobiographical Memory Retrieval in Asthma: Specificity is Enhanced and Associated with Less Bronchoconstriction and More Active Coping
Psychosocial treatments for employees with indoor air associated persistent and non-specific health complaints – 12-month follow-up randomized controlled trial results

Aim
Non-specific health complaints associated with indoor air appear to become persistent in some individuals. Functional impairments and poor quality of life are often common among them. The aim was to assess the effects of cognitive behavioral therapy (CBT) and psychoeducation among individuals with persistent, non-specific indoor air-related symptomatology without an adequate pathophysiological or environmental-related explanation.

Methods
The intention-to-treat sample (ITT) included 52 individuals who were randomized either to CBT, psychoeducation or treatment as usual (TAU). The primary outcome measure was Health Related Quality of Life (HRQoL). Secondary measures were psychiatric and somatic symptoms, factors assessing psychological flexibility and well-being as well as environmental sensitivity. Participants were assessed at baseline, and 3-, 6- and 12- month follow-ups.

Results
Based on clinically significant difference scores in HRQoL from baseline to 12-month follow-up, 35% of the CBT group recovered, and the corresponding numbers for psychoeducation and TAU were 24% and 11%, respectively. However, the differences were not statistically significant. Prevalent psychiatric symptoms had significant association with poor HRQoL (p<.05).

Conclusion
There was fluctuation in the course of HRQoL between the groups. Presumably because of the small sample size significant differences were not detected. Although recruitment process had severe difficulties, the final dropout rates were low suggesting that treatments were regarded acceptable by the individuals. Psychiatric symptoms had strong impact on HRQoL suggesting that those symptoms should be adequately addressed in the treatment.

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Slow paced breathing (SPB) in dental phobia – a controlled randomized study using a tactile rhythm device

Aim
Yet functional relaxation is a guided self-help concept in dental anxiety and better as using relaxing music, it is not broadly used. Maybe because it is too complicated to learn. So the idea rose up, to keep it more simple and refer to one component only: SPB.

Methods
In a controlled randomized study 50 patients with a significant increase of dental phobia obtained or a five minute session with a tactile rhythm device before starting the treatment and during the whole session (4 Seconds breath in, 6 seconds breath out, while the device is vibrating) or treatment as usual.

Results
The decrease of intraindividual state anxiety was highly significant in comparison to no intervention (t-test, p<0,001). 9 out of 10 patients could handle it. Only 10 percent refused to use it.

Conclusion
SPB induced by tactile stimulation in one hand is an easily applicable concept and can be performed during the complete treatment. It is easier to learn than functional relaxation.

Reference

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Prevalence of psychological distress and the association with medication nonadherence among lung transplant patients

Aim
Psychological distress after lung transplantation (LTx) is a potential risk factor for morbidity and mortality. Evidence about the prevalence of depression, anxiety, and posttraumatic stress disorder (PTSD) and its associations with medication nonadherence in LTx patients is heterogeneous and limited.

Methods
We conducted a single-center study with a cross-sectional design. Anxiety and depression were assessed with the Brief Symptom Inventory, symptoms of PTSD with the Dutch version of the Impact of Event Scale, and medication adherence with the Basel Assessment of Adherence to Immunosuppressive Medications Scale.

Results
We assessed 35 waiting list patients and 113 patients after LTx. In waiting list patients, 52% reported (sub)clinical symptoms of depression. In transplanted patients the prevalence was 23%. Prevalence of (sub)clinical symptoms of anxiety was 43% in waiting list patients and 33% in transplanted patients. After LTx, 12% reported clinical symptoms of PTSD. Anxiety and medication adherence were significantly and positively correlated in transplanted patients (Pearson $r = 0.20; p = .035$). We found no relation between depression or PTSD and medication adherence. Cystic Fibrosis (CF) patients after LTx had an OR of 2.15 to be non-adherent to medication.

Conclusion
Psychological distress is more prevalent in patients before and after LTx compared to the Dutch general population. After LTx higher levels of anxiety symptoms are positively related to medication adherence whereas depression and PTSD are not. CF patients after LTx are more at risk for non-adherence to medication. The high disclosure of psychological distress before and after LTx justifies systematic psychological screening.

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Slow paced breathing (SPB) in asthma patients – a controlled randomized study using a tactile rhythm device

Aim
Yet functional relaxation is a guided self-help concept in asthmatics, dental anxiety chronic pain patients or patients with somatoform disorders or to ease medical examinations as colonoscopy or needle stitches since many years it is not broadly used. Maybe because it is too complicated to learn. So the idea rised up, to look for the essential ingredients of this approach.

Methods
In a cross over design 20 patients with a significant increase of the specific airway resistance (sAR) obtained or a five minute session with a tactile rhythm device (4 Seconds brath in, 6 seconds breath out) or a placebo relaxation intervention (as used in the functional relaxation rct’s in airway obstruction patients 25 years ago).

Results
The decrease of intraindividual sAR was highly significant in comparison to the placebo intervention (t-test, p<0,05) and not significant in comparison to a standard broncholytic medication (fenoterol).

Conclusion
SPB is an effective complementary intervention for asthmatic patients. It is easier to learn than functional relaxation.

Reference

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Autobiographical Memory Retrieval in Asthma: Specificity is Enhanced and Associated with Less Bronchoconstriction and More Active Coping

Aim
Overgeneral autobiographical memory refers to the retrieval of generic rather than specific memories. Overgeneral autobiographical memory has been strongly linked to depression, and a number of chronic psychological conditions. Given the comorbidity between depression and asthma, the question arises whether people with asthma have characteristic memory patterns which may influence mood, symptom perception, illness cognitions, and coping strategies. The study aimed to investigate whether there are systematic differences among individuals regarding the content and the type of the autobiographical memories they form and their relationships with illness-related variables.

Methods
We used cued autobiographic recall in Asthma and healthy controls. Participants were instructed to recall particular past events of physical activity, fatigue, pain, or an emotional event. Symptoms, illness perception and cognition, mood, and coping styles were also assessed.

Results
Asthma participants recalled more specific than general autobiographical memories of physical activity, unlike healthy controls $\chi^2 (1, n = 126) = 6.88, p = .009$. In asthma overgeneral memories were associated with a coping style of denial and a higher frequency of bronchoconstriction symptoms. More specific memories were related to active coping and positive mood.

Conclusion
Autobiographical memory for physical activity in asthma differs from depression and healthy people. Memory specificity may have developed in asthma as a protective cognitive style increasing resilience against depression. Memory processes can be harnessed by therapists to help patients improve symptom control and management by restricting the use of avoidant coping and helping prevent depression.

Reference

Topic
Basic science

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