



**The Effect of Persistent Anxiety and Depressive Symptoms on Quality
of Life among Patients with Heart Failure**

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ABSTRACT

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Background: Anxiety and Depressive symptoms are 4 to 5 times more prevalent in patient with heart failure than in the general population. Anxiety and depressive symptoms interfere with a person's ability and can worsen symptoms, functional status, and quality of life for patients with heart failure over time. Furthermore, anxiety depressive symptoms were independent risk factor of short- and long-term morbidity and mortality. Most of previous studies checked the effect of anxiety and depressive symptoms at a single point of time on the quality of life for patients with heart failure

Purpose: The general purpose of this study is to assess the effect of persistent anxiety and depressive symptoms on Quality of life among patients with heart failure in Jordan.

Methods: This is a prospective observational study with a consecutive sample of 127 participants with a confirmed diagnosis of heart failure. Data were collected from four hospitals in Jordan, during the collection period between (March 1st, 2020 to March 31, 2020).

Results: One hundred twenty-seven patients participated in the study; 79 men and 48 women. The mean age was 62.7 years (SD=14.8, range: 20-96). The duration patients had Heart failure ranged from (1-25) years, with a mean of 7.0 years (SD=6.2)..

Majority of study sample (81.9%) had hypertension, and nearly two-third (65.4%) had diabetes. In multiple regression models, persistently depressed patients have lower levels of Physical Component Summary by 0.398. Every unit increase in New York Heart Association class decreased Physical Component Summary by 0.325. Persistently anxious patients have lower levels of Physical Component Summary by 0.261, and patients with history of diabetes mellitus decreased Physical Component Summary by 0.094 units respectively. The model explained 78.4% of the variance. Regarding Mental Component Summary, persistently anxious patients have lower levels of Mental Component Summary by 0.346. Every unit increase in New York Heart Association class decreased Mental Component Summary by

0.359. Finally, persistently anxious patients have lower levels of Mental Component Summary by 0.286. The model explained 76.1% of the variance

Conclusion: Persistent Anxiety and depressive symptoms were associated with poor quality of life among patients with heart failure. , It is highly recommended that healthcare providers follow-up and assess the psychological health for the patients with heartfailure especially anxiety and depression and including this in the treatment protocols for those patients.

Key words: Anxiety, depressive symptoms, heart failure, quality of life, Jordan.