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Division of Rheumatology GSH | UCT

# PSYCHO SOCIAL ASPECTS OF RHEUMATIC DISEASES



# **KUBLER ROSS**

5 STAGES

- 1.Shock
- 2.Denial
- 3. Anger / Bargaining
- 4.Depression
- 5.Acceptance



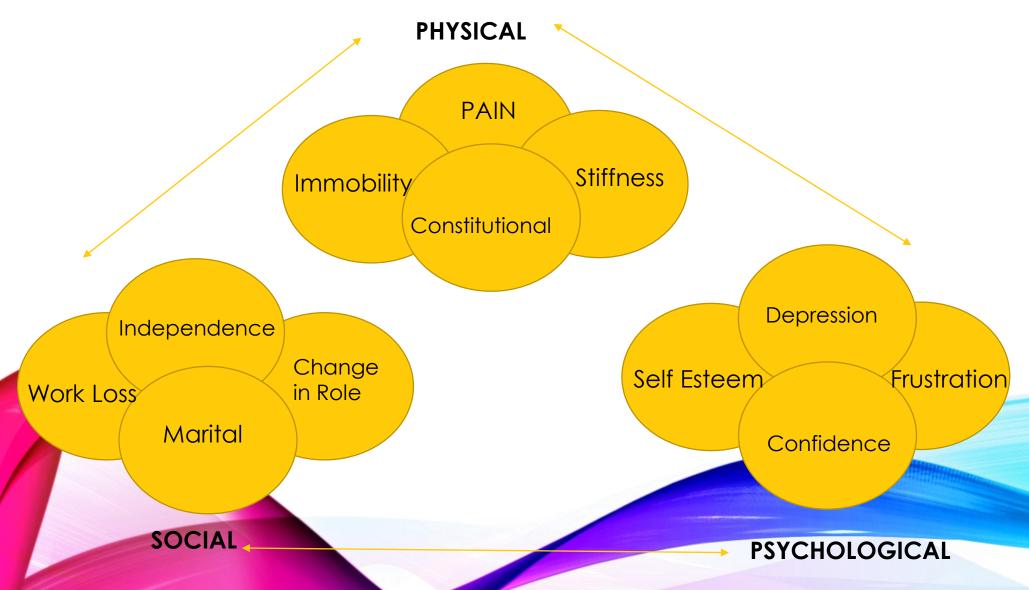
SELF EFFICACY

SELF MANAGEMENT

**BEHAVIOUR** 

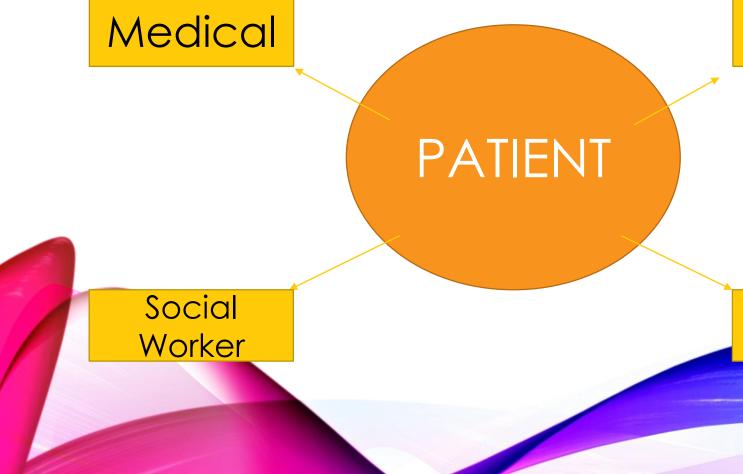
**HEALTH** 

# EFFECTS OF RHEUMATIC DISEASE ON PATIENTS



#### COMMUNICATION

BEING A GOOD LISTENER



Employer

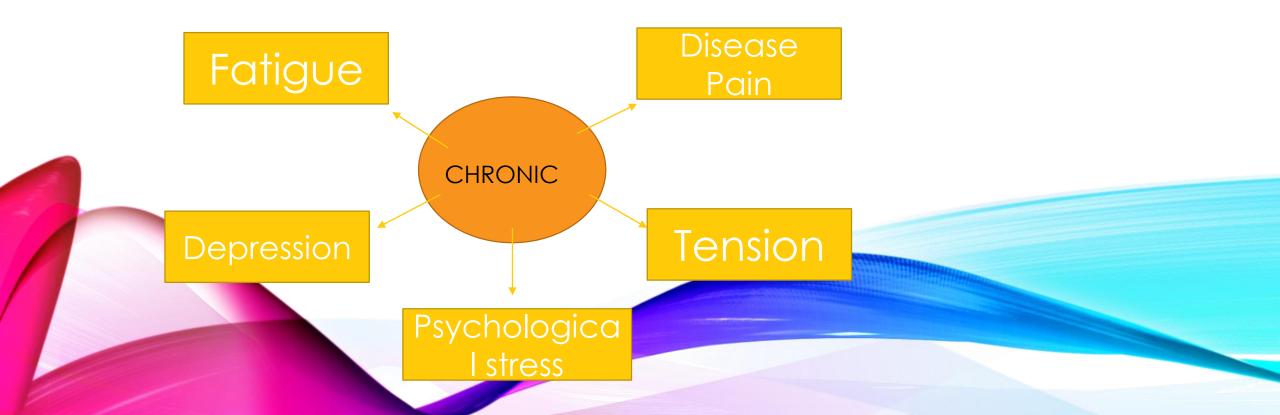
- Prevents misunderstandings
- Builds support for family and friends
- Communication builds strong team / patient

Family

#### PAIN

#### Pain can be:

- 1. Acute during acute flare or post operative
  - 2. Chronic



# **PAIN AND STIFFNESS**

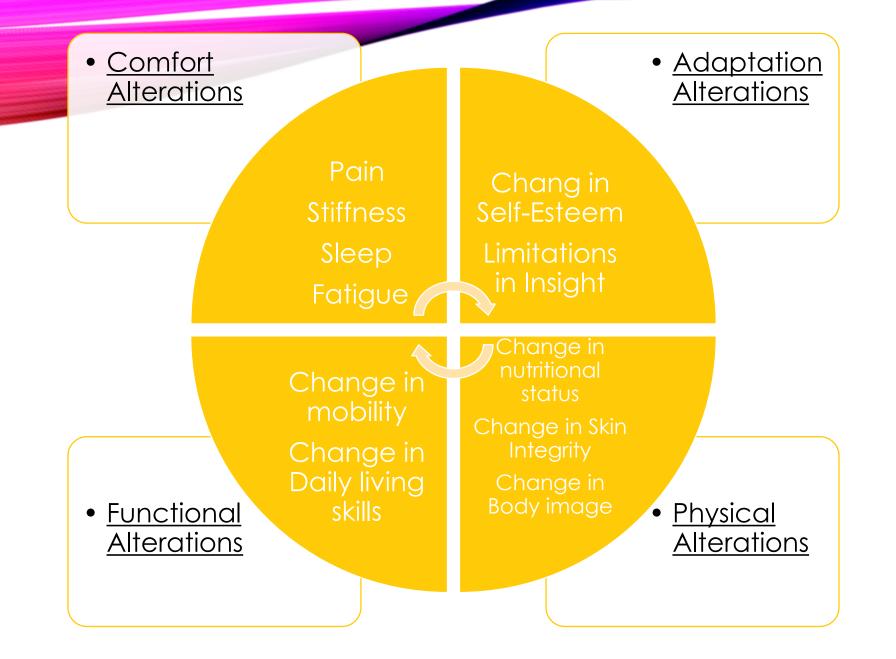
#### STIFFNESS

Patient has difficulty in separating stiffness and pain

- defined as a discomfort after inactivity

#### PATIENT TO:

- Exercise
- Relaxation Jacobsons
- Massage
- Guided Imagery
- Distraction
- Self Talk
- Heat and cold



### CAUSES OF FATIGUE

1. Anaemia: Iron or non –iron deficiency

Anaemia of chronic disorders

2. Muscle atrophy: Decreased activity leads to less efficient

muscles

3. Physical activity: More energy needed during active disease

4. Emotional stress: "Covering up" solution

"Keeping up" – Recapture former identity

Depressed patient – coping requires energy

5. Lack of knowledge: Energy conservation

6. Sleep disturbances:

- 1.Physiological pain and stiffness
- 2. Psychological
- 3. Environmental or iatrogenic
- 4. Related factors Age; Gastric reflux; position

# **DEPRESSION**

#### RECOGNIZE DEPRESSION

- Withdrawal
- Sleep pattern disturbances
- Change in eating habits
- Lack of motivation
- Tearful
- Denial

## MANAGEMENT OF DEPRESSION

# PATIENT TO:

- Recognise depression
- Communicate
- Manage pain
- Increase social contact
- Exercise
- Do something enjoyable
- Goal setting
- Contracting