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## **Proceedings**

***XXI National Congress  
Italian Psychological Association Clinical and Dynamic Section  
Milan – 27-29 September 2019***

### **SYMPOSIUM SESSION**

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## **PSYCHOLOGICAL HEALTH IN INFERTILE COUPLES UNDERGOING ASSISTED REPRODUCTIVE TECHNOLOGY TREATMENTS: RISK AND PROTECTIVE FACTORS**

### **Proposer**

*Maria Clelia Zurlo<sup>1</sup>*

<sup>1</sup>Department of Political Sciences, Federico II University, Naples.

### **Discussant:**

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### **Abstract**

Infertility is a clinical condition affecting between 8 and 12% of couples worldwide, with no significant changes in the prevalence at global, national and regional levels over the past two decades. Research widely recognized that both members of infertile couples pursuing Assisted Reproductive Technology (ART) treatments may perceive significant levels of psychological disease, that may significantly impact their lives, as well as the success and follow-up of their treatments. Therefore, infertility research made increasing efforts to identify variables influencing psychological health conditions of infertile couples undergoing ART treatments.

This symposium aims at focusing on risk and protective factors influencing psychological health conditions in both members of infertile patients.

By adopting a relational perspective, Saita, Molgora, and Baldini will propose an investigation of dyadic coping and marital adjustment among couples at the beginning of ART treatments.

Babore, Trumello, Lombardi, Cavallo, and Bramanti will develop a comparative study, focusing on the impact of openness with others (i.e., friends or relatives) on male and female infertile patients' psychological health conditions.

Zurlo, Cattaneo Della Volta and Vallone will present the validation of a multi-dimensional infertility-related stress model including socio-demographic and fertility-related characteristics, infertility-related stress dimensions, coping strategies and couple's dyadic adjustment dimensions as predictors of anxiety and depression among partners of couples undergoing ART treatments.

**Discussant:***Lidia Del Piccolo<sup>2</sup>*<sup>2</sup>Department of Neurosciences, Biomedicine and Movement Sciences, University of Verona, Verona.**Abstract**

The symposium aims at emphasizing the key role of clinical psychology and its concepts for the assessment and treatment of patients with different medical diseases. The contributions to this panel show how an adequate psychological assessment may concur to a higher better understanding of psychological experience in medical conditions, leading to better comprehension of the body-mind processes. It is known that, on the one hand, life expectancy is increasing world-wide and age-related disorders are becoming a major health concern. In fact, chronic diseases may seriously impact on perceived quality of life, leading to individual's psychological suffering. Moreover, psychological factors may also drive individual behavior, deeply conditioning the management of chronic condition. On the other hand, it is true that even young adults are involved in severe illness which are extremely related to morbidity and mortality. This is all the more so true when we approach to complex and heterogeneous medical diseases analyzing suffering and treatment and highlighting advances and perspectives. Four contributions exploring how the most relevant psychopathological factors impact on individual health related experience, including adherence, compliance and treatment strategy, will be presented. A first contribution to the conference (Martino G., et al.) aims to explore how psychological factors and metabolic control may affect health related quality of life, with a prospective speculation to prevention strategies. A second contribution (Marchini F., et al.) investigates the association between empathic identification and quality of care in diabetes. A third contribution (Martino M.L., et al.) aims to examine the traumatic individual experience of breast cancer from pre-hospitalization to follow up. The fourth contribution (Donisi V., et al.) aims to analyze the association between psychological factors and chronic migraine severity, disability and type of drug consumption.

## **Health related quality of life and anxiety in patients with Type 2 Diabetes Mellitus**

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**Abstract**

Age-related medical disorders are increasing worldwide. Particularly, Type 2 Diabetes Mellitus (T2DM) is a chronic disease which largely affects general population, exceeding 90% of DM total amount. As psychopathological symptoms frequently occur in chronic medical conditions, our study aimed at exploring the relationship between psychological factors and metabolic control and its impact on health related quality of life (QoL). A convenience sample of forty-five out-patients with T2DM ( $65.3 \pm 5.9$  yr.) was consecutively recruited and assessed through: Hamilton Anxiety Rating Scale (HAM-A), Beck Depression Inventory II edition (BDI-II) and 36-Item Short Form Survey (SF-36). Body mass index, time since DM diagnosis and glycated hemoglobin value were detected. Patients had a mean time since diagnosis of  $11.6 \pm 6.7$  yr. and an adequate metabolic control. Median HAM-A [25(20.7-30.6)], considering both somatic and psychic anxiety, was demonstrative of high anxiety levels, while lower depressive symptoms were observed [BDI-II: 13(8.3-21.4)]. A multiple regression analysis, after correcting for age, BMI, HbA1c value and BDI-II score, showed the health related QoL, relatively to Physical Component Summary (PCS), was significantly related to both disease duration ( $\beta=0.55$ ,  $p=0.03$ ,  $SE=0.25$ ) and HAM-A scores ( $\beta=0.52$ ,  $p=0.04$ ,  $SE=0.24$ ). Furthermore, both HAM-A ( $\beta=-0.67$ ,  $p=0.01$ ,  $SE=0.26$ ) and BDI-II ( $\beta=-0.48$ ,  $p=0.02$ ,  $SE=0.20$ ) scores were predictive of Mental Component Summary (MCS), while metabolic control was not an independent determinant. Our study suggests a possible predictive role of both anxiety levels and time since diagnosis in health related QoL in patients with T2DM. PCS was significantly associated with anxiety and time since diagnosis, while MCS was associated with anxiety and depressive symptoms. These results encourage to program T2DM psychological training to improve both disease self- management and health related QoL, in a such long duration disease.

**Identification with the other is associated with quality of care in diabetes clinical settings: implications for doctor-patient relationship**

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**Abstract**