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Abstracts

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Tous requièrent la participation du patient et tendent vers une perspective d'équilibre des fonctions respiratoires intégré dans un processus d'autoestimation, d'autonomie et de responsabilisation face aux rythmes et contraintes de la vie journalière.

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BRONCHIAL ASTHMA**

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*Clinic for Pulmology and allergology, Medical faculty
Skopje, **Medical Center Bitola.

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Procedure - During 3 days they attended several meetings with a multidisciplinary team, that collaborated with us in this camp (allergist, family doctors and pediatric nurses) using the technic of dynamics of group for almost 20 minutes, they were told to draw the human figure based on the perception of themselves during an asthmatic crisis. The results were analyzed by a psychiatric with ample experience in asthmatic children.

Results - Of drawing examined of the human figure it was obvious that 100% of the children show evidence of sadness and or depression. Four of the 22 (18%) showed hairy lines indicative of anxiety and or anguish, two (9%) show feelings of undervaluation when they draw themselves as a very small figure. Eight (36%) draw themselves luck in bottles similar to their lungs, and four (18%) draw themselves behind bars, five (22.7%) showed feelings of wrath and guilt, and in one case the patient could not define the contour of his body.

Conclusions - The most common psychologic derangement found in this study were sadness and or depression on the contrary the feeling of anxiety or anguish that usually accompany the episodes of dyspnea were only expressed in 18% of the patients. The importance to identify as soon as possible the emotional habitat that surrounds the asthmatic patients, this will enable us to offer to the asthmatic a treatment that include a psicologic support of this aspect of their disease.

**ENQUETE SUR LA PRISE EN CHARGE DES ASTHMATIQUES
AUPRES DES MEDECINS DE LA WILAYA
DU GRAND CASABLANCA**

A. AICHANE, Z. BOUAYAD, S. MOUTIL, N. TROMBATI, A. BAHLAOUI,
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PSYCHOLOGICAL PROFILES OF PATIENTS WITH SEVERE AND FATAL ASTHMA

M. Haida, K. Ito, T. Miyamoto*, S. Makino**
Tokyo University Hospital, Japan
*National Sagami Hospital, Japan
**Dokkyo University Hospital, Japan

Psychological test scales commonly used in Japan were applied to varieties of patients with asthma. Thirty nine severe asthmatics were classified into acute type (A, N=14), chronic type (C, N=11), acute on chronic type (A+C, N=14) and their test scale recordings were analyzed.

(A) type displayed psychological profiles similar to the normal controls, while (C) type had more neurotic and depressive tendencies with reduced activity. (A+C) type revealed similar neurotic and depressive tendencies to (C) type while being more active as in (A) type. Six other patients who later died of asthma were less neurotic, less depressive than the severe asthmatics who are still living. Those who died were also significantly more carefree and optimistic which may have been related to their under estimation of their own disease state.

These test scales may be employed for screening patients at risk of asthma death.

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PSYCHOLOGICAL FACTORS IN NEWLY DIAGNOSED ADULT ASTHMATICS FOLLOWED DURING FIVE YEARS

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*Centre for Public Health Research, County
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420 newly diagnosed adult asthma patients underwent psychological tests and were followed during five years what concerned severity of the disease, as shown by level of medication and emergency visits. Questions about the patients' attitude to mental stress as a trigger and/or aggravating factor were used as well as the Asthma Symptom Check list, measuring the anxiety during an asthma attack. A subjective feeling of mental stress and a high degree of anxiety during an asthma-attack, at the onset of the disease, was positively related to a heavier medication and more emergency visits later on. The results indicate that psychological factors may affect the outcome of the asthmatic disease.

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UNDERSTANDING AND PERCEPTION OF ASTHMA IN A SELECTED POPULATION

GABRIELA GALINDO-JAIME, SANDRA GONZALEZ-DIAZ, CARLOS CANSECO-GONZALEZ.
UNIVERSITY HOSPITAL, MONTERREY N.L. MEXICO. *

The objective of the present study was to assess in a group of 45 asthmatic patients: age and sex distribution of the disease, duration, kind and modality of treatment, patient's perception of disease's severity and risk of death, quality of life and cure expectancy, and usefulness of immunotherapy on the cure of their disease.

A 35 reactive questionnaire was applied to randomly selected patients with the diagnosis of asthma at the allergy clinic of the university hospital of the universidad autonoma of Nuevo Leon in Monterrey, Mexico.

Of the 45 studied patients 59% (27) were younger than 10 years, 36% (15) between 11-35 y/o and 6% (3) between 36-54 y/o; 47% (21) were male and 53% (24) female; 35% (16) had a 2-4 year history of asthma, 7% (3) under 1 year, 23% (10) 5-7 years, and 35% (16) more than 8 years. 54% (24) Of the participants considered their disease doesn't require a permanent treatment; 65% (29) favored inhalers over use of oral medication; another 65% (29) considered inhalers to be the easier form of treatment. (truncated)

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RECURRENT SEASONAL ICU ADMISSIONS FOR ACUTE SEVERE ASTHMA IN CHILDREN

E G Weinberg, M Smit, P Roux
Red Cross Children's Hospital, Cape Town, South Africa

Many asthmatics develop acute episodes during certain seasons of the year. We reviewed all admissions for acute severe asthma to the Intensive Care Unit (ICU) at the Children's Hospital over a 15 year period. 282 children were admitted on 415 occasions. 40 were responsible for the 133 recurrent admissions. Of the 40, 21 had 86 admissions in the same or adjacent months of subsequent years and 19 had 47 non-seasonal admissions.

The demographic and clinical data of the patients with seasonal and non-seasonal admissions were compared. The seasonal patients formed a distinct sub-group of children with severe asthma. Five children in the seasonal group had lost a parent with asthma. The seasonal children appeared less likely to "outgrow" their asthma and were more likely to require regular steroid therapy. They had significantly more positive RAST results to Aspergillus, Cladosporium and grass pollen.

Monitoring admissions to ICU with acute severe asthma may assist in early identification of individuals who have recurrent severe seasonal attacks. This may be a risk factor for severe, intractable asthma.

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