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Reach and effect of a web-based multiple tailored smoking cessation intervention: Influence of recruitment strategy

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Background: We investigated the influence of two different recruitment strategies on the reach and effect of a web-based multiple tailored smoking cessation programme. **Methods:** Dutch adult smokers were recruited via mass media and general practices. Differences demographic characteristics, retention and reported quit attempts and abstinence were assessed two days after quit date and after 6 weeks. **Findings:** General practice respondents (N=409) were significantly lower educated, less addicted, more motivated to quit and to maintain non-smoking, more often female and more often suffering from cardiovascular or respiratory diseases than mass media respondents (N=1154). General practice respondents showed significantly higher retention rates and more often reported making quit attempts and abstinence, which appeared to be caused by the recruitment strategies attracting different types of smokers. **Discussion:** The choice for recruitment via general practices or mass media determined the number and type of smokers recruited and thus influenced the intervention's public health impact.

Effectiveness of a web-based multiple-tailored smoking cessation programme and tailored counselling by practice nurses

Smit Eline Suzanne, Hoving Ciska and de Vries Hein

Background: We investigated the effectiveness of a web-based multiple-tailored smoking cessation intervention and tailored counselling by practice nurses amongst Dutch smokers. **Methods:** Eighty practice nurses recruited adult smoking patients motivated to quit smoking during a one-year recruitment period. After giving informed consent, smokers (N=408) were assigned to (1) web-based tailoring and counselling; (2) web-based tailoring only or to (3) care as usual. After 6 and 12 months, the effect of the intervention on 24 h point prevalence abstinence, 7-day point prevalence abstinence and prolonged abstinence was assessed using logistic regression analyses. **Findings:** No significant differences were found when comparing the three groups regarding abstinence measures at follow-ups. **Discussion:** Neither of the two interventions resulted in significantly higher abstinence rates than care as usual. However, usual care interventions were heterogeneous and often quite extensive programmes, potentially explaining the results.

A collaborative approach to designing an intervention for patients with atrial fibrillation

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Background: Patients diagnosed with atrial fibrillation (AF) have an increased risk of stroke, and need to adhere to treatment and lifestyle recommendations to reduce likelihood of adverse events. AF patients are often highly symptomatic relying on subjective indicators to manage their illness. **Method:** Intervention design comprised two parallel processes: (1) targeting theoretical constructs within the common sense model and (2) piloting intervention materials, using expert patient panels (2 focus groups with 6 patients), individual patient interviews (n = 6) and expert cardiologist feedback. **Findings:** Each component of the intervention was adapted and moderated following patient and cardiologist feedback, e.g. presentation of risk information. The final intervention comprises DVD (including patient narratives), worksheets, patient education booklet and a self-monitoring diary. It is currently being evaluated in a

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randomised control trial [ISRCTN93952605]. **Discussion:** Health psychologists play an intrinsic role in this collaborative process, whereby intervention development evolves through theoretical and pragmatic piloting.

It's all in your mind: Impact of illness representations and motivations on diabetes self-care

Sophie Recchia, Georges Steffgen, Martine Hoffmann and Elisabeth Spitz

Based on the common sense model of self-regulation and the self-determination theory, the objectives of the present study are twofold: Firstly, to analyse the impact of illness representations and motivations on diabetes self-care. Secondly, to explore whether the predicted effects are maintained over time. The study sample is composed of 261 type 1 diabetics who filled in a questionnaire composed of self-rated HbA1c values, the Summary of Diabetes Self-Care Activities Revised (SDSCA-R), the Brief Illness Perception Questionnaire Revised (BIPQ-R) and the Treatment Self-Regulation Questionnaire (TSRQ). Six months later, the same patients were contacted with a participation rate of 46%. Results show that patients having a high degree of control over their diabetes and being more autonomously motivated have a better glycaemic control (HbA1c), as well as better self-care behaviours 6 months later. Interventions comprising patients' illness representations and motivations are discussed.

The impact of exposure to continuous missile attacks on diabetes self-management and glycaemic control

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Background: The effects of exposure to extreme chronic stress on diabetic patients' health have rarely been studied. **Aims:** To examine the impact of a 10-years exposure to missile attacks on diabetes self-management and glycaemic control. **Methods:** A comparative study of type 2 diabetes patients (216 from exposed region, 190 from non-exposed region), interviewed in 2010. **Measures:** background variables, depression, diabetes self-management, PTSD. Glycaemic control (HbA1c) values (last 3 years) were retrieved from medical records. **Findings:** Patients residing in the exposed region, compared to those from non-exposed region, reported higher levels of PTSD (p<0.001), similar levels of depression, poorer self-management (e.g. lower frequency of exercise, sugar monitoring, p<0.01) and poorer glycaemic control (p=0.06 in 2008, but n.s. in following years). PTSD levels were significantly related to self-management behaviours, but not to glycaemic control. **Discussion:** Exposure to extreme chronic stress affects diabetes health behaviours. The impact on physiological markers requires additional research.

Moderators of change in the planning-saturated fat intake relationship in obese adults

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Background: To examine the mediating effects of planning on the intention-behaviour relationship and the moderating effects of age, self-efficacy and intentions in this relationship. **Methods:** This study was conducted over a 5 week period among 571 obese adults (mean age = 46.9 years, BMI = 35.7). Intentions, action self-efficacy, maintenance self-efficacy, planning and saturated fat intake were measured by self-report. The moderated mediation hypothesis was tested using multiple regression analysis. **Results:** Planning mediated the intention-behaviour relationship for both perceived as well as percentage saturated fat intake. Age, self-efficacy and intentions were moderators of this relationship. Younger individuals, high intenders and people with higher levels of maintenance self-efficacy at higher levels of