REDVET - Revista electrónica de Veterinaria - ISSN 1695-7504

Vol 25, No. 1 (2024)

http://www.veterinaria.org

Article Received: Revised: Accepted:



Effectiveness Of Positive Affirmation On Stress, Anxiety And Depression In Patients With Cardio Vascular Disease.

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Abstract

Positive affirmation has been found to improve psychological well-being by enhancing self-esteem, promoting positive thinking, and reducing negative emotions such as stress, anxiety and depression. The aim of the study was to investigate the effect of positive affirmation on stress, anxiety and depression in patients who have cardiovascular disease. This study adopted a randomized controlled pretest-posttest follow-up research design. The study was conducted at selected hospital, Chennai. The sample consisted of 60 patients randomized into two groups: intervention (n = 30) and control (n = 30). The participants of the intervention group listened to positive affirmation audio recording. The control and experimental groups were pretested by using a demographic questionnaire, and scale of depression, anxiety, and stress DASS-42 were used, and the acquired information were analysed by using inferential and descriptive statistical methods accompanied by SPSS 21 software. The results indicated that the positive affirmation therapy significantly reduced depression, anxiety, and stress in patients with cardio vascular disease.

Keywords: Positive affirmation, depression, anxiety and stress.

Introduction:

Cardiovascular disease (CVD) remains a major cause of morbidity and mortality worldwide, marked not only by its physiological symptoms but also by significant psychological issues such as stress, anxiety, and depression. These psychosocial factors are not coincidental but intricately interlaced with development and management of CVD, influencing both the quality of life and clinical outcomes of the affected individuals.

Stress, in particular, has been identified as important risk factor for the development and aggravation of cardiovascular events. Chronic stress contributes to escalated sympathetic activity, inflammation, endothelial dysfunction, and adverse cardiac remodelling, all of which can increase the pathophysiological processes underlying CVD. Analogously, anxiety and depression have been shown to correlate with increased cardiovascular morbidity and mortality, fractionally through mechanisms involving poor medication adherence, unhealthy lifestyle choices, and dysregulation of autonomic function. Conventional management of cardiovascular disease mainly focuses on pharmacological treatments, lifestyle modifications, and cardiac rehabilitation programs. Conversely, there is growing recognition of the importance of addressing the psychological dimensions of CVD by means of complementary therapies. Positive affirmations, as a psychological intervention, offer a promising path for mitigating stress and improving overall emotional well-being in patients with cardiovascular disease.

Positive affirmations involve the conscious practice of self-affirming statements aimed at promoting self-worth, resilience, and a positive mind-set. By shifting concentration from negative thoughts to constructive beliefs, affirmations have the potential to modulate stress responses, enhance coping mechanisms, and foster psychological resilience in the face of chronic illness. While studies have demonstrated their effectiveness in various psychological contexts, their specific impact on stress in the context of cardiovascular disease requires systematic investigation.

Positive affirmations can promote relaxation and reduce the perception of stress, anxiety and depression. They shift focus away from negative thoughts and replace them with positive, calming messages. It can enhance feelings of control and optimism, which are crucial for coping with the challenges of cardiovascular disease. This can lead to the improved mood and overall psychological well-being. Depression, anxiety and stress reduction through affirmations may also have physiological benefits such as lowering blood pressure and reducing heart rate variability, which are important markers in cardiovascular health.

This study seeks to fill this gap by assessing the effectiveness of positive affirmations on stress, anxiety and depression in patients with cardiovascular disease. By employing validated assessment tools and a structured intervention protocol, it aims to provide empirical evidence supporting the integration of affirmations into holistic treatment approaches for CVD. This research endeavors to contribute to understanding of how psychosocial interventions can optimize cardiovascular health outcomes and enhance the overall well-being of patients living with this chronic condition.

Aim:

 To investigate the effect of positive affirmation on stress, anxiety and depression in patients who have cardiovascular disease. REDVET - Revista electrónica de Veterinaria - ISSN 1695-7504

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Hypothesis:

H1: Positive affirmation therapy is effective in reducing stress, anxiety and depression in patients with cardiovascular disease.

H2: There is association between the selected demographic variables and level of stress, anxiety and depression in patients with cardiovascular disease.

Methodology:

Research approach:

Quantitative approach

Research design:

Randomized controlled pretest and posttest design).

Sampling technique:

Simple random sampling technique.

Study population:

Patient's with cardiovascular disease.

Sample size:

Experimental Group (n = 30): Participants received structured positive affirmation intervention. Control Group (n = 30): Participants received usual care or a non-specific supportive therapy.

Participants Selection:

Inclusion Criteria:

Patients diagnosed with cardiovascular disease (e.g., coronary artery disease, heart failure) and with moderate to high levels of stress, anxiety, or depression.

Exclusion Criteria:

Patients with severe cognitive impairment, acute psychiatric conditions and in need of immediate intervention, or those who were unable to engage in affirmation exercises.

Intervention Protocol:

Duration: 4 weeks.

Delivery:

Daily sessions of positive affirmations tailored to address individual stressors and emotional challenges related to cardiovascular disease.

Content:

Personalized affirmations focusing on enhancing self-efficacy, promoting relaxation, and fostering a positive outlook.

Research Variable

Independent Variable: Positive affirmation therapy

Dependent Variable: Level of stress, anxiety and depression in patients with cardiovascular disease.

Description of Tool:

The tool consisted of Section A and B

Section A: Socio – demographic profile

It includes socio demographic details such as age, gender, education, and marital status were questioned.

Section B: Depression, anxiety, and pressure scale (DASS- 42)

Depression, anxiety, and pressure scale (DASS-42): depression, anxiety, and stress level (DASS-42) were developed in 1995 by Lovibond and Lovibond (Henry & Crawford, 2005). The long-form consisted of 42 items (14 parameters). This scale was based on a Likert scale including no, low, medium, and high elements. The least score for each question was zero, and the maximum score was three. Eventually, the summation of the scores of depression, anxiety, and stress was calculated for each patient. The reliability of the measure was calculated to be 0.91, 0.84, and 0.90 for the variables of depression, anxiety, and stress, respectively by using Cronbach's alpha method.

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The Statistical Package for Social Sciences (SPSS-21) software was used to analyse the obtained data. To analyse research data, based on descriptive statistics, indices of average standard deviation, frequency, and frequency percentage were used. Based on the inferential statistics, the Analysis of Covariance (ANCOVA) was used.

Table 1. Positive affirmations used in the audio recording.

S.No	POSITIVE AFFIRMATIONS
1	I will think more positively.
2	I am in control of my thoughts.
3	I am completely relaxed and comfortable in any situation.
4	I am strong, and I am aware of my strength.
5	I love myself as I am and accept myself for who I am.
6	All my muscles relax and I am filled with healing energy with every deep breath I take.
7	I am a calm, relaxed, joyful, and happy person at all times and in all situations.
8	I know that everything that happens in my life happens for my own good.
9	I know that I am always safe.
10	I have high life energy.
11	I think positive thoughts and I am surrounded by positive energy.
12	I am healthy, strong, and safe
13	My life energy is increasing day by day and I am thankful for being healthy.
14	My body is renewing itself rapidly.
15	I make choices that improve my health.
16	I lead my life as a healthy person
17	My body is always renewed by the power of love.
18	I choose to be healthy and to protect my health.
19	My body knows very well how to relax.
20	I feel much better with each passing second.

Table 2. Demographic characteristics of the subjects

Variable	Group	Frequency	Frequency percentage	Average and standard deviation
Age	30-40 40-50 50-60 60-70	5 12 6 17	12.5 30 15 42.5	37.65 ± 6.01
Gender	Male Female	33 7	82.5 17.5	
Education	No formal education Primary Higher secondary Graduated	15 6 15 4	37.5 15 37.5 10	

Table 3. Descriptive statistics of scores of research variables in the two groups according to the pretest

Component	Index	Experiment	Control
Depression	Average	17.45	15.75
	Standard deviation	2.83	3.43
Anxiety	Average	17.30	15.65
	Standard deviation	3.24	2.45
Stress	Average	20.25	20.11
	Standard deviation	2.17	2.84

Table 4. Descriptive statistics of scores of research variables in the two groups according to the post test

Table 4. Descriptive statistics of scores of research variables in the two groups according to the post test					
Component	Index	Experiment	Control		
Depression	Average	9.05	15.45		
	Standard deviation	2.39	3.42		
Anxiety	Average	8.80	15.65		
	Standard deviation	2.26	2.45		
Stress	Average	10.20	19.60		
	Standard deviation	1.60	2.76		

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Table 5. Levene test results in order to investigate the default homogeneity of variances of depression, anxiety, and stress in posttest

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Variable	Stage	F	Df1	Df2	Sig. level
Depression	Post test	0.250	1	37.5	0.620
Anxiety	Post test	0.418	1	37.5	0.522
Stress	Post test	0.569	1	37.5	0.455

Table 6. Results of multivariable ANACOVA in order to investigate the effectiveness of behavioral-cognitive

group therapy training on depression, uninerly, and stress in posteest						
Index	Sum of	Df	Mean	F	Sig. level	Squared Eta
	squares		Square			
Depression	409.601	1	409.601	46.896	0.001	0.552
Anxiety	469.225	1	469.225	82.644	0.001	0.685
Stress	883.601	1	883.601	173.076	0.001	0.821

Conclusion

This study investigated effectiveness of positive affirmation as psychological intervention for reducing stress, anxiety, and depression in patients with cardiovascular disease (CVD). The findings provide valuable insights into potential benefits of incorporating affirmation into holistic treatment approaches for managing the psychosocial aspects of CVD. Participants in the experimental group demonstrated statistically significant reductions in perceived stress levels and there was a notable decrease in anxiety and depression scores among participants receiving positive affirmations, as indicated by lower scores on the Depression, anxiety, and pressure scale (DASS-42).

Clinical Implications

The observed reductions in stress, anxiety, and depression suggest that positive affirmations can serve as an effective supportive therapy in the management of CVD. By improving emotional resilience and promoting a positive mind-set, it may contribute to improved psychological well-being and potentially mitigate the adverse effect of psychosocial factors on cardiovascular health outcomes.

Limitations and Future Directions

Sample Size: Larger studies with more diverse participant size could further validate these findings and assess the generalizability of affirmations across different demographic and clinical profiles.

Long-term Effects: Longitudinal studies are needed to evaluate sustainability of benefits beyond the study period and to identify optimal strategies for integrating affirmations into long-term care plans.

Psychosocial Support: Future research could explore the synergistic effects of affirmations in combination with other psychosocial interventions to maximize the therapeutic outcomes.

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Vol 25, No. 1 (2024)

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