

Cognitive and behavioural correlates of adjustment to disease in rheumatoid arthritis

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Background: Rheumatoid Arthritis (RA) is a chronic autoimmune disease which poses significant psychological adjustment challenges. Illness stressors; emotional, cognitive and behavioural responses; and social and environmental background are major categories in the adjustment process.

Objective: To identify modifiable cognitive and behavioural factors related to adjustment outcomes above and beyond measures of RA severity.

Methods: A sample of 297 patients with RA (81% women, mean age of 56.0 years) completed self-reports and underwent a medical examination. Disease activity, pain, fatigue, and demographics were recorded and statistically controlled for. Hierarchical multiple regressions were used to analyse data.

Results: Illness-related functional impairment (HAQ) was associated with disease activity, pain, fatigue, social support, and coping self-efficacy. Clinical variables accounted for 40.4% ($p < .001$) of the HAQ total variance. Cognitive and behavioural variables, in particular perceived social support ($\beta = -.12$, $p < .05$) and coping self-efficacy ($\beta = -.20$, $p < .05$), explained a further 4.0% ($p < .01$). The correlates of psychological well-being (GHQ-28) were disease duration, disease activity, pain, self-esteem, and coping self-efficacy. Clinical variables explained 26.3% of total variance ($p < .001$), while cognitive and behavioural factors accounted for additional 23.3% ($p < .001$); with self-esteem ($\beta = .19$, $p < .01$) and coping self-efficacy ($\beta = .35$, $p < .001$) yielding strongest associations with GHQ-28.

Conclusion: This study underscores the importance of considering complementary pathways of disease management including cognitive and behavioural factors beyond the traditional medical components. [Grant support: APVV-15-0719].

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