

Faith for Recovery

Strong religious beliefs may help protect stroke patients from emotional distress and perhaps aid recovery, a new study reports.

Researchers at the San Raffaele Pisana Rehabilitation Institute in Rome, Italy explained that emotional distress is common in the aftermath of stroke and may have a negative impact on the patient's recovery.

The study evaluated whether religious beliefs can protect from emotional distress. Data was collected from 132 consecutive inpatients who were hospitalized for stroke rehabilitation and met the research requirements (median age was 72). At admission, all study participants received a semi-structured interview on religious beliefs (Royal Free Interview for religious and spiritual beliefs) and were assessed on their mood with the Hospital Anxiety and Depression Scale. The relationship between religious beliefs and mood was explored, adjusting for possible confounders.

The study found that subjects with the highest anxiety and depression scores had the least religious and spiritually beliefs. The direction and magnitude of the association did not change after adjusting for possible confounders. The same pattern was observed when analyzing separately Hospital Anxiety and Depression Scale anxiety and depression subscales. The other significant variable was functional dependence.

Researchers speculated that people who are active in religious activities may have more social support, and that may positively influence the outcomes in stroke as well as other illnesses.

Most of the patients surveyed were Roman Catholic. The researchers note that religious coping mechanisms have been identified in non-Catholic people as well.

Researchers concluded that the strength of religious beliefs influences the ability to cope after a stroke event, with stronger religious beliefs acting as a possible protective factor against emotional distress.

There are several theories as to how prayer might be beneficial during illness, including both scientific and metaphysical explanations. It has been suggested that patients who pray for themselves or are aware that others are praying for them may develop stronger coping skills and decreased anxiety, thereby potentially improving health outcomes. Other theories include beneficial effects of prayer or "positive thinking" on the immune system, central nervous system (brain) or endocrine (hormonal) system.

The meditative, relaxing effects of prayer have been suggested to have beneficial effects such as lowering blood pressure. There are no plausible scientific explanations for the possible effects of intercessory prayers said without the knowledge of patients.

Studies of the effects of intercessory prayer on health outcomes report variable results, with some research finding benefits, and other trials noting no effects.

Reference: 1) Giaquinto S, Spiridigliozzi C, Caracciolo B. Can Faith Protect From Emotional Distress After Stroke? Stroke. 2007 Feb 15. [Epub ahead of print]

Can faith protect from emotional distress after stroke?

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BACKGROUND AND PURPOSE: Emotional distress is common in the aftermath of stroke and can impact negatively on the outcome. The study was aimed at evaluating whether religious beliefs can protect from emotional distress. **METHODS:** Data were collected from 132 consecutive inpatients who were hospitalized for stroke rehabilitation and met the research requirements. At admission all study participants received a semi-structured interview on religious beliefs (Royal Free Interview for religious and spiritual beliefs) and were assessed on their mood with the Hospital Anxiety and Depression Scale. The relationship between religious beliefs and mood was explored, adjusting for possible confounders. **RESULTS:** Subjects with over-threshold Hospital Anxiety and Depression Scale scores had significantly lower Royal Free Interview scores (odds ratio, 0.95; CI, 92 to 98). The direction and magnitude of the association did not change after adjusting for possible confounders (odds ratio, 0.95; CI, 91 to 98). The same pattern was observed when analyzing separately Hospital Anxiety and Depression Scale anxiety and depression subscales. The other significant variable was functional dependence. **CONCLUSIONS:** The strength of religious beliefs influences the ability to cope after a stroke event, with stronger religious beliefs acting as a possible protective factor against emotional distress.

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