

## **DOES HEALTH STATUS INFLUENCE ACCEPTANCE OF ILLNESS IN PATIENTS WITH CHRONIC RESPIRATORY DISEASES?**

D. Kurpas<sup>1,2</sup>, B. Mroczek<sup>3</sup>, J. Brodowski<sup>4</sup>, M. Urban<sup>5</sup>, and A. Nitsch-Osuch<sup>6</sup>

<sup>1</sup> Department of Family Medicine, Wrocław Medical University, 1 Syrokomli St., 51-141 Wrocław, Poland, dkurpas@hotmail.com

<sup>2</sup> Public Higher Medical Professional School, 68 Katowicka St., 45-060 Opole, Poland

<sup>3</sup> Public Health Department, Faculty of Health Sciences, Pomeranian Medical University, 48 Zolnierska St., 70-204 Szczecin, Poland

<sup>4</sup> Laboratory of General Practice, Faculty of Health Sciences, Pomeranian Medical University, 48 Zolnierska St., 70-204 Szczecin, Poland

<sup>5</sup> Student, Faculty of Health Sciences, Pomeranian Medical University, 48 Zolnierska St., 70-204 Szczecin, Poland

<sup>6</sup> Family Medicine Department, Warsaw Medical University, 1a, block F Banacha St., 02-097 Warsaw, Poland

The level of illness acceptance correlates positively with compliance to the doctor's recommendations, and correlates negatively with the frequency and intensity of the complications of chronic diseases. The purpose of this study was to determine the influence of the *clinical condition* on the level of illness acceptance, and find variables which have the most profound effects on the level of illness acceptance in patients with chronic respiratory diseases. The study group consisted of 594 adult patients (mean age:  $59.8 \pm 14.9$  years) with mixed chronic respiratory diseases, recruited from patients of 136 general practitioners. The average score in the Acceptance of Illness Scale was  $26.2 \pm 7.6$ . The low level of illness acceptance was noted in 174 (62.6%) patients and high in 46 (16.6%). The analysis of multiple regression was used to examine the impact of explanatory variables on the level of illness acceptance. Variables which shaped the level of illness acceptance among our patients included: the improvement of health, the intensity of symptoms, age, marital status, education level, place of residence, BMI, and the number of chronic diseases. All mentioned variables should be considered during a design of prevention programs for patients with mixed chronic respiratory diseases.