

# **Resilience In MS: Enhancing Coping Mechanisms through Nursing Practice**

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# Psychological Stressors of MS

- Neurologic conditions associated are well documented (physiologic and physical symptoms)
- Additional burdens arise from neuropsychiatric complications which are in part directly related to inflammation and demyelination
- Indirectly related to psychological effect of having to adapt to unpredictable disease course<sup>1</sup>

# Psychological Stressors of MS

- As a neuropsychiatric disease affecting young people, MS threatens personal autonomy, independence, dignity, and future plans<sup>1</sup>

# Neuropsychiatric Features

## Most Common<sup>1</sup>

- Anxiety
- Depression
- Cognitive impairment
- Irritability
- Anger

## Less Common<sup>2</sup>

- Disinhibition
- Delirium
- Psychosis
- Dementia
- Apathy
- Behavioral disturbances

1. Feinstein A. The neuropsychiatry of multiple sclerosis. *CanJPsychiatry*2004; 49: 157–63

2. Feinstein A, Feinstein K. Depression associated with multiple sclerosis: looking beyond diagnosis to symptom expression. *JAffectDisord*2001; 66: 193–98.

# Neurobiology Effects of Stress

- Sympathetic nervous system (SNS) responds to stress by ↑ heart rate, constricting blood vessels, ↑ blood pressure, and ↓ digestion.
- In response to acute and chronic stress, the hypothalamus secretes corticotropin-releasing factor (CRF), which in turn induces the release of adrenocorticotropin hormone (ACTH)
- ACTH stimulates the synthesis and release of cortisol and dehydroepiandrosterone (DHEA) from the adrenal gland<sup>1</sup>

1. Charney DS. Psychobiological mechanism of resilience and vulnerability: Implications for successful adaptation to extreme stress. *Am J Psychiatry* 2004;161:195–216.

# Neurobiology Effects of Stress

- If stress remains chronic, prolonged elevations of glucocorticoids may cause serious adverse effects, such as immunosuppression, hypertension, dyslipidemia, and osteoporosis
- In contrast to cortisol, DHEA exerts antiglucocorticoid and antiglutamatergic activity in the brain and may confer neuroprotection<sup>1</sup>

<sup>1</sup> Karlamangla AS, Singer BH, McEwen BS, et al. Allostatic load as a predictor of functional decline. MacArthur studies of successful aging. *J Clin Epidemiol* 2002;55:696–710.

# Resilience

- The capability of a strained body to recover its size and shape after deformation caused by compressive stress.
- An ability to recover from or adjust easily to misfortune or change.<sup>1</sup>

1. Merriam-Webster Dictionary. Accessed: [www.merriam-webster.com/dictionary/resilience](http://www.merriam-webster.com/dictionary/resilience)

# Neurobiology of Resilience

- Resilience seems to be associated with an ability to keep the HPA-axis and noradrenergic activity within an optimal range during stress exposure and terminate the stress response once the stressor is no longer present<sup>1</sup>



# Chronicity Effects in MS

- Fatigue over time
- Feeling defeated
- Feeling overwhelmed
- Feeling alone
- Loss of control
- Unpredictability of MS can lead to anxiety and despair

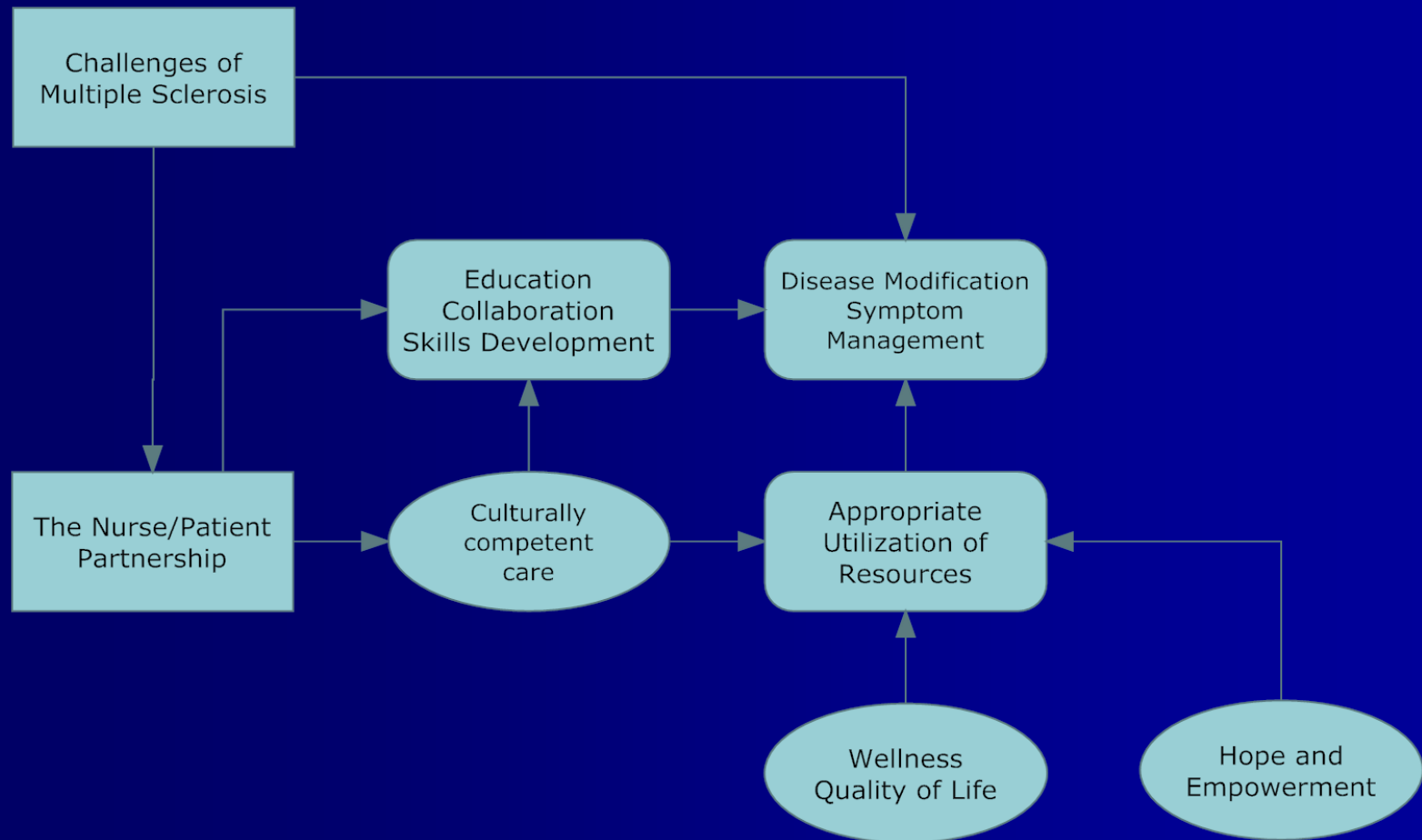
# The Power of Hope

- A person's perception of their future, whether accurate or inaccurate, has a substantial influence on their quality of life.
- Patients who expect or hope for a favorable future rate higher than pessimistic patients on HRQoL measures, regardless of what doctors think might be more realistic appraisals.<sup>1</sup>

1. Solari A, Palmisano L, Mendozzi L, et al. The impact of multiple sclerosis on health-related quality of life. *Neurology* 1999; 52(suppl2): A141

# Linda Morgante

## Conceptual Framework of HOPE



# Strategies to Enhance Coping

- Self-efficacy strongly predicts psychological adjustment to MS and is interlinked with self esteem, depression, and self-worth<sup>1,2</sup>
- Efforts should be made to involve patients in collaborative treatment<sup>3</sup>

1. Barnwell AM, Kavanagh DJ. Prediction of psychological adjustment to multiple sclerosis. *Soc Sci Med*1997; 45: 411–18.
2. Shnek AM, Foley FW, La Rocca, et al. Helplessness, self-efficacy, cognitive distortions and depression in multiple sclerosis and spinal cord injury. *Ann Behav Med*1997; 19: 287–94.
3. Riazi A, Thompson AJ, Hobart JC. Self-efficacy predicts self- reported health status in multiple sclerosis. *Mult Scler*2004; 10:61–66.

# Therapeutic Partnership Nurse and Patient/Family

- An intellectual and emotional bond that is focused on the patient/family and based on mutual trust, respect, and acceptance
  - Respects the patient/family as individual
  - Respects and accepts patient's right to chose
  - Considers ethnic and cultural aspects
  - Considers health beliefs and values
- Respects confidentiality
- Focuses on well-being
- Promotes acceptance, empowerment, well-being

# Assess Patients' Character Strengths

Abundance	Compassion	Loyalty	Restraint	Gratitude
Awareness	Confidence	Intuition	Serenity	Curiosity
Awe	Courage	Leadership	Strength	Worthiness
Acceptance	Depth	Kinship	Stability	Willingness
Accountability	Discipline	Openness	Transformation	Faith
Appreciation	Dignity	Peace	Truth	Tolerance
Aspiration	Forgiveness	Power	Vulnerability	
Beauty	Fearlessness	Presence	Vitality	
Beingness	Flexibility	Perseverance	Integrity	
Community	Generosity	Hope	Love of Learning	
Clarity	Growth	Positivity	Zest	
Choice	Grace	Responsibility	Strive for Excellence	

# Foster Resilience to Enhance Coping Skills....

- Adaptable
- See the humor in situations
- Know where to turn for help and who
- Can handle uncertainty and is not derailed by it

# Resilience.....

- Optimistic, persevering
- Feel strong as a person
- Can handle uncomfortable feelings
- Can think clearly and logically under pressure



# Resilience.....

- Generally feel in control of one's life
- Tendency to bounce back after hardship or illness
- Close, dependable relationships
- Over time like challenges because aware of capability to handle such situations

# Resilience.....

- Have sense that things happen for a reason or that later on will be able to make sense of situation to move in positive direction

# Empowerment by MS Nurses

- Facilitate goal setting
- Provide experiences with peers
- Provide affirmation
- Maximize wellness
- Encourage motivation and persistence
- Affirmation of personal value and strength

# Promote Health & Wellness

- Because a patient has a chronic illness does not destined them to be chronically ill
- Wellness is a positive striving unique to the individual in which a person can be ill and still have wellness with a deep appreciation for the joy of living and with a life purpose<sup>1</sup>

# Empowering through the Wellness Model

<b>Traditional Nursing Process</b>	<b>Wellness Nursing Process</b>
<b>Assessment</b>	<b>Implements whole person wellness; patient performs self-assessment</b>
<b>Diagnosis</b>	<b>Unique learning needs based on patient belief systems; patient determines needs</b>
<b>Outcome Identification</b>	<b>Patient determines wellness goals</b>
<b>Planning</b>	<b>Patient takes responsibility and develops plan for self-care</b>
<b>Implementation</b>	<b>Patient implements self-care and self-healing measures consistent with beliefs</b>
<b>Evaluation</b>	<b>Patient learns to self-evaluates results</b>

# Assess your patients' coping skills...

- Nursing Diagnosis: Ineffective Coping Skills....
- “Why Me?”
- “It’s not fair”....
- “Can’t”
- “Unable”

# Focus on patients' capabilities

## “What *Can* You Do”

- Changing semantics..”to myself” vs. “for myself” when it comes to medications
- MS...Crisis or Opportunity (It's the context)
- Identifying factors that are NOT unpredictable...
- Diet
- Exercise
- Sleep
- Hydrate
- Support
- Attitude

# Who Am I in the face of this?

- **"everything can be taken from a man but one thing: the last of the human freedoms—to choose one's attitude in any given set of circumstances, to choose one's own way."**
- Viktor Frankel M.D., PhD., *Man's Search for Meaning*, 1956 (Neurologist, Psychiatrist & Holocaust survivor)