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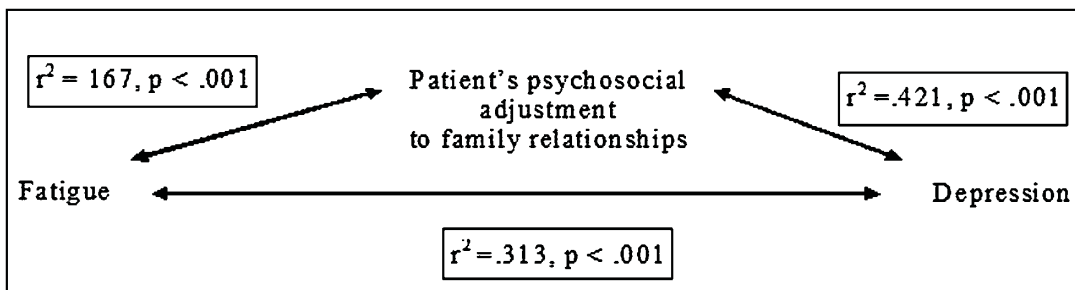
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Fatigue and Depression in Relation to Systolic Heart Failure Patient's Adjustment to Family Roles

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Fatigue and depression have been identified as important predictors of mortality in heart failure (HF) patients. Gender related differences in fatigue related to role have been reported. Depression has been demonstrated to be related to patient reported role function and not living with family members. The specific role of the HF patient's adjustment to family relationships has received little attention. **Objectives:** We studied HF patient's adjustment to family relationships and whether or not it was a significant mediator or moderator in the relationship between fatigue and depression. **Methods:** A descriptive, correlational design was used. Data were collected from 118 patients with systolic HF (EF ≤ 40%) in a tertiary HF clinic. Assessment included demographics, EF, fatigue (Profile of Mood States-Fatigue subscale), depression (Beck Depression Inventory) and patient's adjustment to family relationships (Psychosocial Adjustment to Illness Scale-Family relationships subscale). **Results:** Patients were 55.3 years old, male (89, 75.4%), white (79, 66.9%) and disabled/medically retired (58, 50%). The mean EF was 26.30 ± 6.52%. Fatigue was moderate (2.39 ± 1.11), depression mild (9.84 ± 8.30) and patient's adjustment to family relationships fair (1.64 ± .47). There were significant relationships between fatigue and patient's adjustment to family relationships (r = .409, p < .001), fatigue and depression (r = .559, p < .001) and patient's adjustment to family relationships and depression (r = .529, p < .001). Patient's adjustment to family relationships was not a significant mediator or moderator in the relationship between fatigue and depression in patients with systolic HF.



Conclusions: The patient's adjustment to family relationships was related to fatigue and depression, but the patient's adjustment to family relationships was neither a moderator nor mediator of the relationships. Interventions targeted at strengthening the patient's adjustment to family relationships may help to reduce fatigue and depression in patients with systolic HF.