Coping Mechanisms and Resources for Patients Suffering from Rosacea

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KEYWORDS

• Psychosocial • Quality of life • Support • Disease burden

KEY POINTS

- Rosacea is a dermatologic condition with significant quality-of-life and psychosocial impact.
- Patients may seek psychosocial support and coping mechanisms for rosacea, and physicians can help empower patients by being aware of available resources.
- Coping mechanisms and resources may optimize quality-of-life and psychosocial impact outcomes in patients with rosacea.

INTRODUCTION

The face has major significance in nearly every facet of human interaction, including social relationships, romantic life, and business relationships. Rosacea is a chronic, relapsing dermatologic condition that has a profound impact on how patients view themselves, how others view patients, and how patients believe others view them. Rosacea sufferers may experience social stigmatization and psychosocial detriment. Rosacea is a highly impactful condition is associated with depression, anxiety, embarrassment, social phobia, and stress. 1-7 the authors highlight the resources available to rosacea patients.

METHODS

MEDLINE and PsycINFO databases were searched to identify articles pertaining to rosacea coping resources. The term "rosacea" was

searched in combination with "patient resources," "coping," "dealing with," "blog," "forum," "support," "nonpharmacologic," and "psychological." The authors assumed the patients' perspective by searching all available links pertaining to rosacea coping resources within the first 10 pages of a Google query with the aforementioned terms. Results that were linked to organizations with clear financial incentives to providing patient resources were excluded.

RESULTS Biopsychosocial Approach to Rosacea Management

In approaching patients with chronic dermatologic conditions, several resources advocated a biopsychosocial approach, understanding that rosacea may affect social status, romantic relationships, and self-esteem. 8-12 A biopsychosocial approach considers that there may be a wide

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range of psychological sequelae among rosacea patients. This approach establishes a therapeutic atmosphere that is both empathetic and reassuring. Practitioners inquire about quality-of-life impact and validate patients' distress. 12 Physician acknowledgment that patients' psychosocial status may be negatively impacted by rosacea could motivate patients to openly discuss their experiences. 13 Differences between a patient's assessment of disease severity and a provider's assessment of disease severity may suggest that a patient is experiencing psychosocial detriment due to their rosacea. 13 Patients may experience a substantial improvement in quality of life by acknowledging the chronic, relapsing nature of the condition. 14

Patient Educational Resources

Multiple websites provide patients with information about the cause, pathogenesis, symptoms, clinical features, triggers, and treatment options for rosacea. This information is presented as patient-friendly material without extensive medical jargon. A rosacea diary, available through the National Rosacea Society, allows patients to log their rosacea flares and identify triggers. This resource may be a source of empowerment for patients because they are able to use their entries in collaboration with their dermatologist and as a means to limit rosacea flares.

Online Social Support Communities

People with chronic disease who do not have strong personal support networks are especially likely to use online social support systems to fulfill social needs.²² Online sources allow for increased information sharing of disease-specific knowledge and can empower patients.²² For individuals that prefer anonymity, there are specialized online forums that discuss the emotional nuances of rosacea and ways to cope. 23,24 Online support groups may be the most widely used social platform in chronic disease management, offering patients peer support, social acceptance, understanding, and validation.²² Since patients may not feel comfortable discussing certain topics with their physician, these social media outlets may serve as a more comfortable forum to share experiences and concerns.²⁵ Contemporary social site use in patients with chronic disease can improve patient care by providing social, emotional, or experiential support.^{26,27} Social media platforms, such as Facebook, have dedicated rosacea support groups, providing a sense of community. 28-30 These social network sites have more active users than standard online support groups (Table 1).22

DISCUSSION

Since dermatologic conditions may be directly visible to the public, they tend to have significant psychosocial and quality of life impact. An international study on implicit association that included 6831 participants from 8 countries confirmed that the facial erythema of rosacea is strongly associated with perception of poor health and negative personality traits.31 Individuals with erythematous rosacea are less likely to be perceived, on initial impression, as relaxed, healthy, and well.³¹ Patients that have more severe physical symptoms tend to have more severe psychological symptoms.²⁻⁵ In a retrospective study assessing 608 million dermatology visits, the odds ratio for depressive disease in patients with rosacea was 4.81.2 Anxiety, embarrassment, social phobia, and stress are common comorbidities in rosacea sufferers. 1,4-6

Patient education improves quality of life of those living with chronic inflammatory skin conditions. 32,33 Physicians might consider routinely providing rosacea patients with educational materials to clarify and emphasize the importance of treatment adherence and establish realistic treatment goals.34 By fully understanding the chronic, relapsing nature of rosacea, patients may be better equipped to cope with the frustration of symptom recurrence. Enhancing self-efficacy, a person's perceived capability to perform actions required to achieve concrete goals, leads to improved motivation, behaviors, patterns of thought, and emotional well-being.35 Self-efficacy, a significant determinant of coping ability, can be enhanced by critically analyzing the cause of physiologic symptoms and persuading the patient to adhere to behavioral changes, such as trigger avoidance and treatment compliance, which may modify the course of rosacea.35,36 By providing rosacea patients with educational and social support, patient self-efficacy may be enhanced. Self-efficacy has been instrumental in optimizing coping ability in several chronic ailments, including chronic pain, fibromyalgia, and irritable bowel disease. 37-39 Patients may not feel comfortable fully disclosing their concerns to their physician. In these instances, an online community setting or forum may be beneficial.²⁶

Patients with limited access to or knowledge of the Internet may have trouble using the resources mentioned in this review. Even with ideal medical therapy, rosacea is a chronic disease that often relapses. Although this condition is not medically dire, it may cause considerable psychosocial distress. ⁴⁰ Physicians who are aware of coping resources for patients may be better equipped to optimize patients' outcomes.

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