

P03-245

ANGER, SOCIAL DYSFUNCTION AND PSYCHOPATHOLOGICAL DISTRESS IN HEARING- IMPAIRED PATIENTS

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It has been demonstrated that subjects suffering from hearing impairment present significant emotional reactions and socio-situational limitations when compared to controls (Monzani et al., 2008).

Aim: To evaluate the relationship between hearing loss severity, anger expression, perceived handicap, social dysfunction and psychopathological distress in adult patients suffering from acquired hearing loss.

Method: 297 hearing impaired subjects were consecutively recruited by the ENT Clinic of the Modena and Reggio Emilia University from 1/1/07. Each patient were submitted to pure-tones audiometry and the pure tone average threshold (PTA) was calculated over 0.5, 1, 2, 4 kHz. Socio-demographic data were collected (age, educational level, employment, marital status). Every patient was also administered the following questionnaire in their Italian validated version: Social Functioning Questionnaire, Brief Symptom Inventory, Hearing Handicap Inventory for Adults, State-Trait Anger Expression Inventory-2. Descriptive statistics were used to assess sociodemographic data; Pearson correlation coefficient was used to investigate relationships between test scores and hearing loss level.

Results: Mean age was 53.79 (SD \pm 13.65); 44.8% were males. Hearing impairment level didn't significantly relate with objective social functioning level ($p=.311$), but with the subjective emotional and socio-situational perceived handicap ($p=.000$); moreover it significantly correlates with individual psychopathological tendency to phobic reaction ($p=.006$) and to anger general expression index ($p=.021$). Furthermore it directly relates with state anger ($p=.021$) and inversely relates with external expressed anger ($p=.023$).

Conclusion: Anger felt but not expressed might be a key element in determining subjective social impairment in hearing loss patients and contribute to their well-known psychological distress.