E1.2: Symptom distress, depression, functional status, and health-related quality of life among older adults with arthritis

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Abstract:
Introduction: Arthritis affects over 46 million adults in the U.S. and is the leading cause of disability. Arthritis seldom results in death but may have substantial affects on an individual’s physical and psychological wellbeing and ultimately their overall health-related quality of life (HRQOL). The purposes of this study were to examine the relationships of pain, fatigue, depression, functional status, and HRQOL among older adults with arthritis, and to explore these relationships by race. The revised Wilson and Cleary HRQOL model was used as the conceptual framework. For this study, HRQOL was measured on two dimensions: physical and mental.

Method(s): A descriptive, correlational design was used in the study. A convenience sample of 110 older adults, aged 60 or older, provided data through face-to-face interviews. The Symptom Distress Scale, Geriatric Depression Scale Short Form (15 item), Instrumental Activities of Daily Living (IDAL) scale, and Medical Outcomes Study Short Form (SF-36) Health Survey were used to measure pain, fatigue, depression, functional status, and HRQOL.
**Results:** This sample included mostly black (59.8%) females (74.1%) with an average age of 73.84 (SD = 8.954). The total model significantly predicted HRQOL (pain, fatigue, depression, and functional status). The model accounted for 47% of the variance in the physical HRQOL (F=31.351, p<.001), and 52% of the variance in the mental HRQOL (F=38.493, p<.001). Interestingly, depression was the only variable that was not a significant predictor of physical HRQOL and IDAL (functional status) was not a significant predictor of mental HRQOL. Significant differences existed between older Black and White adults on symptoms, depression, and HRQOL (p<.05).

**Discussion & Conclusions:** Pain, fatigue, depression, and functional status are important factors in predicting HRQOL for older adults with arthritis but differed by the dimensions of HRQOL. These findings support the need for targeted interventions aimed to assist older adults with better arthritis management in an effort to improve their physical and mental HRQOL. Further research is needed exploring racial differences related to HRQOL.

**Abstract History:**
This abstract has not been presented or accepted for presentation in whole or in part at the SNRS or other scientific meeting.

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