Hirsutism and Quality of Life with Aspects on Social Support, Anxiety and Depression

av

Maria Palmetun Ekbäck

Akademisk avhandling

Avhandling för medicine doktorsexamen i medicinsk vetenskap, med inriktning medicin som kommer att försvaras offentligt fredagen den 13 december 2013 kl. 13.00 Bomanssonsalen, Universitetssjukhuset Örebro

Opponent: Professor Andrew Finlay
Department of Dermatology and Wound Healing, Cardiff University School of Medicine, Cardiff, England

Örebro universitet
Institutionen för hälsovetskap och medicin
701 82 Örebro
Abstract

Maria Palmetun Ekbäck (2013): Hirsutism and Quality of Life with Aspects on Social Support, Anxiety and Depression. Örebro Studies in Medicine 98.

Hirsutism is excessive hair growth in women. The prevalence is estimated at 5%. The aim of this thesis was to describe different aspects of how life is affected for women suffering from hirsutism. Both qualitative and quantitative methods were used. Study I showed that hirsutism deeply affects women’s experiences of their bodies in a negative way and was experienced as a life sorrow. In Study II the patient-physician relationship was described. The patient-physician relationship from the patient’s perspective was suboptimal, as most meetings included feelings of being rejected and even humiliation. In Study III the aim was to translate and psychometrically evaluate an instrument that measures perceived social support, “The Multidimensional Scale of Perceived Social Support” (MSPSS). The translation was performed according to WHO:s official process, and validation was performed in a sample that consisted of 281 participants, 127 women with hirsutism (main sample) and 154 nursing students. MSPSS had good psychometric properties with regard to factor structure, construct validity, internal consistency and reproducibility. Study IV described different aspects of HRQoL in the main sample, the correlation of anxiety, depression, level of hairiness, age and BMI. The F-G scores were dichotomized into minor (F-G ≤14) and major (F-G≥15) hair growth. Higher levels of hair growth were significantly correlated to a lower level of QoL measured by DLQI, EQ-5D and symptoms of both anxiety and depression measured by HADS. Study V investigated if social support was associated with quality of life and outcome of HRQoL compared to a reference group of women (n=1115). SF-36, the MSPSS and the F-G scale were used. Compared to the reference group, women with hirsutism reported lower quality of life in all dimensions of SF-36 (p<0.01) The dimension most affected was vitality (VT=41.2), which had a lower value than has been reported for patients with MS and myasthenia gravis. A Multiple Regression Analysis showed a significant relation between quality of life and social support, indicating its importance for the ability to adapt, in spite of low quality of life.

Keywords: hirsutism, HRQoL, EQ-5D, DLQI, HADS, SF-36, MSPSS.

Maria Ekbäck, Department of Dermatology, Örebro University Hospital Örebro University, SE 70182 Örebro, Sweden.
E-mail: maria.palmetun-ekback@orebroll.se