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ALEXITHYMIA, DEPRESSION AND QUALITY OF LIFE IN PATIENTS WITH CHRONIC PAIN: A STUDY ON 205 PATIENTS WITH FIBROMYALGIA SYNDROME.

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Pain in Fibromyalgia Syndrome (FM) is often accompanied by a heterogeneous series of other symptoms, including psychological distress and alexithymia, which strongly interferes with social and work performance and affects patients’ quality of life (Sturge-Jacobs, 2002; Mease, 2005). The present study aims to evaluate the specific impact that alexithymia and psychological distress, together with pain, have on the health related quality of life (QoL) in patients with FM. In particular, the mediation role of depressive symptoms was analyzed in order to deeper the relationship between alexithymia, depressive symptoms and patients’ QoL. Socio-demographic, clinical and psychological data from 205 female patients with a main diagnosis of FM were consecutively collected and analyzed. The results showed the presence of clinically relevant levels of depressive and anxiety symptoms in the 61% and 60% of the patients, respectively, and the presence of alexithymia in 26% of the patients. The results of the hierarchical multiple regression analyses showed that the daily disability and the low QoL were influenced not merely by pain intensity, but also by the presence of psychological distress and alexithymia. In particular, regarding the physical components of QoL, pain and depressive symptoms explained the 52% of the variance (p < .001), with alexithymia showing a significant indirect effect through the mediation of depressive symptoms. Regarding the mental components of QoL, depressive, anxiety symptoms and alexithymia, together with pain, significantly explained the 63% of the variance (p < .001), with alexithymia showing both a direct and an indirect effect. Taken together these data underline once again the importance to evaluate the presence of alexithymia in patients with FM, since it plays an important role in worsening the impact that this chronic pain pathology has on the patients’ QoL, with both a direct and an indirect effect, mediated by the depressive symptoms.