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Title and Authors: Experiences of macular disease and the UK health care system. Jan Mitchell, Peggy Bradley, Stephen Anderson, Timothy ffytche, Clare Bradley.

Objectives: To examine the relationship between experiences with health professionals and long-term well-being in people with macular disease (MD).

Methods: A self-administered questionnaire was completed by 1421 (71%) of a sample of 2000 randomly selected MD Society members; 69% women, mean age 76. Question topics included: satisfaction with consultations, knowledge and supportiveness of GPs, provision of information about MD and experience of visual changes, including hallucinations. The 12-Item Well-Being Questionnaire (Bradley 2000), shown elsewhere to have good reliability for this MD population, was included.

Results: Participants who were dissatisfied with their diagnostic consultation had poorer well-being than those who were satisfied ($t=4.69$, $df=1277$, $p<0.001$). Those who did not think their eye specialist was interested in them as a person had poorer well-being than those who did ($t=5.06$, $df=1290$, $p<0.001$). There were significant positive correlations between well-being and perceived GP knowledge ($\rho =0.095$, $p<0.01$) and GP supportiveness ($\rho =0.063$, $p<0.05$). Provision of inadequate information was associated with poorer well-being ($t=11.329$, $df=1073$, $p<0.001$). Experiencing hallucinations was associated with poorer well-being ($t=3.78$, $df=1083$, $p<0.001$), particularly when explanations were inadequate/inaccurate.

Conclusion: The results show that unsatisfactory experiences with health professionals are associated with poorer long-term well-being in MD. It may be that i) unsatisfactory consultations may damage long-term well-being, ii) health professionals have less satisfactory consultations with depressed/anxious patients. Causality will be investigated in a planned prospective, longitudinal study.