

## P2517

**IMPORTANCE OF HOPE IN PARTICIPATION AND AUTONOMY IN PATIENTS WITH MULTIPLE SCLEROSIS**L. Pedro<sup>1</sup>, J.L. Pais Ribeiro<sup>2,3</sup><sup>1</sup>ESTESL\_IPL, Lisbon, <sup>2</sup>FPCE-UP, <sup>3</sup>Psychology, FPCE-UP, Oporto, Portugal

Multiple sclerosis (MS) is a chronic neurological disorder that affects young adults. Characteristically, MS appears between the ages of 20 and 40 and affects approximately 1 million adults in the world. Evidence has indicated that hope in EM may help to protect, eliminate or reduce the problems of physical and mental illness. The object of this study is to describe the importance of hope in the participation and autonomy, of patients with MS. This was an exploratory and descriptive study. Setting: A general Hospital in Lisbon, Portugal. Participants: 280 patients with MS. We explored the relationship between hope and participation/autonomy. The instruments used were: the Hope Scale (has two dimensions: agency and pathways) and Impact of Participation and Autonomy (IPA) (has five dimensions: autonomy indoors, family roles, autonomy outdoors, social life/relationships and work/education).

**Results:** The correlation between the hope scale and the domains of IPA: agency/autonomy indoors ( $r=0.28$ ,  $p<0.05$ ); agency/family roles ( $r=0.39$ ,  $p<0.05$ ); agency/autonomy outdoors ( $r=0.43$ ,  $p<0.01$ ); agency/social life/relationships ( $r=0.47$ ,  $p<0.01$ ); agency/work/education ( $r=0.55$ ,  $p<0.01$ ); pathways/autonomy indoors ( $r=0.25$ ,  $p<0.05$ ); pathways/family roles ( $r=0.35$ ,  $p<0.05$ ); pathways/autonomy outdoors ( $r=0.34$ ,  $p<0.05$ ); pathways/social life/relationships ( $r=0.40$ ,  $p<0.01$ ); pathways/work/education ( $r=0.46$ ,  $p<0.01$ );

**Conclusion:** There is a statistically significant correlation between the variables, suggesting that hope can play an important role in the participation and autonomy of patients with MS, especially in domains as: social life/relationships and work/education.

## P2518

**THE PERCEIVED STIGMA OF THE DISEASE ON QUALITY OF LIFE IN PEOPLE WITH MULTIPLE SCLEROSIS**L. Pedro<sup>1</sup>, J.L. Pais Ribeiro<sup>2</sup>, R. Menezes<sup>3</sup>, I. Silva<sup>3</sup>, H. Cardoso<sup>4</sup>, D. Mendonça<sup>4</sup>, E. Vilhena<sup>4</sup>, M. Abreu<sup>2</sup>, A. Martins<sup>5</sup>, A. Martins-da-Silva<sup>6</sup><sup>1</sup>ESTESL\_IPL, Lisbon, <sup>2</sup>FPCE-UP, <sup>3</sup>Universidade Fernando Pessoa, <sup>4</sup>ICBAS, <sup>5</sup>Hospital Sto. António, <sup>6</sup>Hospital de Santo António (Centro Hospitalar do Porto), Oporto, Portugal

Multiple sclerosis (MS) is a chronic neurological disease, characterized by a broad spectrum of physical, emotional and social impairments. The perceived stigma of the disease may be an important factor on the quality of life of these patients. The aim of the study is to examine the perception of the disease's stigma in relation to the quality of life, in patients with MS.

**Methods:** This is a cross-sectional and correlation study. We used the SF-36 questionnaire, which measures health related quality of life. It is an 8 domains scale and two components from de scales physical and mental health, and a stigma scale. 101 MS patients participated in this study. The mean age was 40 years, 65.3% were women, 64.4% were currently married, most worked, and the mean schooling level of 14 years.

**Results:** The correlations between the Scale of Stigma and Scale or domains of SF-36 were the following: Physical Health ( $r=0.27$ ,  $p<0.01$ ), Physical Role Limitations ( $r=0.31$ ,  $p<0.01$ ), Emotional Role Limitations ( $r=0.32$ ,  $p<0.01$ ), Pain ( $r=0.27$ ,  $p<0.01$ ), Well-being ( $r=0.36$ ,  $p<0.01$ ), Energy ( $r=0.31$ ,  $p<0.01$ ), Health in General ( $r=0.39$ ,  $p<0.01$ ), Social function ( $r=0.42$ ,  $p<0.01$ ). When studying components of physical and mental health that we analyzed: Component Physical health ( $r=0.39$ ,  $p<0.01$ ). Component Mental health ( $r=0.43$ ,  $p<0.01$ ). Correlations are all statistically significant.

**Conclusion:** Results show that all domains of the quality of life scale (SF-36) correlate with the stigma scale and are statistically significant. The correlation with the mental component is higher than with the physical component.

## P2519

**Abstract cancelled**