INSTITUTO SUPERIOR DE PSICOLOGIA APLICADA

HEALTH PSYCHOLOGY MASTHER

MASTHER THISES

"The Effects of Providing Information to Patients in Emergency Room on Psychological and Physical Outcomes"

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2008

Ph.D. Yori Gidron thanks for the encouragement, support in data treatment, suggestion and friendship. Ph.D. Isabel Leal thanks for the supervision and support. Centro Hospitalar de Lisboa Ocidental, E.P.E. and Emergency Room thanks for making these data available. Nurse Ana Luísa and Nurse Florinda Galinha thanks for the text revision. Thanks my husband, mother and father for their love and emotional support.

RESUMO

A Urgência é um serviço que envolve sentimentos negativos e tudo é inesperado. O objectivo deste estudo foi compreender os efeitos psicológicos e físicos da intervenção psicológica nos utentes do Serviço de Urgência. A amostra incluiu 72 utentes (36 em cada grupo) do Centro Hospitalar de Lisboa Ocidental, E.P.E. com lesões moderadas, seleccionados por amostragem não aleatória acidental. As variáveis demográficas incluíram idade, género, estado civil, nível de educação, grau das lesões, patologias e se os utentes queriam a informação. As variáveis estudadas foram ansiedade, percepção de controlo, percepção de certeza, frequência cardíaca e pressão arterial. Os resultados demonstram que a intervenção teve um efeito significativo nas variáveis, observando-se uma diminuição da ansiedade e um aumento da percepção de controlo e de percepção de certeza nos utentes submetidos à intervenção. Por outro lado, verificaram-se diferenças estatisticamente significativas nas avaliações biomédicas. A conclusão deste estudo centra-se no facto de uma intervenção psicológica poder ter um efeito psicológico e físico significativo no utente. Este estudo contribui para a demonstração do efeito muito importante que uma intervenção simples e pouco dispendiosa pode ter nos cuidados de saúde.

Palavras-Chaves: serviço de urgência, ansiedade, percepção de controlo, percepção de incerteza.

ABSTRACT

The Emergency Room is a service that involves negative feelings and where everything is unexpected. The goal of this study was to understand the psychological and physical effects of psychological intervention in Emergency Room patients. The sample consists of 72 patients (36 patients for each group) at the Centro Hospitalar de Lisboa Ocidental, E.P.E. with moderate injuries, selected through an accidental non-random sampling. Background included was age, gender, marital status, education levels, injury-severity, disease and if patients wanted the information. Studied variables included anxiety, perceived-control, certainty, heart rate and blood pressure. The outcome reveals, on the one side, that the intervention had a significantly effect on the studied variables, implying a decrease of anxiety and an increase of the perceived control and certainty of the intervened patients. On the other side, there were found statistically significant differences found in evaluated biomedical measures. The conclusion of this study is that a psychological intervention can have significant effects in patients both on psychological and physical levels. This contributed to demonstrate the importance of this simple and inexpensive intervention in health care.

Key Words: emergency room, anxiety, perceived-control, perceived-uncertainty.

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INTRODUTION

Today, the care of patients, the approach and quality of this care, are subjects of great importance for the Health Care system. Bibliographic research shows the importance of information for patients in various contexts, i.e. the intensive care unit and surgery care. Similarly, it is very important to give attention to this theme especially in Emergency Rooms. It is well know that the Emergency Room is a stressful and uncertainty creating area in a hospital and the patients may experience psychological and physical discomfort. Negative feelings are associated with Emergency Rooms and with hospitalization, due to the separation from family and friends, the dependence of others, the disturbed everyday life and the implementation of new rules (Zee, Huet, Cazemira, and Evers, 2002). These feelings probably are connected to various issues, one of which is patients' needs in this context, namely the need for information from the services and health professionals. It is important to further investigate this question particularly in the Emergency Room, and understand the role of information in patients' psychological and physical well-being in this critical context.

Though the issue of information and patient-needs has been investigated in many studies, this has not been dealt with in depth in relation to Emergency Rooms. Thus, this study wished to test the effects of an intervention aimed at informing patients on their levels of certainty, control, anxiety and cardiac parameters in patients attending an emergency room.

Background

Injuries and illnesses generally occur without patients expecting them, resulting in psychological and physiological changes (Biancofiore, Bindi, Romanelli, Urbani, Mosca & Filipponi, 2005; ENA, 2000; Sheehy, 2001). In these circumstances, anxiety is considered an adaptive response to a situation, which can

occur from the unknown or can be seen as a threat (for example in illness) (Bolander, 1998; ENA, 2000). Although it is considered a normal response to a situation, when it is disproportional and persistent, it can lead to the patient's inability to adapt. The state of anxiety can manifest in several physical, emotional, cognitive and behavioural ways (e.g. palpitations, tachycardia, an increase of blood pressure, discomfort or thoracic pain, breathing difficulties, dizziness, faint, fear of losing control, nausea, abdominal pain or discomfort and sweating) (ENA, 2000). These symptoms are explained by the connection between the environments, its perception and the patient's Central Nervous System.

Various functions of the Central Nervous System are automatic and unconscious and are responsible for many functions (e.g. distribution of blood flux, maintenance of tissue perfusion, regulation of Blood Pressure, control of glands (Landsberg & Young, 2002; Williams & Dluhy, 2002). The autonomous and automatic functions are under the responsibility of the autonomic nervous system, formed by two sub-systems: the sympathetic nervous system and the parasympathetic nervous system (Landsberg & Young, 2002). These systems have antagonistic functions that permit the balance of the organisms' functions and both are influenced by anxiety, stress, physical and emotional factors. The sympathetic nervous system functions to mobilize the organisms' recourses for the defence action, while the parasympathetic nervous system has the opposite function (Williams & Dluhy, 2002). In a situation of illness the sympathetic nerve activity enhanced and heart rate and blood pressure increase, responding to stress (Ziegler, 2004). Moser et al. (2007) showed that anxiety is associated with increasing of risk of in-hospital arrhythmic and ischemic complications.

Other essential factors in the interaction with the environment is the perceived control which is generally defined as the actual control one thinks he or she has over a situation (Faranda, 2001). White (1959) cited by Faranda (2001) defined control "*as the need to demonstrate one's competence, superiority, and mastery over the environment*" (page 1260). The absence of control has negative impact on a person as an individual, on physical health, behaviour and motivation (Pallant, 1999). Skinner & Greene (1995) refers that the "*loss of control is one of the few forms of psychological trauma that researchers can agree is universally*

aversive" (page 3). The patients feel better when they believe that they can choose and exercise some control (Krupat, Fancey and Cleary, 2000). A lower level of perceived-control is connected with higher risk of complications, according to findings in a study developed by Moser et al. (2007). Another important concept which correlates with perceived control is perceived uncertainty.

Perceived uncertainty occurs when the demands of the situation are ambiguous, complex, unpredicted or when information is inefficient or inconsistent (for example, in chronic illness situations) (Brashers, 2001). This perception appears when people experience insecurity about their knowledge and in Brushers' opinion *"because it is primarily a self-perception about one's own cognitions or ability to derive meaning, a person who believes himself or herself to be uncertain is uncertain"* (Brashers, 2001, page 478). Uncertainty is related to the self, others, relationships and other aspects of a context. In health services, patients can question the way theirs illness in deal with, the hospital's diagnostic skills, their beliefs about the treatment, the procedures and the meaning of the tests. We believe that uncertainty is environment-related especially in health services, because patients don't know how to deal with: the illness, the diagnosis, the treatment... Some interventions can possibly reduce uncertainty since they clarify to the patient his/her situation and options. Some studies indicate that patients without disease remain uncertain after medical procedures (Lucock, Morley, White & Peake, 1997; Petrie et al, 2007). In the context of the emergency room, these are rarely even known even to the staff, hence it is clear why patients could experience uncertainty.

The anxiety, perceived control and perceived uncertainty are three interlinked concepts and according to research, it can be seen that information can positively or negatively influence these concepts (Brashers, 2001; Ryu e Eyuboglu, 2007). Information can be used to influence these three concepts in many directions, because *"information gathering serves the purpose of differentiating options, finding options and creating options"* (Langer cited by Brashers, 2001, page 482). The information is the way to explain to patients the health care they are being subjected to and a way to increase the perceived control and reduce the uncertainty and anxiety. Study results demonstrate that psychological interventions and information

can reduce the anxiety of patients (Barbero, 2005; Biancofiore et al., 2005; Depasse, Schroeder, Dumont, & Vicent, 2000; Philippe et al, 2006).

Recently, communication and information have been considered as highly important in helping patients (Leydon et al, 2000). Health professionals' responses during critical or emergency stressful periods can affect the emotional well-being of patients and their families (Hemmelgarn, Glisson and Dukes, 2001). The concept of information, usually obtained from patients, includes presenting written and oral data in order to provide important facts about health and social history as well as actual state, reactions, evolution and care given or to be given (Thelan, Davie, Urden & Lough, 1996). It is important to provide information to patients because it prevents them from having inadequate perceptions and to enables them choices, power and increases the patient autonomy (Guennoc, Samjee, Jousse-Joulin, Devauchelle, Roudaut & Saraux, 2007).

By law, health professionals must inform the patients about the treatment and procedures and obtain their informed consent for certain techniques. The information provided to patients is one item of the Patient's Rights and Duties Charter and of Portuguese Code of Deontology of the Nurses and Doctors. However, these documents state that the patient has the right to be informed about his/her health situation, in a clear and simple language, respecting his/her sensitivity and cognitive abilities. However, these documents also states that the patient can choose not to be informed about his/her health condition and can suggest other persons to receive this information. The preferences of each patient for information can be different and the health professionals have to evaluate this individual characteristic.

The health professionals should have the competence to give this information and there are various aspects which should be transmitted to the patient, including: information about the cause of illness, information about the treatment that the patient will receive, information about the side effects of the treatment and information for the patient to make a cognitive understanding of his/hers health situation (Durá, 1998; Firmino, 2004). This information should be provided in a clear, frequent and understandable way and at an appropriate moment (Barbero, 2005; Durá, 2000). The same authors state that the information given to the patients

can be considered important health and care indicators (Barbero, 2005; Biancofiore et al., 2005; Depasse, Schroeder, Dumont, & Vicent, 2000; Philippe et al, 2006). The lack of information probably influences the perception of patients, especially when they are in hospital, where patients may experience great difficulties to adapt to their situation. Such uncertainty concerning their diagnosis and prognosis calls for special sensitivity to their need for information.

Available information probably reflects the reaction to this environment and influences on patient satisfaction (Krupat et al., 2000). If patients had more information about their illness and treatment, they could feel less anxious, more confident and more in control over their situation, since their anxiety is connected with loss of control and with uncertainty (Andrade & Gorenstein, 1998). Moser et al. (2007) showed that patients with higher levels of perceived-control have lower anxiety and also that these psychological factors are predictors of complications in patients hospitalized for acute myocardial infartation. Also, perceived control is interlinked with patients' well-being, anxiety and stress (Coyle & Sculco, 2003). Information is a way to demonstrate to patients that they are being treated, and it could be a way to increase perceived control and reduce uncertainty and anxiety.

The ENA (2000) adds that the patient's necessities centralize in three concepts, namely the necessity of information, the necessity of compassion and the maintenance of hope. One study showed that in the identified factors, many were linked to the lack of information and the lack of control and uncertainty of the situation and illness (Biancofiore et al., 2005). According to the Ankem revision (2005) the information about the illness and the treatment is the most important type of information for patients with cancer. Meredith et al. (1996) refers that almost all patients wanted to know about their diagnosis as well as about prognosis, treatment options and side effects. Another study made by Depasse et al (2000) reveals that patients state that verbal information was more important than written information and would like to receive more information than that was provided to them. Lithner & Zilling (2000) made a study about pre and postoperative information needs, in 40 patients admitted to open cholecystectomy, and their conclusion was that patients wanted information in admission and at discharge and they wanted written and verbal information. The same conclusion was reached by Guennoc, Samjee, Jousse-

Joulin, Devauchelle, Roudaut and Saraux (2007) in their study: most patients would like to receive more and additional information about the procedures.

But, based on research, it is not sufficient that the health professional provides the information to the patients, it is necessary that the information be adapted to patients. This adjustment increases the patients' knowledge about their care and helps them feel more active and participating in their health-care. Johansson, Nuutila, Virtanen, Katajisto and Salanterä (2005) said that "*patients are empowered when they have the knowledge, skills, attitude and self-awareness they need to influence their health behaviours and situations*" (page 213). The patients' health education can be categorized into biophysiological (symptoms and signs), functional (daily activities, illness and care), cognitive (receive information and skills to use them), social experiential expectations (feelings), ethical (appreciation as unique and individual) and financial (Leino-Kilpi et al. cited by Johansson, Nuutila, Virtanen, Katajisto and Salanterä (2005).

Most studies come down to the same conclusion: the information provided by the health professionals, allows the patient to better adapt and accept their situation as well as a better acceptance of the treatment (Biancofiore et al., 2005; Davies, 2000; Depasse et al., 2000; Guennoc et al., 2007; Kinnersley et al., 2007; Ma, Warren, Phillips & Stanek, 2006; Petrie et al., 2007). According to some studies, patient's anxiety is strongly connected to reduced communication between patients and professionals and information given to patients can be the first step in helping anxious patients (Guennoc et al., 2007; Ma et al., 2006; Petrie et al, 2007; Philippe et al, 2006).

Philippe et al. (2006) made a study with the objective of checking the effects of video information in patients undergoing coronary angiography. Two groups were made, 100 patients had conventional education conducted by the physician and 100 patients had consent in the conventional manner by video information. In this study, the investigators obtained the anxiety scores and the hemodynamics measures, heart rate, systolic and diastolic blood pressure, before and after of informed consent. In this study, the investigators verify that information had benefits for the patient and information on video had more impact on anxiety and heart rate than verbal

information. Similar results about anxiety were obtained in a study by Danino et al. (2005) in aesthetic surgery. In this study, eighty patients were studied and separated in two groups, one group was assigned to the CD ROW and the other didn't have the image group. In this CD ROW the procedures of aesthetic breast reduction or abdominoplasty is explained and images of good and poor results and all complications. While they did not test differences in knowledge about complications in surgery they did find improvements in global knowledge. On the other hand, Davies (2000) found that a high level of satisfaction with verbal information was associated with lower scores of anxiety and depression. Guennoc et al. (2007) evaluated the quality of information in patients that underwent fluoroscopy-guided procedures (intervention rheumatology) and evaluated the impact on patient's experience of the procedure. In this research, 119 patients were studied for associations between the information supplied and patient's expectations. In their results, most patients received information about procedures (62,8%) but the majority (74,8%) would have liked to receive additional information. The anxiety was more common in patients that had their first intervention, in patients that received no information about adverse effects and in patients that received written information. In this study, the level of information does not influence the pain severity. The major conclusion of this study was that oral information is very important and that it is necessary to optimize the patient's information about interventional rheumatology.

However, according to the meta-analysis by Johansson, Nuutila, Virtanen, Katajisto and Salanterä (2005), which describes the education in preoperative orthopaedic patients and the effects of this education on the current literature, the education interventions produce positive results in knowledge but the effects on anxiety are limited. In this meta-analysis the investigators analysed 11 articles, involving 1044 patients, about preoperative patient education in surgical nursing. Some educational interventions proved to reduce anxiety, but others studies reported no effects. Nonetheless, this study verified that education can reduce the pain and increase the sense of control, adherence to rehabilitation instructions, compliance and self-efficacy. The conclusion of this meta-analysis was that empowerment by education should be recognized as one important component in health, because *"patients have to assume more and more responsibility for their care, and in this*

situation it is crucially important to take into account the patient's own resources" (Johansson, Nuutila, Virtanen, Katajisto and Salanterä; 2005; page 221).

In a study made by Coyle & Sculco (2003), patients with better communication with their health professionals, specifically doctors and nurses, had more perceived control about their treatment and illness. Sørlie, Busund, Sexton, Sexton and Sørlie (2007) state that when patients feel that they are active participants and are encouraged to ask questions, the treatment outcomes are better.

Novaes et al. (1999) found that one stressor in the Intensive Care Unit was connected with the notion of loss the control - for example, not knowing the things that will be done, the inability to move and having no control over oneself. This perception was linked to the climate of not involving the patient and, as well as with little perceived control, with lack of information (Brashers, 2001; Ryu e Eyuboglu, 2007). In contrast, another study involving workers, found that sharing information decreased perceived uncertainty in individuals (Ryu e Eyuboglu, 2007). According to Novaes et al. (1999) the patient can benefit from having knowledge about the disease and his treatment, but not all patients want to know this information and this is a complex question. Johansson, Nuutila, Virtanen, Katajisto and Salanterä (2005) alerted to one important factor, if we need to understand the impacts of information on patients, we need to measure these effects in studies.

Shelley and Pakenham (2007) showed that health locus of control and self-efficacy moderates the effects of a psychological intervention in surgery patients. These investigators studied a total of 80 coronary artery bypass patients about psychological distress, pain, serum cortisol and tumor necrosis factor alpha, in admission and at discharge. The results demonstrated that when there is a high external locus of control, the preparation was related to lower distress for patients with high self-efficacy, but when there is a low external health locus of control, the preparation was related to lower distress to lower self-efficacy. Ko & Hsu (2005) made a study concerning information needs, health locus of control and uncertainty in women hospitalized with gynaecological disease. This study demonstrated that this patients have a substantial information need and uncertainty may be elevated by decreasing the information needs as moderated by beliefs of their health outcomes

and locus of control. This study reveals that information needs and its benefits were depended among various factors, like health locus of control, self-efficacy and uncertainty.

Petrie et al. (2007) did an investigation with the objective to knowing whether information about routine tests improves patients' reassurance and reduces anxiety about symptoms. For this, the investigators included 92 patients with chest pain, who underwent a diagnostic exercise stress test, but the information that they received was different. They were divided into three groups. The control group (n=28) received standard information, the pamphlet group (n=30) received a pamphlet explaining the test and the meaning of normal test results, while the discussion group (n=34) received the same pamphlet and had a brief discussion about the meaning of normal test results. The measured outcomes were patients' reported reassurance (immediately after and one month later) and the proportion of patients with chest pain and with cardiac drugs after one month. They found higher levels of reassurance in the discussion group (42.0, 95% confidence interval of 39,7 to 44,2) compared to the pamphlet group (39.2, 36,1 to 42,3) and the control group (35.8, 31,6 to 39,9) and this difference was maintained after one month. Concerning chest pain, the investigators reported that patients mentioned a significantly decrease in the discussion group (17%) and pamphlet group (28%) but not in the control group (36%) at one month.

However, level of reassurance before the interventions was not assessed in this study. Nevertheless, these results show that higher levels of reassurance can be achieved by providing patients one discussion session. On the other hand, these groups also had differences in the symptom of chest pain after one month, the discussion group reported less pain (17%) compared to the pamphlet group (28%) and the control group (36%). This fact is important because at the beginning of this study, all patients had chest pain. These results suggested that some explanation about a routine medical test integrated in a discussion session may have had good effects in symptoms of patients and reassurance. However, the correlation between chest pain and reassurance was not known, and it would have been interesting to know this information, in order to deepen our understanding.

Another study by Krupat, Fancey and Cleary (2000) investigated the association between patient-information and the evolution of care in surgical patients. This study included an interview by telephone to 3602 patients in various hospitals to identify the relationship between the patient's information, patient characteristics and global evolution of care. The investigators identified in a 30 items interview four interpretable factors - surgical information, recovery information, general information and sensory information. Patients' perceived control was correlated with general information (r = 0,37) with surgical information (r = 0,35) and with sensory information (0,31). Perceived control was positively associated with information received and correlated with satisfaction (r = 0,36) and the general information was correlated with satisfaction (r =0,41) as well. In sum, this study demonstrates that information that patients receive may be important for patient-satisfaction and for perceived-control. However they did not directly test whether perceived control was a mediator between information and patient-satisfaction or patient-outcomes.

Sørlie, Busund, Sexton, Sexton and Sørlie (2007) made a study to test the impact of an information intervention on emotional recovery in patients undergoing coronary artery bypass surgery. This study was based on video information combined with individualized sessions at admission and near discharge from the hospital by a nurse. The experimental group received this intervention and patients were helped to express their questions and difficulties and received information. The control group received standard information and didn't see the video. At discharge, the intervention group demonstrated less anxiety (M = 30,1; SD =8,4) and better subjective health (M = 11,6; SD =5,5) than the control group (M = 32,6; SD =8,4 and M = 13,1; SD =4,4 respectively). The experimental group demonstrated less anxiety up to 1 year ($0{,}042 \geq p \geq 0{,}004$), better subjective health in the whole follow-up ($0{,}040 \geq p \geq 0{,}000$) and less depression from 6 months to 2 years ($0{,}023 \geq p \geq 0{,}004$). In this study, the control group had negative correlations between the values of anxiety (r = - 0,27), depression (r = - 0,37) and subjective health (r = - 0,18) two weeks following discharge from hospital. There were no such systematic negative or positive associations in the intervention group that suggest that the intervention had an impact and was a protective factor for negative characteristics.

These investigators concluded that the effects of their intervention were related to the video information and the individualized sessions, however, they could not distinguish whether the video or sessions were responsible for the effects. It would have been of interest had this study also investigated perceived control and perceived uncertainty and their relationships with anxiety, depression and subjective health. As with the previous study, this latter study did not assess these variables before the intervention.

Generally, the information given to the patients is little or at times is not understood by them (Kinnersley et al., 2007). Many studies have been done around this theme in order to understand the importance and quality of information and the patient's opinion concerning it (Barbero, 2005; Biancofiore et al., 2005; Depasse, Schroeder, Dumont, & Vicent, 2000; Kinnersley et al., 2007; Philippe et al, 2006). Many studies and programs were developed to provide information and to increase the communication with patients (Krupat, Fancey and Cleary, 2000).

The emergency room

These studies demonstrated the importance of paying more attention to patients' participation in their care and increase their own skills and abilities in health care and the psychological and biomedical consequences of such steps. In the Emergency Room, these preoccupations increase, therefore, it is important to understand some aspects of this service, which can interfere with the communication and information process. The Emergency Room responds to situations of urgency/emergency in a hospital. This service has many recourses and rules to provide multiple types of care to patients in a critical state and who are politraumatized as well as to individuals that feel alone and abandoned, therefore including thousands of people a month (Sheehy, 2001).

The Emergency Room includes doctors, nurses and other professionals in adequate and necessary numbers to serve the population of a given area. This service must include the minimal resources to respond to many and diverse medical situations. For many individuals, the Emergency Room is the health establishment they have more contact with, which has a lot of impact on the individual, family and the community (Sheehy, 2001). In some situations, the recourses of the Emergency

Rooms do not meet the demand - too many diverse biomedical conditions and too many people. This increases the levels of confusion, medical errors and the system's malfunction. With these characteristics, the Emergency Room could indeed contribute to diverse negative psychological and physical reactions. When a patient goes to the Emergency Room, he or she usually experience pain, injury, fear of death and uncertainty about the situation. This relates to an unknown diagnosis, uncertainty about treatment and medication, and one's prognosis and implications for one's quality of life. This may induce the increase of anxiety, less perceived control and heightened uncertainty (ENA, 2000). Muntlin, Gunningberg & Carlsson (2006) studied the patients' perception of quality of care at the Emergency Room and identified areas for quality improvement. In this study, these investigators showed that environmental, pain relief, information on self-care and interest about their situation were the points for quality improvement.

In the Emergency Room, patients may have negative feelings concerning hospitalization and the situation is unknown (ENA, 2000; Sheehy, 2001). These responses may influence patients' recovery since stress can influence wound healing and recovery from surgery (Novaes et al.,1999; Sheehy, 2001). It is well known that the Emergency Room, is a stressful area in which patients feel psychological and physical discomfort (Sheehy, 2001). In this area, the patient is in a different environment, with unfamiliar people, and he or she may not have a perception of control over their present life and body (ENA, 2000; Sheehy, 2001). On other hand, they must undergo treatment. Furthermore, patients and staff often do not know what happened to the patient and the severity and consequences of the problem can be unknown as well (ENA, 2000). In many cases, patients are without family company, which could reduce social support.

Biancofiore et al. (2005) show that missing the husband/wife and the impossibility to see the family and friends was one of 5 stressors in ICU. In such circumstances that create anxiety and stress, it is difficult to support the well-being and the recovery of patients. However, some studies demonstrated that in similar services that are stress-inducing, like Intensive Care Units or Surgical Services, it is possible to help patients to have less anxiety and more control over the situation with information interventions. In one study by Muntlin, Gunninberg and Carisson (2006)

patients felt they did not receive useful information and needed more attention by nurses and physicians. They also showed that most problems were connected with nursing care and this demonstrates the importance of nursing care in the emergency room.

Summarizing, communication and information are not, in any way, the only factors that influence the patient's physical condition, anxiety and perceived control, however, they can provide competency to decide and choose in a conscious manner the various treatment options and understand what is happening to him or her. This empowerment could reduce anxiety and uncertainty. Varies studies demonstrated the importance of information in patients' satisfaction and responses, and suggested that investigators and clinicians should pay more attention to this area. Information is important not only to help patients understand their situation and disease, but also for decision-making and coping (Ankem, 2006; Ma, Warren, Phillips & Stanek, 2006). Information interventions by nurses can help to "humanize" the Emergency Room and could provide psychological comfort for patients directly, and for their families indirectly.

Nowadays, the importance of health care quality is debated in great lengths and the importance of information is linked to this matter, since it allows the patient a more balanced approach in trying to overcome unexpected situations in health care. According to Leydon et al (2000) it is a challenge for health professionals to know how to provide the appropriate information to their patients and to understand the benefits of this information. In modern medicine, the patient is the centre of the health care and for this reason, health professionals must provide information to their patients. This provides the patient essential knowledge to perceive control over their situation. These aspects are very important for the care in health services because if information alone has an effect on control and on patient comfort in Emergency Rooms, providing it can be put in practice very easily and without heavy financial implications.

Some studies reveal the relationship between information and anxiety and illness recovery, the importance of giving information to patients, the needs of the patients, in many hospitals contexts. However, according to my knowledge, no study

tested the effects of information given to patients in the Emergency Room. Based on the studies reviewed here, it is important to know if information given to patients has positive or negative effects in the Emergency Room.

Therefore, the aim of this study is to understand the physical and psychological effects of information given by health professionals to patients who wait in the Emergency Room. With the intention of answering this issue, the following hypotheses were generated: patients provided more information would report less anxiety, higher perceived control and lower perceived uncertainty than patients with usual care? In addition, it was hypothesized that: patients with more information would have lower Blood Pressure and Heart Rate responses than patients with usual care?

To conduct this study, the objectives were: (1) to develop an intervention to inform patients in the Emergency room about expected procedures, duration and to provide incoming up-dated new information about diagnostic procedures; (2) assess the anxiety after the intervention; (3) assess the perceived control after the intervention; (4) assess the perceived uncertainty after the intervention and (5) measure the Blood Pressure and Heart Rate before and after the intervention.

1. METHODOLOGY

Setting

The study took place in Portugal, in the ER of the Centro Hospitalar de Lisboa Ocidental, more precisely in the Hospital de São Francisco Xavier. The collection of data began on January 2008 until March 2008.

Design

This study used a quasi-experimental design – patients arriving to the ER on certain days were in the uncertainty-reduction condition (experimental group) while those arriving on other days received treatment as usual (control group). The experimental group occurred on even days (Mondays, Wednesdays and Fridays) in ER areas where the investigator was. The control group was occurring on odd days (Tuesdays and Thursdays). Measures of uncertainty, perceived control, anxiety, heart rate, diastolic and systolic blood pressure were obtained before the intervention and prior to discharge.

Participants

The inclusion criteria in this study were men and women, over 18 years old, with a non-life threatening acute medical problem, arriving to the ER of Hospital São Francisco Xavier, in Portugal, being able to provide consent for the study, able to communicate, with equal or less than 5 on the pain scale, and a priorities of Manchester Triage System level of urgent, a bit urgent or not urgent. The exclusion criteria included loss of consciousness, > 5 on the pain scale, or whose mental confusion did not enable their participation (due to intoxication, medication or cognitive impairment). The study was approved by the Ethics Committee of that hospital.

Procedure

First, we explained the study and obtained the informed consent by the patients. Before the intervention we measured blood pressure, heart rate and assessed uncertainty, perceived control and anxiety. On even days, patients received the experimental information, while on odd days, patients were controls. Prior to discharge, patients were reassessed on all measures. In cases where patients could not read or write, the informed consent and the questionnaires were read to them by the investigator, and patients' responses were noted by the investigator.

Intervention

Both groups have the same contact with investigators and that contact happens in the emergency room. The uncertainty-reduction intervention (experimental group) provided general information/explanations about the possible waiting time, medication, symptoms, diagnosis and when to expect more information. First, the investigator explains the procedures and the reason for them, in clear and understandable language. In situation that requiring the use equipment or exams, the investigators explain them and if necessary repeat the information. Second, give information about the waiting time and give the patient as many choices as possible (e.g. choice of positioning and waiting place, allow contacting the family). Third, ask if the patient needs more information, whether he/she wants to speak with a health professional. In this intervention, the investigator gives realistic information without taking away hope; emphasize what the patient can do, to increase perceived control and reduce helplessness (e.g., you can move, read, speak with people, walk to the toilet, etc.). The investigator has contact before, during and at the end of the intervention, in some situation there is one more contact (situation that was necessary more medication or procedures). The investigators spent between 10 and 20 minutes with each patient, depending on the procedures and situation of the patients.

The control group received the usual information without intervention. This included giving the information about the procedure and medication, ask if they had

doubts and telling were they must wait. The investigators provided the information without structuring the intervention and without giving many choices to patients.

The patient samples and groups obtained in an alternating manner, depending on the area where the investigator was present. Due to the ER organization, patients that had access to one of the areas of the ER (according to their symptoms and priority), usually did not have access to other areas, reducing patients' contact across groups. The contact between the two groups was further reduced by using alternating intervention/control days. All this reduced the possibility of contact and "contamination" between groups. This way, we minimized biases, false patient-responses and disturbance in the ER.

Measures

Background information

This included age, gender, civil state, school level, co-morbid illnesses, diagnosis (reason for arriving at the ER) and symptoms. We used the ISS to estimate illness severity (Kingston & O'Flanagan, 2000).

Outcome measures

The psychological measures determined were anxiety, perceived control and perceived uncertainty. To evaluate the anxiety, we used the Visual Analog Scale (VAS). This scale was based on a valid and reliable tool for assessing perceived-stress with a 100mm horizontal scale with intensity anchors (Sneed et al., 2001). Sousa & Silva (2005) refers that this VAS is very sensitive, simple and universal. In this way this scale can be used in different situations with various specifications and deferent cultures. In the present study, this scale was used to assess the perceptions of anxiety by self-report, as a 100mm horizontal with 2 anchors (0=no anxiety; 10=the worst anxiety I've ever felt) (based on Sneed et al., 2001). The patients were instructed to put one circle or cross in the number that revealed his/her anxiety in that moment (Sneed et al., 2001). The higher the value, the stronger was the intensity of anxiety felt by the patient. In the study by Sneed et al. (2001) they verified that VAS scores had a strong correlation with State Trait Anxiety Inventory scores ($r = 0.74$;

p=0,005). These investigators thus considered that VAS as a valid measure of anxiety or of stress (Sneed et al., 2001).

To evaluate perceived control, the following additional item scale was used: "How much control do you have in this situation?", which was assessed with a Likert scale, that varied between 1 to 5 (1= I don't have control at all; 5= I have total control). The higher the value, the higher the perceived control was by the patient (Gidron, Armon, Gilutz & Huleihel, 2003). To evaluated the perceived uncertainty the following additional item were used in a positive way: "Do you know what will happen to you in this situation?", using a 1 to 5 scale (1= I am completely uncertain about what will happen to me; 5= I fully understand what will happen to me). The higher the value, the smaller was the perceived uncertainty perceived by the patient.

The biomedical measures included systolic and diastolic blood pressure and heart rate, which were evaluated by the investigator in two moments, namely, before and after the intervention in the two groups. To measure the heart rate and blood pressure, the investigators used Dinamap automated blood pressure recorder.

Sample Size

The sample size was calculated by information from a pilot-study, using one psychological measure and the statistic program EpiCalc 2000 (Gilman & Myatt, 1998) to estimate sample sizes, assuming the intervention effect would be 20%. In this pilot-study we used the Visual Analog Scale of Anxiety in 6 patients and found a mean anxiety of M=5.9 and SD=1.9. Assuming a 20% effect size, a statistical significance of $p < .05$ and a power of 0.80; the required estimated sample size was 72 patients in total (36 for experimental group and 36 to control group).

Statistical analyses

We first examined equality of groups at baseline using t-tests for continuous measures and chi-square tests for categorical data. An analysis of variance (ANOVA) was used to compare the results between the groups over time, for each outcome variable. Time served as the within-subjects factor (pre, post) and group

served as the between-subjects factor (experimental, control). We statistically controlled for variables which were either thought to affect the outcomes or that were found to do so in correlation analysis between each background variable and each outcome. Thus, the final analysis included an ANCOVA, controlling for age, marital states, education and others characteristics, like, injury-severity, diabetes, coronary heart disease, cancer and cholesterol problems.

2. RESULTS

In this study, 72 patients were included, and assigned to the control group (N=36) or the experimental group (N=36). The study took place between January and March of 2008.

Baseline data

Table 1 presents the background characteristics of the patient's sample. In both experimental and control groups, 7 patients (19.44%) had cardiac disease. In experimental group, 1 patient (2.78%) didn't have cancer disease versus 3 patients (8.33%) among controls. Concerning diabetes, 4 patients (11.11%) had diabetes, 3 patients had diabetes type I and 1 had diabetes type II in each group. In the experimental group, 15 patients (41.67%) underwent surgery versus 17 patients (47.22%) in control group. In the experimental group, 8 patients (22.22%) did smoke versus 10 (27.78%) were ex-smokers and 6 (16.67%) smoked in control group. Finally, 8 patients (22.22%) of experimental group had cholesterol problems versus 10 patients (27.78%) in control group.

TABLE 1 – Background characteristics of patient's sample.

Group		Experimental Group	Control Group
Age			
	Mean	46,50	53,22
	N	36	36
	Std. Deviation	17,08	20,94
Gender			
	Women	22 (61,11%)	27 (75%)
	Men	14 (38,89%)	9 (25%)
Marital Status			
	Married/ Living Together	22 (61,11%)	17 (47,22%)
	Single	9 (25%)	9 (25%)
	Divorced/ Widowed	5 (13,89)	10 (27,78%)
Number of years of education			
	Mean	7,94	7,53
	N	36	36
	Std. Deviation	5,12	4,94

In the experimental group, 10 patients (27.78%) had priority yellow (urgent in priorities of Manchester Triage System), and 26 patients (72.22%) had priority green (a bit-urgent). In the control group, 17 patients (47.22%) had priority yellow and 19 patients (52.78%) had priority green. In neither group were there patients with priority blue (not-urgent).

In the experimental group, 23 patients (63.89%) had no injury, 7 patients (19.44%) had minor injury and 6 patients (16.67%) had moderate injury. In the control group, 24 patients (66.67%) had no injury, 11 patients (30.56%) had minor injury and 1 patient (2.78%) had moderate injury. The patients' symptoms were variable, but in the two groups, the most common symptom was pain, 21 in the experimental group and 20 in the control group.

TABLE 2 – Symptoms of patients in experimental and control groups

Group	**Symptoms of patients**											
	Pain	Vomits/ Nauseus	Breathing difficulties	Palpitations/ Tachycardia	Dizziness/ Faint	Wound	Edema Legs	Cough	Fadigue	Diarrhoea	Itch	Travel accident
Control (n=36)	20	2	2	5	0	2	0	0	1	2	1	1
Experimental (n=36)	21	1	1	3	1	2	1	3	0	1	1	1
Total (n=72)	41	3	3	8	1	4	1	3	1	3	2	2

Concerning information, 33 patients (91.67%) of the experimental group usually wanted to receive information about the procedures, medications and treatments when going to health services and only 3 patients (8.33%) said they didn't want such information. In controls, 34 patients (94.44%) usually wanted such information and only 2 (5.56%) said they didn't want information.

TABLE 3 – Baseline values of psychological and biomedical data before the intervention.

Group		Psychological			Biomedical		
		Anxiety	Perceived Control	Perceived Certainty	Heart Rate	Sistolic Blood Pressure	Diastolic Blood Pressure
Control	Mean	5,14	2,81	2,69	76,11	137,31	74,72
	N	36	36	36	36	36	36
	Std. Deviation	2,59	1,45	1,37	11,13	24,02	13,00
Experimental	Mean	5,14	3,08	2,89	80,11	153,14	84,19
	N	36	36	36	36	36	36
	Std. Deviation	2,65	1,36	1,19	12,00	30,91	12,55
Total	Mean	5,14	2,94	2,79	78,11	145,22	79,46
	N	72	72	72	72	72	72
	Std. Deviation	2,60	1,40	1,28	11,67	28,62	13,56

There were not significant differences on any background characteristics including age, sex, education level, marital status, triage, AIS score and biomedical characteristics, between both groups.

Outcomes

Anxiety was positively correlated with Systolic Blood Pressure but not significantly ($r = 0.215$, $p = 0.069$). This correlation suggests that the more anxious a patient, the higher of systolic blood pressure evaluated. Perceived-control was significantly positively correlated with perceived-certainty ($r = 0.795$, $p = 0.001$). The perceived-certainty was significantly positively correlated with perceived-control ($r = 0.795$, $p = 0.001$). This means that patients with a higher perception of control have a higher perception of certainty and these two psychological factors are connected among themselves. The Heart Rate was significantly positively correlated with Diastolic Blood Pressure ($r = 0.286$, $p = 0.015$). The Systolic Blood Pressure was positively correlated with anxiety ($r = 0.215$, $p = 0.069$) and significantly positively correlated with Diastolic Blood Pressure ($r = 0.577$, $p = 0.001$). The Diastolic Blood Pressure was significantly positively correlated with Diastolic Blood Pressure ($r = 0.577$, $p = 0.001$). No other significant correlations emerged after the analysis, as seen in Table 4.

TABLE 4 – Associations between psychological factors and biomedical factors before intervention.

		Anxiety	Perceived Control	Perceived Certainty	Heart Rate	Systolic Blood Pressure	Diastolic Blood Pressure
Anxiety	Pearson Correlation	1	-,071	,127	,082	,215	,112
	Sig. (2-tailed)		,553	,286	,493	,069	,351
	N	72	72	72	72	72	72
Perceived Control	Pearson Correlation	-,071	1	,795(**)	,061	-,177	-,115
	Sig. (2-tailed)	,553		,000	,613	,137	,336
	N	72	72	72	72	72	72
Perceived Certainty	Pearson Correlation	,127	,795(**)	1	,062	-,062	-,042
	Sig. (2-tailed)	,286	,000		,605	,608	,729
	N	72	72	72	72	72	72
Heart Rate	Pearson Correlation	,082	,061	,062	1	,162	,286(*)
	Sig. (2-tailed)	,493	,613	,605		,174	,015
	N	72	72	72	72	72	72
Systolic Blood Pressure	Pearson Correlation	,215	-,177	-,062	,162	1	,577(**)
	Sig. (2-tailed)	,069	,137	,608	,174		,000
	N	72	72	72	72	72	72
Diastolic Blood Pressure	Pearson Correlation	,112	-,115	-,042	,286(*)	,577(**)	1
	Sig. (2-tailed)	,351	,336	,729	,015	,000	
	N	72	72	72	72	72	72

* $p < 0,05$ (2-tailed) ** $p < 0,01$ (2-tailed)

Table 5 depicts associations between all background and each psychological factor. Anxiety was only significantly negatively correlated with AIS (r = - 0.266, p = 0.024). Perceived-control was significantly positively correlated with having cancer (r = 0.250, p = 0.034) and education level (r = 0.275, p = 0.019) and negatively correlated with age (r = - 0.385, p = 0.001). Perceived-certainty was significantly positively correlated with education level (r = 0.256, p = 0.030) and marital status (r = 0.243, p = 0.040) and negatively correlated with age (r = - 0.343, p = 0.003). This suggest that patients that were married/union of fact or divorced/widower and with more years of education had a higher perceived-certainty.

TABLE 5 – Associations between background and psychological factors post-intervention.

	Triage	AIS	Cardiac	Cancer	DM	Surgery	Smoke	Chol	Symp	W_Inf	Age	Sex	Educ	M_Sat	Time
Anxiety															
Pearson Correlation	-,153	-,266*	-,067	-,123	,046	-,043	,004	-,160	,091	,162	,113	-,025	-,222	,066	,109
Sig. (2-tailed)	,198	,024	,577	,305	,698	,719	,973	,179	,446	,173	,344	,836	,061	,582	,360
Perceived Control															
Pearson Correlation	,204	-,027	,140	,250*	-,061	,177	-,002	,214	-,015	-,075	-,385**	,046	,275*	-,229	-,211
Sig. (2-tailed)	,085	,823	,242	,034	,610	,137	,988	,071	,903	,532	,001	,700	,019	,53	,075
Perceived Certainty															
Pearson Correlation	,169	,075	,131	,194	,36	,109	-,005	,198	-,039	-,055	-,343**	-,102	,256*	-,243*	-,224
Sig. (2-tailed)	,159	,533	,274	,102	,764	,361	0,969	,096	,744	,646	,003	,392	,030	,040	,059

* $p < 0,05$ (2-tailed) ** $p < 0,01$ (2-tailed)

Table 6 depicts associations between all background and each biomedical factor. Systolic blood pressure was positively correlated with age ($r = 0.466$, $p = 0.001$) and marital status ($r = 0.413$, $p = 0.001$) and negatively correlated with cardiac disease ($r = - 0.413$, $p = 0.001$), cancer ($r = - 0.327$, $p = 0.005$), *diabetes mellitus* ($r = - 0.298$, $p = 0.011$), high cholesterol ($r = - 0.286$, $p = 0.015$) and education level ($r = - 0.480$, $p = 0.001$). This means that married/union of fact and divorced/widower had a higher increase of systolic blood pressure. Diastolic blood pressure was only significantly positive correlated with age ($r = 0.236$, $p = 0.046$) and negatively correlated with sex ($r = - 0.269$, $p = 0.022$) and education level ($r = - 0.291$, $p = 0.013$). These correlations suggest that gender influences the diastolic blood pressure, i.e. male patients had higher diastolic blood pressure than female patients. Finally, heart rate wasn't significantly correlated with any of the background factors.

TABLE 6 – Associations between background and biomedical factors post-intervention.

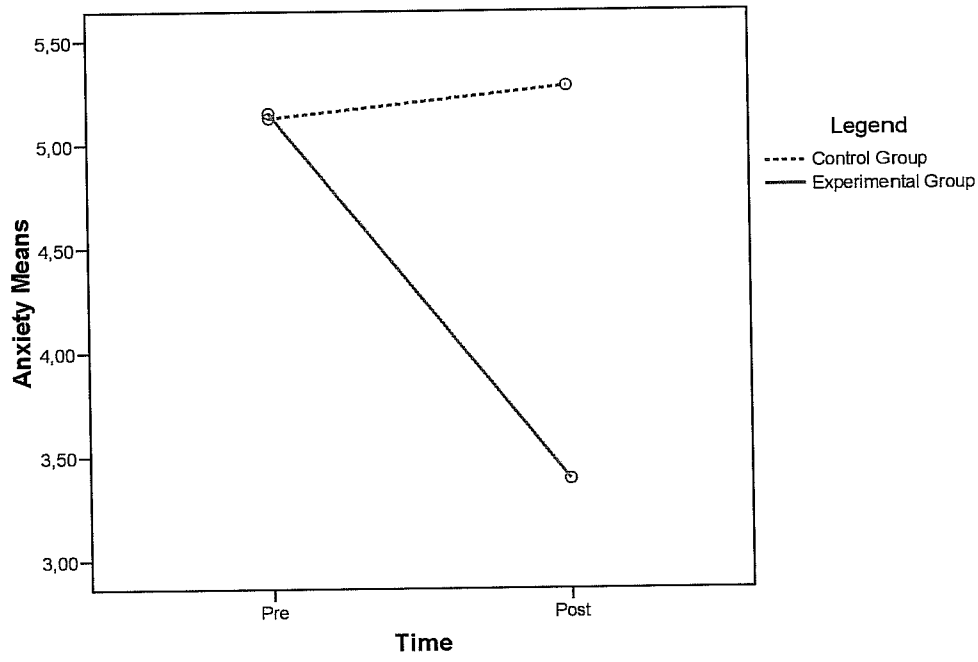
	Triage	AIS	Cardiac	Cancer	DM	Surgery	Smoke	Chol	Symp	W_Inf	Age	Sex	Educ	M_Sat	Time
Heart Rate 2															
Pearson Correlation	-,125	-,221	-,027	-,048	,039	-,057	-,177	-,151	,097	,004	,069	-,041	-,179	-,096	,153
Sig. (2-tailed)	,297	,062	,824	,688	,744	,632	,138	,205	,415	,974	,565	,735	,133	,423	,200
Systolic Blood Pressure 2															
Pearson Correlation	-,140	,106	-,413**	-,327**	-,298*	-,066	-,037	-,286*	,042	,086	,466**	-,120	-,480**	-,413**	,019
Sig. (2-tailed)	,241	,375	.000	,005	,011	,579	,755	,015	,725	,475	,000	-,317	,000	,000	,873
Diastolic Blood Pressure 2															
Pearson Correlation	-,026	,015	-,025	-,039	,019	-,033	-,011	-,194	,097	-,101	,236*	-,269*	-,291*	,090	,139
Sig. (2-tailed)	,828	,900	,833	,747	,872	,784	,355	,103	419	,399	,046	,022	,013	,455	,243

* $p < 0,05$ (2-tailed) ** $p < 0,01$ (2-tailed)

To analyse the results, we selected for each outcome the covariates that predicted the outcome (see table 5 and 6) and added some covariates known from the literature.

In line with our hypotheses, differences were found in anxiety between the experimental group and control group, controlling background and biomedical factors. Using ANOVA, the analysis showed a significant time x group interaction in relation to anxiety after intervention [$F(1,59)=18.45$, $p<0.001$] with the covariates sex, AIS and whether the patient wanted information, see at figure 1.

FIGURE 1 – Effects of group x time on Anxiety in the Emergency Room



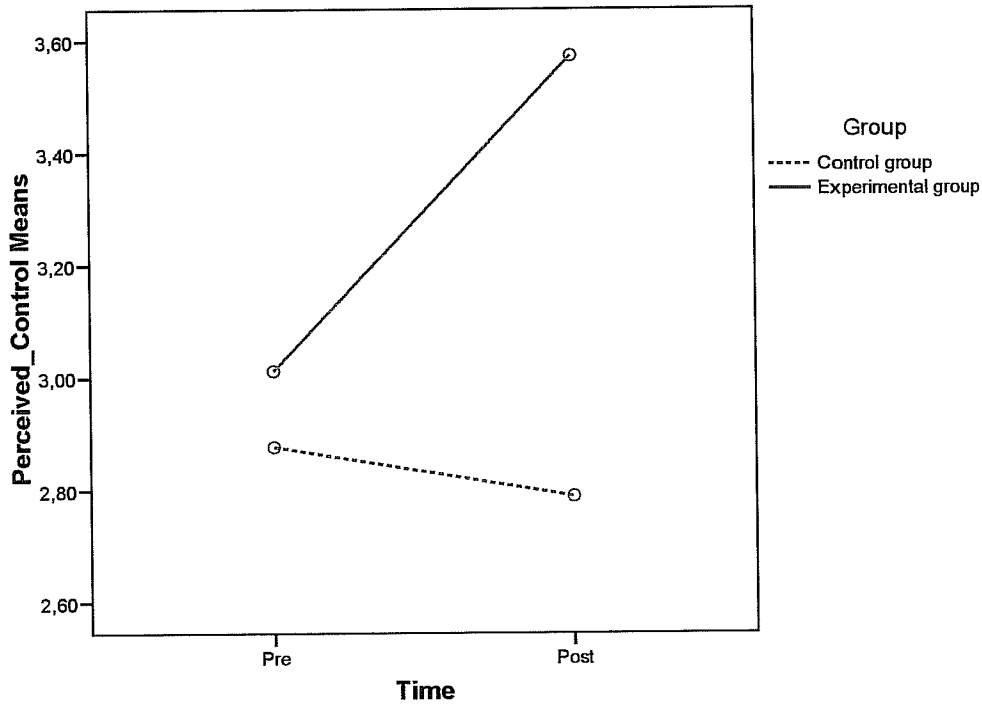
Our results using ANOVA reveals a "group effect" at post-intervention, that is, in pre-intervention there are no differences between the two groups [F(1,59)=0.001, p=0.971], but in post-intervention a statistically significant effect was determined [F(1,59)=8.98, p=0.004]. Table 6 reports that patients of the experimental group had significantly less anxiety (M=3.36, SD=2.14) than patients in the control group (M=5.31, SD=3.12).

TABLE 7 – Anxiety mean comparison between experimental group and control group

Group		Anxiety Pre-intervention	Anxiety Post-intervention
Control Group	Mean	5,14	5,31
	N	36	36
	Std. Deviation	2,59	3,12
Experimental Group	Mean	5,14	3,36
	N	36	36
	Std. Deviation	2,65	2,13
Total	Mean	5,12	4,33
	N	72	72
	Std. Deviation	2,60	2,82

In line with our hypotheses, a significant time x group interaction was found in relation to perceived-control [F(1,59)=4.96, p=0.029] with the covariates cancer disease, age and education level, see at figure 2.

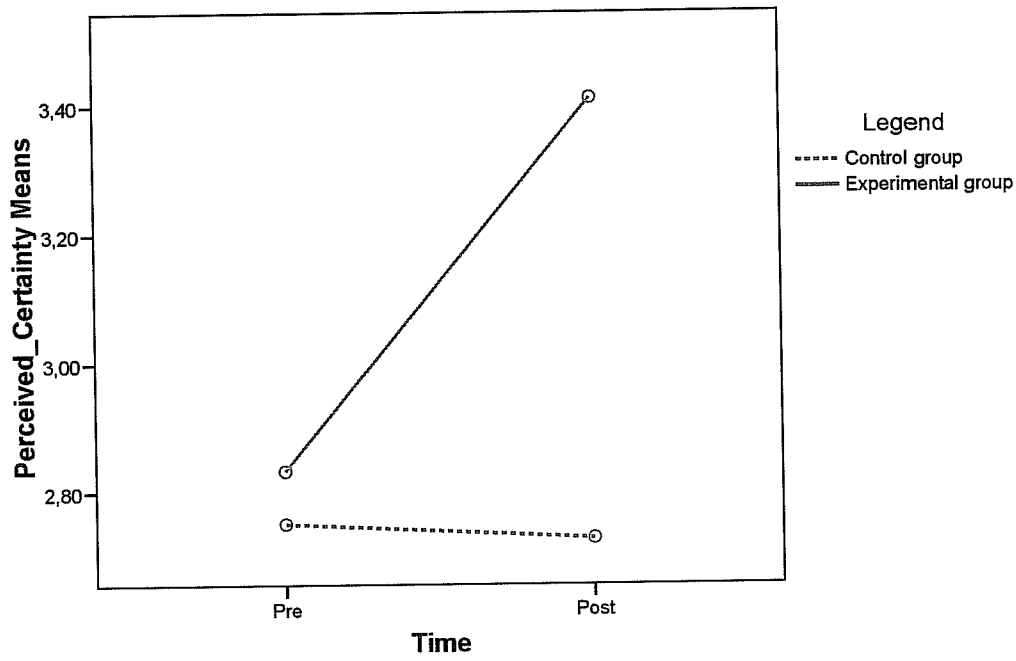
FIGURE 2 – Effects of group x time on Perceived-Control in the Emergency Room



Alike anxiety, in perceived-control a "group effect" was revealed only at post-intervention. In pre-intervention there were no differences between the two groups [F(1,59)=0,172, p=0.680], but in post-intervention a statistically significant effect was revealed [F(1,59)=7.01, p=0.01]. Patients of the experimental group reported significantly higher perceived control then patients in the control group.

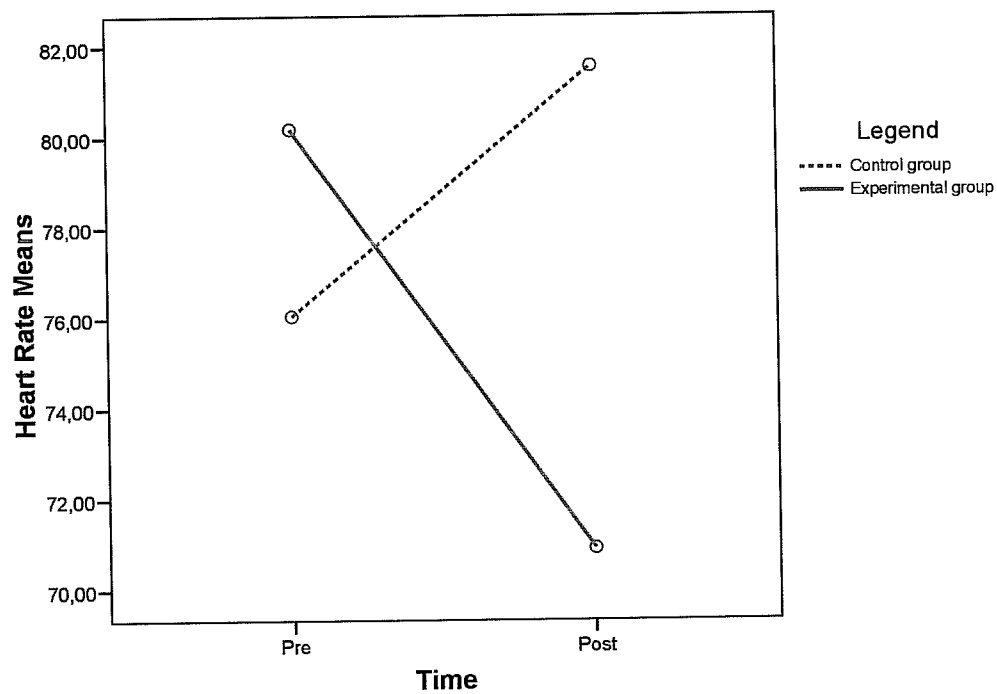
In line with our hypotheses, for perceived certainty a significant time x group interaction was found [F(1,59)=4.38, p=0.040], with the covariates education level, marital status and age, see figure 3. Alike other variables a "group effect" was observed only at post-intervention. In pre-intervention there were no differences between the two groups [F(1,59)=0.085, p=0.772], however in post-intervention a statistically significant effect was determined [F(1,59)=6.12, p=0.016]. The patients of experimental group reported higher perceived certainty (I have plenty of notion of what will happen – 4) then patients in the control group (I have some notion about what will happen to me – 2).

FIGURE 3 – Effects of group x time on Perceived-Certainty in the Emergency Room



The analysis of cardiovascular outcomes showed a significant time by group effect for all three factors analysed. In line with our hypotheses, a time x group interaction was found for heart rate [$F(1,59)=40.37$, $p<0.001$] with the covariates age and cardiac disease, see figure 4.

FIGURE 4 – Effects of group x time on Heart Rate in the Emergency Room



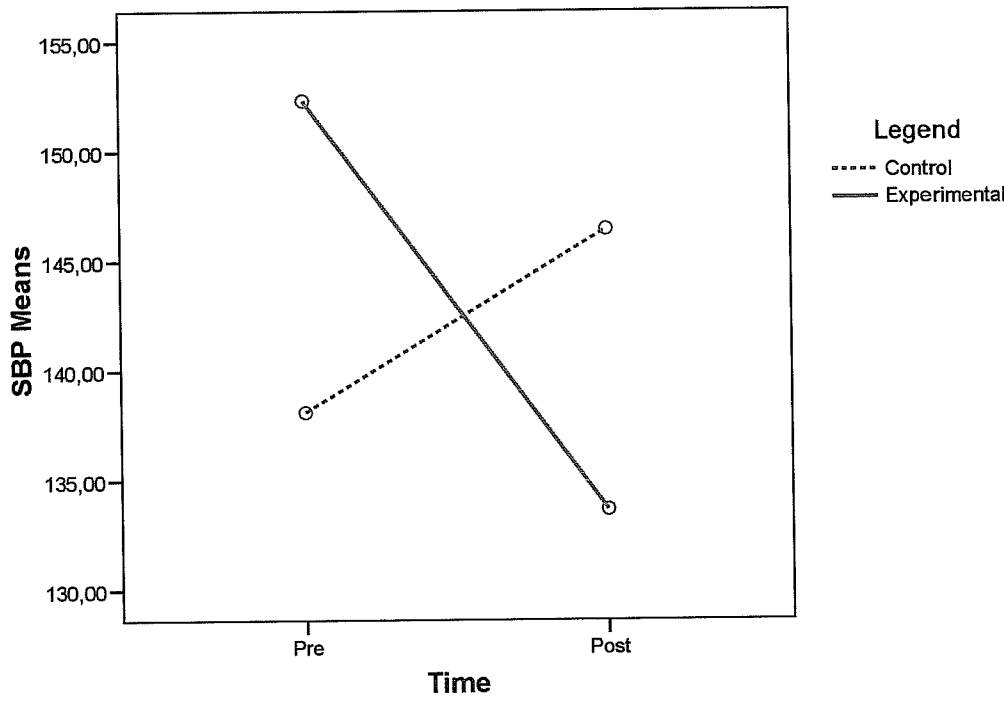
In pre-intervention there were no differences between the two groups [F(1,59)=1.96, p=0.166] but in post-intervention a statistically significant effect was revealed [F(1,59)=21.29, p<0.001]. Alike other variables a "group effect" was observed only at post-intervention. The patients of experimental group had significantly lower heart rate (M=70.64, SD=8.74) then patients in the control group (M=81.8, SD=11.28), see table 8.

TABLE 8 – Heart rate mean comparison between experimental group and control group

Group		Heart Rate Pre-intervention	Heart Rate Post-intervention
Control Group	Mean	76,11	81,83
	N	36	36
	Std. Deviation	11,13	11,28
Experimental Group	Mean	80,11	70,64
	N	36	36
	Std. Deviation	12,00	8,74
Total	Mean	78,11	76,24
	N	72	72
	Std. Deviation	11,67	11,50

In line with our hypotheses, a significant time x group effect was found for systolic blood pressure [F(1,59)=43.64, p<0.001] with the covariates age, education level, marital stage, cardiac disease, cancer, *diabetes mellitus* and cholesterol, see figure 5.

FIGURE 5 – Effects of group x time on Systolic Blood Pressure in the ER



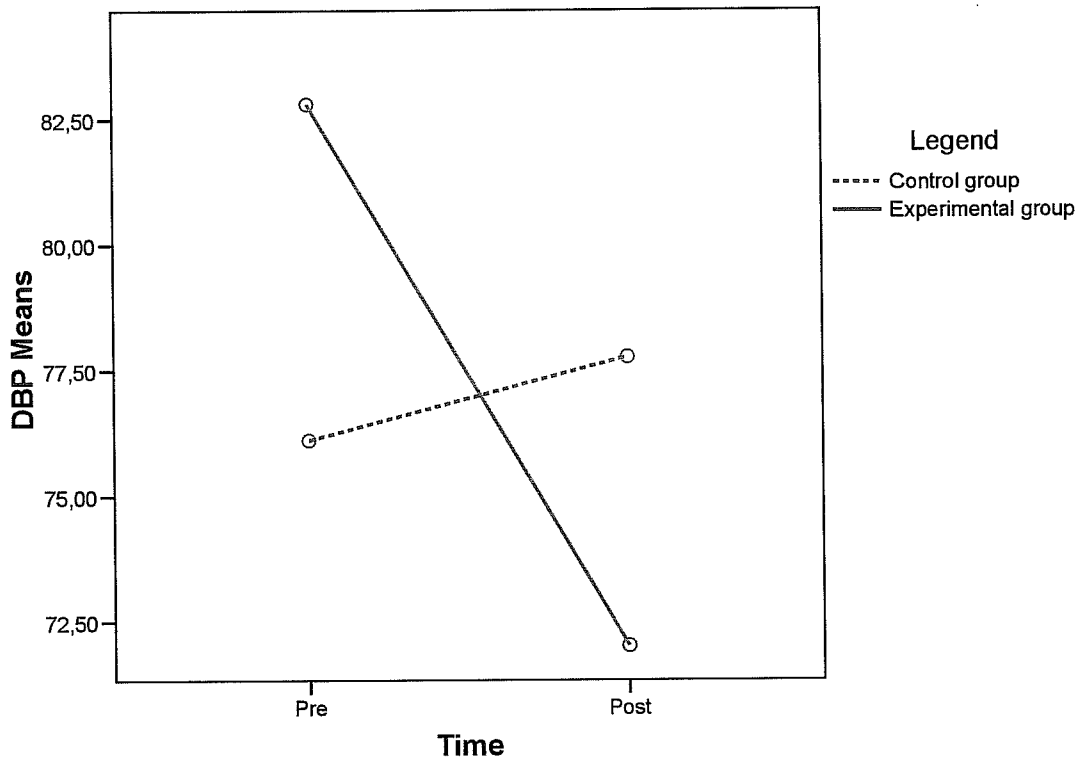
A "group effect" was observed in pre and post-intervention, in pre-intervention an effect between the two groups was revealed [F(1,59)=10.51, p=0.002] and in post-intervention a statistically significant effect was also apparent [F(1,59)=4.09, p=0.047]. But, when we analyse the results, it was possible to observe the differences between the means, i.e. patients of the experimental group had significantly lower systolic blood pressure (M=134.17, SD=21.75) then patients in the control group (M=145.94, SD=25.52=), see table 9.

TABLE 9 – Systolic Blood Pressure mean comparison between experimental group and control group

Group		SBP Pre-intervention	SBP Post-intervention
Control Group	Mean	137,31	145,94
	N	36	36
	Std. Deviation	24,02	25,51
Experimental Group	Mean	153,14	134,17
	N	36	36
	Std. Deviation	30,91	21,67
Total	Mean	145,22	140,06
	N	72	72
	Std. Deviation	28,62	24,24

Finally in line with our hypotheses, for diastolic blood pressure there was a significant time x group interaction effect [F(1,59)=25.42, p<0.001] with the covariates age, sex, education level and cardiac disease, see at figure 6.

FIGURE 6 – Effects of group x time on Diastolic Blood Pressure in the Emergency Room



Similarly to systolic blood pressure, a "group effect" was observed in pre and post-intervention on diastolic blood pressure. In pre-intervention an effect between the two groups was revealed [F(1,59)=7.52, p=0.008] and in post-intervention a statistics effect has also emerged [F(1,59)=4.09, p=0.098]. But, when we analyse the results, it was possible to observe the differences between the means, i.e. patients of experimental group reported significantly lower diastolic blood pressure (M=72.64, SD=12.5) than patients in the control group (M=77.14, SD=13.93), see table 10.

TABLE 10 – Diastolic Blood Pressure mean comparison between experimental group and control group

Group		DBP Pre-intervention	DBP Post-intervention
Control Group	Mean	74,72	77,14
	N	36	36
	Std. Deviation	13,00	13,93
Experimental Group	Mean	84,19	72,64
	N	36	36
	Std. Deviation	12,55	12,50
Total	Mean	79,46	74,89
	N	72	72
	Std. Deviation	13,56	13,33

3. DISCUSSION

The most important finding in this study was that providing information to patients in the emergency room has psychological and physical effects. Anxiety was positively correlated with systolic blood pressure. Perceived-control and perceived-certainty were significantly positively correlated among themselves. The Heart Rate was significantly positively correlated with Diastolic Blood Pressure. The Systolic Blood Pressure was positively correlated with anxiety and Diastolic Blood Pressure. The Diastolic Blood Pressure was only significantly positively correlated with Diastolic Blood Pressure.

Our findings didn't show a significant relation between the psychological and physical factors. Only in anxiety did the result reveal a correlation with physical factors, but this correlation wasn't statistically significant. Nevertheless, this result suggests that adverse psychological factors (anxiety) have an impact on the physical factors. Other study equally prove the relation between psychological factors and physical factors, namely the heart rate (Philippe et al., 2006)

In the present study, the results reveal a group effect after the intervention, demonstrating an intervention-related impact in patients of the experimental group. Patients with psychological intervention reported significantly lower anxiety, higher perceived control and higher perceived-certainty then patients with the usual information. Concerning physical effects, these patients reported significantly lower heart rate, lower systolic blood pressure and lower diastolic blood pressure then others patients. These results showed that patients with the intervention had better results and patients with usual care had worse results.

With this planned intervention we produced effects in anxiety, perceived control and perceived certainty of patients that wait in the emergency room. These results support other findings concerning the relation between psychological factors

and the information, although none of these studies were conducted at the emergency room. Like others studies, the present study revealed that patients with more information had less anxiety (Petrie et al, 2007; Guennoc et al., 2007; Philippe et al, 2006; Ma et al., 2006). The reduction of anxiety was possibly interconnected with the intervention, because patients had more information about procedures in the emergency room. Our findings concerning the relation between information, perceived control and perceived certainty, revealed that patients with more information had higher perceived control and perceived certainty about the situation in the emergency room.

This fact is comparable with other studies developed in different contexts that concluded that when information is shared, the perception of uncertainty decreases (Ryu & Eyuboglu, 2007). This increase of perceived control and certainty was possibly explained by the fact that patients had more information in their possession. This is an important finding because these perceptions of control and certainty are connected with the well-being and the decrease of anxiety and stress in patients (Coyle & Sculco, 2003). In this study significant effects of the intervention were observed in physical factors, namely in heart rate, systolic blood pressure and diastolic blood pressure. In this way, it is possible that with the information increase after the intervention, the anxiety consequently decreases, the perceived control and certainty increase and the responds of the nervous systems were more moderate, resulting in a decrease of heart rate and blood pressure.

In this case a question emerges concerning the reason for an association between intervention, psychological factors and physical factors. According to the literature, anxiety can increase the heart rate and blood pressure, this fact being explained by the nervous system as respondents to a situation of threat or stress. In a situation of illness, the anxiety increases and the perceived control and certainty decrease, activating the nervous system's mechanisms.

In a situation of psychological stress, the autonomic nervous system gets the body ready to fight or flight (Ziegler, 2004). Ziegler (2004) refers that the response to physical and psychological stress is an activation of the sympathetic nervous system and the inhibition of the parasympathetic nervous system. In the event of

illness the sympathetic nerve activity increases along with heart rate and blood pressure, responding to stress (Ziegler, 2004). This happens because, in the central nervous system, the corticotrophin-releasing factor activates autonomic and adrenocortical stress factors. In this case, the corticotrophin-releasing factor released in to the brain will stimulate the responsiveness to stimuli which increases heart rate and blood pressure in a stressful environment (Ziegler, 2004). Autonomic response to stress is useful, but an inappropriate stress response is the background for many psychological disorders, for example, the increase in myocardial oxygen consumption can induce angina in coronary artery disease. In this disease, other studies prove that psychological factors can induce inflammatory markers and that they're important in acute coronary syndrome (Gidron et al, 2003).

Our findings strengthen the effects of psychological intervention on psychological factors (anxiety, perceived control and perceived certainty) and physical factors (heart rate and blood pressure). The importance of psychological intervention and information to patients in a situation of disease is incontestable (Guennoc, Samjee, Jousse-Joulin, Devauchelle, Roudaut & Saraux, 2007) and help patients adapt and accept their situation and the treatment (Biancofiore et al., 2005; Davies, 2000; Depasse et al., 2000; Guennoc, Samjee, Jousse-Joulin, Devauchelle, Roudaut & Saraux, 2007; Kinnersley et al., 2007; Ma, Warren, Phillips & Stanek, 2006; Petrie et al., 2007). It's possible that the impact of a psychological intervention on health care is bigger than we can imagine, because it can probably result in less hospital complications and decrease the patients' and healthcare professionals' stress.

These findings support the importance of a simply and inexpensive psychological intervention in a stressful situation, like waiting in the emergency room, and its effects in psychological and physical factors, increasing the importance of future studies. It is important that health professionals, medical and nurses, deepen their knowledge of the relevance of psychological and physical effects in patients recovery and practice this psychological interventions to help them.

The limitations of this study were the impossibility to measure serological parameters, the exclusion of patients with bigger pain and priorities of Manchester Triage System level bigger than urgent. It is possible that in these patients the

psychological effects would have had more impact. Future studies can deepen the psychological effects on psychological and physical factors, for example the hormone cortisol and epinephrine. Our study demonstrates the importance of testing the psychological intervention in health care and deepens its benefits to patients in stressful situations.

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ANNEXS

Annex A

Intervention

Intervention

a. Give information about the waiting time and when he/she could expect more information;
b. Explain the expected procedures in clear and understandable language;
c. Explain the equipment used in terms the patient can understand;
d. Explain the exams in understandable language and, if repetition is necessary, explain reasons for the procedures as well;
e. Give the patient as many choices as possible (what name to be called, choice of positioning and waiting place, allow to contact family when arriving alone if he/she wants to; etc., as long as such issues are permitted by the staff and the patient's condition);
f. Give realistic information without taking away hope; emphasize what the patient CAN do, to increase perceived control and reduce helplessness (e.g., you can move, read, speak with people, walk to the toilet, etc.);
g. Provide periodic information;
h. Explain the diagnosis in clear and understandable language (after obtaining the doctor's information);
i. Ask the patient whether he/she needs more information, whether he/she wants to speak with a health professional;
j. When necessary, repeat information and explanations in short terms and encourage the patient's attention.

Annex B

Questionnaire

Questionnaire

Este estudo de investigação tem como tema a informação que é fornecida aos utentes e tem como objectivo compreender como os utentes se sentem perante a informação que lhe é fornecida pelo profissional de saúde no serviço de urgência, tema muito importante para os cuidados de saúde. A sua participação neste estudo é imprescindível, pois sem o seu contributo será impossível compreender esta realidade.

Esta participação é voluntária e tem o direito de não querer participar e não há qualquer consequência pela recusa em participar. Todos os dados são confidenciais. A participação neste estudo implica a avaliação de tensão arterial, frequência cardíaca.

Se concordar participar neste estudo continue a responder a este questionário.

TERMO DE CONSENTIMENTO INFORMADO

Declaro que fui suficientemente esclarecido(a) sobre o presente estudo de investigação, dos seus objectivos e de que os dados recolhidos possam vir a ser publicados posteriormente. Declaro também que fui informado(a) dos procedimentos inerentes ao estudo. Fui informado que todos os dados são confidenciais. Estou ciente que estou a participar como voluntário(a) e que em qualquer momento posso desistir da minha participação.

Pelo presente também manifesto expressamente minha concordância e meu consentimento para a participação neste estudo.

_____

Nome e assinatura do utente

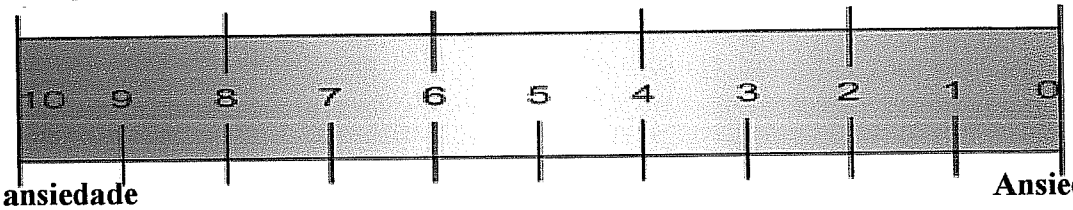
Agradecemos antecipadamente a sua participação

Não demore muito tempo a pensar nas respostas. Não existem respostas correctas ou erradas.

Estado Civil	
Nível de escolaridade	

1ª Avaliação

1. Perante esta situação qual a intensidade da sua ansiedade? (Assinale qual é o número que corresponde à ansiedade sentida).



A pior ansiedade sentida **Ansiedade Ausente**

Faça uma cruz (X) no espaço anterior à resposta que melhor descreve a forma como se sente.

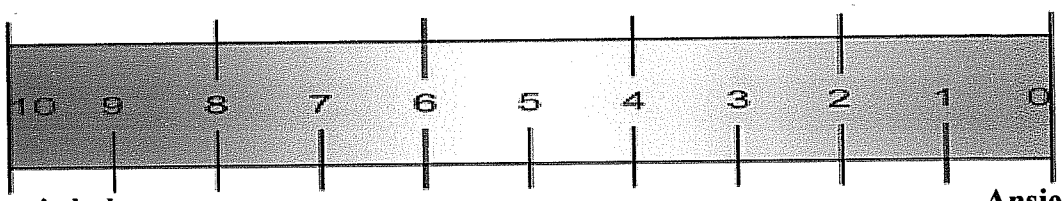
2. Que controlo sente perante esta situação?
   ( ) Não sinto qualquer controlo
   ( ) Sinto algum controlo
   ( ) Não sabe/ não responde
   ( ) Sinto bastante controlo
   ( ) Sinto controlo total

3. Tem conhecimento do que irá acontecer enquanto estiver no Serviço de Urgência?
   ( ) Tenho completa incerteza do que vai acontecer
   ( ) Tenho alguma noção do que vai acontecer
   ( ) Tenho uma noção do que vai acontecer
   ( ) Tenho bastante noção do que vai acontecer
   ( ) Compreendo completamente o que vai acontecer

4. Quando vai aos serviços de saúde quer receber mais informação acerca dos procedimentos, medicação e tratamentos?
   ( ) Sim
   ( ) Não

2ª Avaliação

1. Perante esta situação qual a intensidade da sua ansiedade? (Assinale qual é o número que corresponde à ansiedade sentida).



A pior ansiedade sentida

Ansiedade Ausente

Faça uma cruz (X) no espaço anterior à resposta que melhor descreve a forma como se sente.

2. Que controlo sente perante esta situação?
   ( ) Não sinto qualquer controlo
   ( ) Sinto algum controlo
   ( ) Não sabe/ não responde
   ( ) Sinto bastante controlo
   ( ) Sinto controlo total

3. Tem conhecimento do que irá acontecer enquanto estiver no Serviço de Urgência?
   ( ) Tenho completa incerteza do que vai acontecer
   ( ) Tenho alguma noção do que vai acontecer
   ( ) Tenho uma noção do que vai acontecer
   ( ) Tenho bastante noção do que vai acontecer
   ( ) Compreendo completamente o que vai acontecer

Muito obrigada pela sua colaboração

Problemas de Saúde Associados

A. Problemas Cardíacos

( ) Sim

( ) Não

B. Problemas Neoplásicos

( ) Sim

( ) Não

C. Diabetes Mellitus

( ) Tipo I

( ) Tipo II

( ) Não

D. Cirurgias

( ) Sim

( ) Não

E. Tabagismo

( ) Fumador

( ) Ex-fumador

( ) Não

F. Colesterol

( ) Sim

( ) Não

G. Outras doenças

Dados recolhidos:

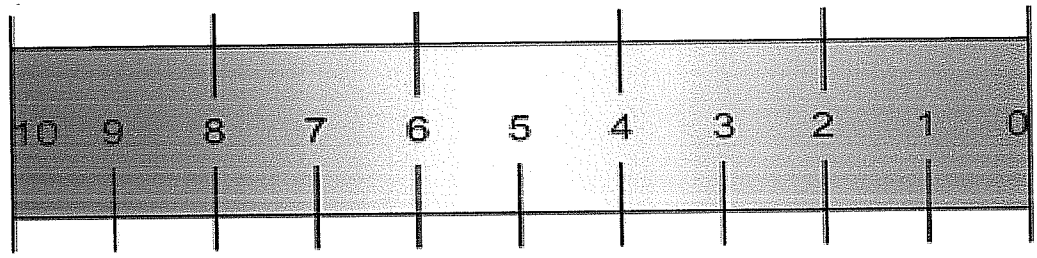
Prioridade		
Idade		
Sexo		
Sintomas iniciais		
Severity		
Antes da Intervenção	TA	
	FC	
Após a intervenção	TA	
	FC	
Diagnóstico		
Observações		

This questioner was created to help the health professionals know how you feel. We ask you to read each question and tic the space (x) before the answer that better describes the way you feel.

Don't think too much about your answers. Your immediate reaction to each question probably will be the most correct answer than the one made after long reflection.

Please tic only once each question.

1. **In this situation what is the intensity of your anxiety? (Tic the number that describes your anxiety feel).**



The worst anxiety I've ever felt

No Anxiety

2. **How much control do you have in this situation?**

( ) I don't have control at all

( ) I have some control

( ) Doesn't know/ doesn't answer

( ) I have plenty control

( ) I have total control

3. **Do you know what will happen to you in this situation?**

( ) I'm completely uncertain about what will happen to me

( ) I have some notion about what will happen to me

( ) Doesn't know/ doesn't answer

( ) I have plenty of notion of what will happen

( ) I fully understand what will happen to me

Thank you very much for your collaboration

Annex C

Output: Background characteristics of patient's sample

Output: Background characteristics of patient's sample

Descriptives

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Group	72	,00	1,00	,5000	,50351
Age	72	22,00	95,00	49,8611	19,26999
Valid N (listwise)	72				

Means

Case Processing Summary

	Cases					
	Included		Excluded		Total	
	N	Percent	N	Percent	N	Percent
Age * Group	72	100,0%	0	,0%	72	100,0%

Report

Age

Group	Mean	N	Std. Deviation
,00	53,2222	36	20,93543
1,00	46,5000	36	17,08048
Total	49,8611	72	19,26999

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Group * Sex	72	100,0%	0	,0%	72	100,0%

Group * Sex Crosstabulation

Count

		Sex		Total
		1,00	2,00	
Group	,00	9	27	36
	1,00	14	22	36
Total		23	49	72

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Group * Educ	72	100,0%	0	,0%	72	100,0%
Group * Martal_s	72	100,0%	0	,0%	72	100,0%

Group * Educ Crosstabulation

Count

		Educ																
		,00	2,00	3,00	4,00	5,00	6,00	7,00	8,00	9,00	10,00	12,00	13,00	14,00	15,00	16,00	18,00	Total
Group	,00	3	1	0	12	2	1	2	0	2	0	8	1	1	0	2	1	36
	1,00	5	0	2	6	1	1	3	1	1	1	9	0	3	1	2	0	36
Total		8	1	2	18	3	2	5	1	3	1	17	1	4	1	4	1	72

Group * Martal_s Crosstabulation

Count

		Martal_s			Total
		1,00	2,00	3,00	
Group	,00	9	17	10	36
	1,00	9	22	5	36
Total		18	39	15	72

Means

Case Processing Summary

	Cases					
	Included		Excluded		Total	
	N	Percent	N	Percent	N	Percent
Educ * Group	72	100,0%	0	,0%	72	100,0%

Report

Educ

Group	Mean	N	Std. Deviation
,00	7,5278	36	4,94245
1,00	7,9444	36	5,11549
Total	7,7361	72	4,99857

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Group * Cardio	72	100,0%	0	,0%	72	100,0%

Group * Cardio Crosstabulation

Count

		Cardio		
		1,00	2,00	Total
Group	,00	7	29	36
	1,00	7	29	36
Total		14	58	72

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Group * Cancer	72	100,0%	0	,0%	72	100,0%

Group * Cancer Crosstabulation

Count

		Cancer		
		1,00	2,00	Total
Group	,00	3	33	36
	1,00	1	35	36
Total		4	68	72

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Group * DM	72	100,0%	0	,0%	72	100,0%

Group * DM Crosstabulation

Count

		DM			
		1,00	2,00	3,00	Total
Group	,00	3	1	32	36
	1,00	3	1	32	36
Total		6	2	64	72

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Group * Surgery	72	100,0%	0	,0%	72	100,0%

Group * Surgery Crosstabulation

Count

		Surgery		
		1,00	2,00	Total
Group	,00	17	19	36
	1,00	15	21	36
Total		32	40	72

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Group * Smok	72	100,0%	0	,0%	72	100,0%

Group * Smok Crosstabulation

Count

		Smok			
		1,00	2,00	3,00	Total
Group	,00	6	10	20	36
	1,00	8	0	28	36
Total		14	10	48	72

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Group * Cholest	72	100,0%	0	,0%	72	100,0%

Group * Cholest Crosstabulation

Count

		Cholest		
		1,00	2,00	Total
Group	,00	10	26	36
	1,00	8	28	36
Total		18	54	72

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Group * Triage	72	100,0%	0	,0%	72	100,0%

Group * Triage Crosstabulation

Count

		Triage		
		1,00	2,00	Total
Group	,00	17	19	36
	1,00	10	26	36
Total		27	45	72

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Group * AIS	72	100,0%	0	,0%	72	100,0%

Group * AIS Crosstabulation

Count

		AIS			
		,00	1,00	2,00	Total
Group	,00	24	11	1	36
	1,00	23	7	6	36
Total		47	18	7	72

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Group * Symptoms	72	100,0%	0	,0%	72	100,0%

Symptoms Crosstabulation

Statistics: Count

		Symptoms of patients											
		Symptoms											
Group		Pain	Vomits/ Nauseus	Breathing difficulties	Palpitations/ Tachycardia	Dizziness/ Faint	Wound	Edema Legs	Cough	Fadigue	Diarrhoea	Itch	Travel accident	Total
Group	Control	20	2	2	5	0	2	0	0	1	2	1	1	36
	Experimental	21	1	1	3	1	2	1	3	0	1	1	1	36
Total		41	3	3	8	1	4	1	3	1	3	2	2	72

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Group * Want_info	72	100,0%	0	,0%	72	100,0%

Group * Want_info Crosstabulation

Count

		Want_info		
		1,00	2,00	Total
Group	,00	34	2	36
	1,00	33	3	36
Total		67	5	72

Annex D

Output: Baseline values of psychological and biomedical data before the intervention

Output: Baseline values of psychological and biomedical data before the intervention

Means

Case Processing Summary

	Cases					
	Included		Excluded		Total	
	N	Percent	N	Percent	N	Percent
Group * ANX_1	72	100,0%	0	,0%	72	100,0%

Report

Group

ANX_1	Mean	N	Std. Deviation
,00	,6000	5	,54772
2,00	,4000	10	,51640
3,00	,5000	6	,54772
4,00	,5000	4	,57735
5,00	,6154	13	,50637
6,00	,4167	12	,51493
7,00	,5000	4	,57735
8,00	,4545	11	,52223
9,00	,5714	7	,53452
Total	,5000	72	,50351

Means

Case Processing Summary

	Cases					
	Included		Excluded		Total	
	N	Percent	N	Percent	N	Percent
ANX_1 * Group	72	100,0%	0	,0%	72	100,0%

Report

ANX_1

Group	Mean	N	Std. Deviation
,00	5,1389	36	2,58736
1,00	5,1389	36	2,65279
Total	5,1389	72	2,60176

Means

Case Processing Summary

	Cases					
	Included		Excluded		Total	
	N	Percent	N	Percent	N	Percent
ANX_1 * Group	72	100,0%	0	,0%	72	100,0%
P_Cont_1 * Group	72	100,0%	0	,0%	72	100,0%
Certainty_1 * Group	72	100,0%	0	,0%	72	100,0%

Report

Group		Anxiety	Perceived Control	Perceived Certainty
Control	Mean	5,1389	2,8056	2,6944
	N	36	36	36
	Std. Deviation	2,58736	1,45051	1,36945
Experimental	Mean	5,1389	3,0833	2,8889
	N	36	36	36
	Std. Deviation	2,65279	1,36015	1,18990
Total	Mean	5,1389	2,9444	2,7917
	N	72	72	72
	Std. Deviation	2,60176	1,40310	1,27751

Explore

Case Processing Summary

		Cases					
		Valid		Missing		Total	
	Group	N	Percent	N	Percent	N	Percent
ANX_1	,00	36	100,0%	0	,0%	36	100,0%
	1,00	36	100,0%	0	,0%	36	100,0%
P_Cont_1	,00	36	100,0%	0	,0%	36	100,0%
	1,00	36	100,0%	0	,0%	36	100,0%
Certainty_1	,00	36	100,0%	0	,0%	36	100,0%
	1,00	36	100,0%	0	,0%	36	100,0%

Descriptives

	Group			Statistic	Std. Error
ANX_1	,00	Mean		5,1389	,43123
		95% Confidence Interval for Mean	Lower Bound	4,2635	
			Upper Bound	6,0143	
		5% Trimmed Mean		5,2099	
		Median		5,5000	
		Variance		6,694	
		Std. Deviation		2,58736	
		Minimum		,00	
		Maximum		9,00	
		Range		9,00	
		Interquartile Range		4,75	
		Skewness		-,277	,393
		Kurtosis		-,899	,768
	1,00	Mean		5,1389	,44213
		95% Confidence Interval for Mean	Lower Bound	4,2413	
			Upper Bound	6,0365	
		5% Trimmed Mean		5,2099	
		Median		5,0000	
		Variance		7,037	
		Std. Deviation		2,65279	
		Minimum		,00	
		Maximum		9,00	
		Range		9,00	
		Interquartile Range		4,75	
		Skewness		-,324	,393
		Kurtosis		-,675	,768
P_Cont_1	,00	Mean		2,8056	,24175
		95% Confidence Interval for Mean	Lower Bound	2,3148	
			Upper Bound	3,2963	
		5% Trimmed Mean		2,7840	
		Median		2,0000	
		Variance		2,104	
		Std. Deviation		1,45051	
		Minimum		1,00	
		Maximum		5,00	
		Range		4,00	
		Interquartile Range		2,75	
		Skewness		,062	,393
		Kurtosis		-1,597	,768
	1,00	Mean		3,0833	,22669
		95% Confidence Interval for Mean	Lower Bound	2,6231	
			Upper Bound	3,5435	
		5% Trimmed Mean		3,0926	
		Median		4,0000	
		Variance		1,850	
		Std. Deviation		1,36015	
		Minimum		1,00	
		Maximum		5,00	
		Range		4,00	
		Interquartile Range		2,00	
		Skewness		-,159	,393
		Kurtosis		-1,425	,768
Certainty_1	,00	Mean		2,6944	,22824
		95% Confidence Interval for Mean	Lower Bound	2,2311	
			Upper Bound	3,1578	
		5% Trimmed Mean		2,6605	
		Median		2,0000	
		Variance		1,875	
		Std. Deviation		1,36945	
		Minimum		1,00	
		Maximum		5,00	
		Range		4,00	
		Interquartile Range		2,75	
		Skewness		,097	,393
		Kurtosis		-1,598	,768
	1,00	Mean		2,8889	,19832
		95% Confidence Interval for Mean	Lower Bound	2,4863	
			Upper Bound	3,2915	
		5% Trimmed Mean		2,8765	
		Median		2,5000	
		Variance		1,416	
		Std. Deviation		1,18990	
		Minimum		1,00	
		Maximum		5,00	
		Range		4,00	
		Interquartile Range		2,00	
		Skewness		,226	,393
		Kurtosis		-1,179	,768

Tests of Normality

		Kolmogorov-Smirnov[a]			Shapiro-Wilk		
	Group	Statistic	df	Sig.	Statistic	df	Sig.
ANX_1	,00	,130	36	,127	,940	36	,051
	1,00	,146	36	,051	,942	36	,057
P_Cont_1	,00	,267	36	,000	,832	36	,000
	1,00	,278	36	,000	,852	36	,000
Certainty_1	,00	,274	36	,000	,819	36	,000
	1,00	,272	36	,000	,865	36	,000

a. Lilliefors Significance Correction

Test of Homogeneity of Variance

		Levene Statistic	df1	df2	Sig.
ANX_1	Based on Mean	,013	1	70	,910
	Based on Median	,024	1	70	,878
	Based on Median and with adjusted df	,024	1	69,312	,878
	Based on trimmed mean	,008	1	70	,927
P_Cont_1	Based on Mean	,820	1	70	,368
	Based on Median	,196	1	70	,659
	Based on Median and with adjusted df	,196	1	69,294	,659
	Based on trimmed mean	,801	1	70	,374
Certainty_1	Based on Mean	3,486	1	70	,066
	Based on Median	,522	1	70	,472
	Based on Median and with adjusted df	,522	1	61,969	,473
	Based on trimmed mean	3,289	1	70	,074

Means

Case Processing Summary

	Cases					
	Included		Excluded		Total	
	N	Percent	N	Percent	N	Percent
HR_1 * Group	72	100,0%	0	,0%	72	100,0%
SBP_1 * Group	72	100,0%	0	,0%	72	100,0%
DBP_1 * Group	72	100,0%	0	,0%	72	100,0%

Report

Group		HR_1	SBP_1	DBP_1
,00	Mean	76,1111	137,3056	74,7222
	N	36	36	36
	Std. Deviation	11,13239	24,02120	13,00024
1,00	Mean	80,1111	153,1389	84,1944
	N	36	36	36
	Std. Deviation	12,00423	30,91200	12,55347
Total	Mean	78,1111	145,2222	79,4583
	N	72	72	72
	Std. Deviation	11,66982	28,61902	13,55525

Explore

Case Processing Summary

		Cases					
		Valid		Missing		Total	
	Group	N	Percent	N	Percent	N	Percent
HR_1	,00	36	100,0%	0	,0%	36	100,0%
	1,00	36	100,0%	0	,0%	36	100,0%
SBP_1	,00	36	100,0%	0	,0%	36	100,0%
	1,00	36	100,0%	0	,0%	36	100,0%
DBP_1	,00	36	100,0%	0	,0%	36	100,0%
	1,00	36	100,0%	0	,0%	36	100,0%

Descriptives

	Group			Statistic	Std. Error
HR_1	,00	Mean		76,1111	1,85540
		95% Confidence Interval for Mean	Lower Bound	72,3445	
			Upper Bound	79,8778	
		5% Trimmed Mean		75,6790	
		Median		75,0000	
		Variance		123,930	
		Std. Deviation		11,13239	
		Minimum		60,00	
		Maximum		100,00	
		Range		40,00	
		Interquartile Range		13,75	
		Skewness		,512	,393
		Kurtosis		-,179	,768
	1,00	Mean		80,1111	2,00071
		95% Confidence Interval for Mean	Lower Bound	76,0495	
			Upper Bound	84,1728	
		5% Trimmed Mean		79,7346	
		Median		80,0000	
		Variance		144,102	
		Std. Deviation		12,00423	
		Minimum		60,00	
		Maximum		107,00	
		Range		47,00	
		Interquartile Range		13,50	
		Skewness		,433	,393
		Kurtosis		,175	,768
SBP_1	,00	Mean		137,3056	4,00353
		95% Confidence Interval for Mean	Lower Bound	129,1779	
			Upper Bound	145,4332	
		5% Trimmed Mean		136,5617	
		Median		130,0000	
		Variance		577,018	
		Std. Deviation		24,02120	
		Minimum		98,00	
		Maximum		190,00	
		Range		92,00	
		Interquartile Range		40,00	
		Skewness		,525	,393
		Kurtosis		-,661	,768
	1,00	Mean		153,1389	5,15200
		95% Confidence Interval for Mean	Lower Bound	142,6798	
			Upper Bound	163,5980	
		5% Trimmed Mean		151,4074	
		Median		148,5000	
		Variance		955,552	
		Std. Deviation		30,91200	
		Minimum		112,00	
		Maximum		225,00	
		Range		113,00	
		Interquartile Range		50,00	
		Skewness		,621	,393
		Kurtosis		-,336	,768
DBP_1	,00	Mean		74,7222	2,16671
		95% Confidence Interval for Mean	Lower Bound	70,3236	
			Upper Bound	79,1209	
		5% Trimmed Mean		74,8457	
		Median		73,0000	
		Variance		169,006	
		Std. Deviation		13,00024	
		Minimum		50,00	
		Maximum		99,00	
		Range		49,00	
		Interquartile Range		16,00	
		Skewness		-,274	,393
		Kurtosis		-,497	,768
	1,00	Mean		84,1944	2,09225
		95% Confidence Interval for Mean	Lower Bound	79,9470	
			Upper Bound	88,4419	
		5% Trimmed Mean		83,9877	
		Median		81,0000	
		Variance		157,590	
		Std. Deviation		12,55347	
		Minimum		60,00	
		Maximum		113,00	
		Range		53,00	
		Interquartile Range		16,00	
		Skewness		,321	,393
		Kurtosis		-,175	,768

Tests of Normality

		Kolmogorov-Smirnov[a]			Shapiro-Wilk		
	Group	Statistic	df	Sig.	Statistic	df	Sig.
HR_1	,00	,123	36	,185	,944	36	,069
	1,00	,147	36	,046	,948	36	,093
SBP_1	,00	,159	36	,022	,938	36	,044
	1,00	,138	36	,081	,929	36	,023
DBP_1	,00	,130	36	,131	,957	36	,178
	1,00	,156	36	,027	,975	36	,561

a. Lilliefors Significance Correction

Test of Homogeneity of Variance

		Levene Statistic	df1	df2	Sig.
HR_1	Based on Mean	,009	1	70	,924
	Based on Median	,000	1	70	1,000
	Based on Median and with adjusted df	,000	1	68,150	1,000
	Based on trimmed mean	,001	1	70	,975
SBP_1	Based on Mean	3,112	1	70	,082
	Based on Median	2,951	1	70	,090
	Based on Median and with adjusted df	2,951	1	69,760	,090
	Based on trimmed mean	3,008	1	70	,087
DBP_1	Based on Mean	,102	1	70	,750
	Based on Median	,183	1	70	,670
	Based on Median and with adjusted df	,183	1	69,299	,670
	Based on trimmed mean	,114	1	70	,737

Descriptives

Descriptive Statistics

	N	Minimum	Maximum	Mean		Std.	Skewness		Kurtosis	
	Statistic	Statistic	Statistic	Statistic	Std. Error	Statistic	Statistic	Std. Error	Statistic	Std. Error
ANX_1	72	,00	9,00	5,1389	,30662	2,60176	-,295	,283	-,811	,559
P_Cont_1	72	1,00	5,00	2,9444	,16536	1,40310	-,056	,283	-1,506	,559
Certainty_1	72	1,00	5,00	2,7917	,15056	1,27751	,112	,283	-1,370	,559
HR_1	72	60,00	107,00	78,1111	1,37530	11,66982	,477	,283	-,030	,559
SBP_1	72	98,00	225,00	145,2222	3,37278	28,61902	,718	,283	-,005	,559
DBP_1	72	50,00	113,00	79,4583	1,59750	13,55525	-,027	,283	,027	,559
Valid N (listwise)	72									

Annex E

Output: Associations between psychological factors and biomedical factors before intervention.

Output: Associations between psychological factors and biomedical factors before intervention.

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
ANX_1 * HR_1	72	100,0%	0	,0%	72	100,0%
ANX_1 * SBP_1	72	100,0%	0	,0%	72	100,0%
ANX_1 * DBP_1	72	100,0%	0	,0%	72	100,0%
P_Cont_1 * HR_1	72	100,0%	0	,0%	72	100,0%
P_Cont_1 * SBP_1	72	100,0%	0	,0%	72	100,0%
P_Cont_1 * DBP_1	72	100,0%	0	,0%	72	100,0%
Certainty_1 * HR_1	72	100,0%	0	,0%	72	100,0%
Certainty_1 * SBP_1	72	100,0%	0	,0%	72	100,0%
Certainty_1 * DBP_1	72	100,0%	0	,0%	72	100,0%

ANX_1 * HR_1

Symmetric Measures

		Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
Interval by Interval	Pearson's R	,082	,134	,689	,493[c]
Ordinal by Ordinal	Spearman Correlation	,128	,124	1,080	,284[c]
N of Valid Cases		72			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_1 * SBP_1

Symmetric Measures

		Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
Interval by Interval	Pearson's R	,215	,097	1,844	,069[c]
Ordinal by Ordinal	Spearman Correlation	,217	,113	1,863	,067[c]
N of Valid Cases		72			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_1 * DBP_1

Symmetric Measures

		Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
Interval by Interval	Pearson's R	,112	,109	,939	,351[c]
Ordinal by Ordinal	Spearman Correlation	,139	,123	1,176	,244[c]
N of Valid Cases		72			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_1 * HR_1

Symmetric Measures

		Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
Interval by Interval	Pearson's R	,061	,114	,508	,613[c]
Ordinal by Ordinal	Spearman Correlation	,024	,117	,202	,840[c]
N of Valid Cases		72			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_1 * SBP_1

Symmetric Measures

		Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
Interval by Interval	Pearson's R	-,177	,120	-1,506	,137[c]
Ordinal by Ordinal	Spearman Correlation	-,117	,127	-,982	,329[c]
N of Valid Cases		72			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_1 * DBP_1

Symmetric Measures

		Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
Interval by Interval	Pearson's R	-,115	,122	-,968	,336[c]
Ordinal by Ordinal	Spearman Correlation	-,116	,122	-,974	,334[c]
N of Valid Cases		72			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_1 * HR_1

Symmetric Measures

		Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
Interval by Interval	Pearson's R	,062	,115	,520	,605[c]
Ordinal by Ordinal	Spearman Correlation	,042	,120	,348	,729[c]
N of Valid Cases		72			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_1 * SBP_1

Symmetric Measures

		Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
Interval by Interval	Pearson's R	-,062	,112	-,516	,608[c]
Ordinal by Ordinal	Spearman Correlation	,007	,123	,060	,952[c]
N of Valid Cases		72			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_1 * DBP_1

Symmetric Measures

		Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
Interval by Interval	Pearson's R	-,042	,124	-,348	,729[c]
Ordinal by Ordinal	Spearman Correlation	,003	,121	,024	,981[c]
N of Valid Cases		72			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Correlations

Descriptive Statistics

	Mean	Std. Deviation	N
ANX_1	5,1389	2,60176	72
P_Cont_1	2,9444	1,40310	72
Certainty_1	2,7917	1,27751	72
HR_1	78,1111	11,66982	72
SBP_1	145,2222	28,61902	72
DBP_1	79,4583	13,55525	72

Correlations

		ANX_1	P_Cont_1	Certainty_1	HR_1	SBP_1	DBP_1
ANX_1	Pearson Correlation	1	-,071	,127	,082	,215	,112
	Sig. (2-tailed)		,553	,286	,493	,069	,351
	N	72	72	72	72	72	72
P_Cont_1	Pearson Correlation	-,071	1	,795**	,061	-,177	-,115
	Sig. (2-tailed)	,553		,000	,613	,137	,336
	N	72	72	72	72	72	72
Certainty_1	Pearson Correlation	,127	,795**	1	,062	-,062	-,042
	Sig. (2-tailed)	,286	,000		,605	,608	,729
	N	72	72	72	72	72	72
HR_1	Pearson Correlation	,082	,061	,062	1	,162	,286*
	Sig. (2-tailed)	,493	,613	,605		,174	,015
	N	72	72	72	72	72	72
SBP_1	Pearson Correlation	,215	-,177	-,062	,162	1	,577**
	Sig. (2-tailed)	,069	,137	,608	,174		,000
	N	72	72	72	72	72	72
DBP_1	Pearson Correlation	,112	-,115	-,042	,286*	,577**	1
	Sig. (2-tailed)	,351	,336	,729	,015	,000	
	N	72	72	72	72	72	72

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).

Annex F

Output: Associations between background and psychological factors post-intervention.

Output: Associations between background and psychological factors post-intervention.

Crosstabs

ANX_2 * Triage * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,069	,163	-,403	,690[c]
	Ordinal by Ordinal	Spearman Correlation	-,065	,168	-,378	,708[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,130	,156	-,763	,451[c]
	Ordinal by Ordinal	Spearman Correlation	-,118	,166	-,692	,494[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * AIS * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,202	,187	-1,205	,237[c]
	Ordinal by Ordinal	Spearman Correlation	-,266	,167	-1,608	,117[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,310	,144	-1,901	,066[c]
	Ordinal by Ordinal	Spearman Correlation	-,295	,152	-1,799	,081[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * Cardio * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,157	,158	-,926	,361[c]
	Ordinal by Ordinal	Spearman Correlation	-,153	,166	-,903	,373[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,051	,183	,299	,767[c]
	Ordinal by Ordinal	Spearman Correlation	,058	,185	,340	,736[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * Cancer * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,166	,104	-,984	,332[c]
	Ordinal by Ordinal	Spearman Correlation	-,156	,124	-,920	,364[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,110	,061	,644	,524[c]
	Ordinal by Ordinal	Spearman Correlation	,132	,075	,775	,444[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * DM * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,066	,174	,385	,703[c]
	Ordinal by Ordinal	Spearman Correlation	,072	,170	,420	,677[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,221	,140	-1,319	,196[c]
	Ordinal by Ordinal	Spearman Correlation	-,184	,141	-1,089	,284[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * Surgery * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,087	,163	-,510	,614[c]
	Ordinal by Ordinal	Spearman Correlation	-,081	,167	-,473	,639[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,065	,153	,379	,707[c]
	Ordinal by Ordinal	Spearman Correlation	,085	,164	,498	,622[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * Smok * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,009	,170	,050	,960[c]
	Ordinal by Ordinal	Spearman Correlation	,027	,169	,160	,874[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,092	,155	,539	,593[c]
	Ordinal by Ordinal	Spearman Correlation	,075	,160	,438	,664[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * Cholest * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,282	,139	-1,711	,096[c]
	Ordinal by Ordinal	Spearman Correlation	-,279	,154	-1,697	,099[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,060	,144	,352	,727[c]
	Ordinal by Ordinal	Spearman Correlation	,062	,151	,361	,720[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * Symptoms * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,132	,151	,777	,443[c]
	Ordinal by Ordinal	Spearman Correlation	,193	,158	1,149	,259[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,072	,134	,423	,675[c]
	Ordinal by Ordinal	Spearman Correlation	,077	,157	,450	,655[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * Want_info * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,015	,048	,090	,929[c]
	Ordinal by Ordinal	Spearman Correlation	-,018	,070	-,103	,919[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,427	,121	2,756	,009[c]
	Ordinal by Ordinal	Spearman Correlation	,411	,116	2,632	,013[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * Age * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,080	,171	,465	,645[c]
	Ordinal by Ordinal	Spearman Correlation	,046	,186	,266	,792[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,016	,186	,094	,926[c]
	Ordinal by Ordinal	Spearman Correlation	-,014	,179	-,082	,935[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * Sex * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,047	,147	-,274	,786[c]
	Ordinal by Ordinal	Spearman Correlation	-,028	,158	-,163	,871[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,134	,155	-,791	,435[c]
	Ordinal by Ordinal	Spearman Correlation	-,136	,161	-,801	,429[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * Educ * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,311	,152	-1,911	,064[c]
	Ordinal by Ordinal	Spearman Correlation	-,249	,164	-1,498	,143[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,106	,155	-,620	,539[c]
	Ordinal by Ordinal	Spearman Correlation	-,097	,167	-,568	,574[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * Martal_s * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,058	,177	,342	,735[c]
	Ordinal by Ordinal	Spearman Correlation	-,008	,187	-,044	,965[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,012	,193	-,070	,945[c]
	Ordinal by Ordinal	Spearman Correlation	-,032	,190	-,188	,852[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

ANX_2 * Time * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,072	,162	-,420	,677[c]
	Ordinal by Ordinal	Spearman Correlation	-,079	,168	-,465	,645[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,284	,156	1,725	,094[c]
	Ordinal by Ordinal	Spearman Correlation	,321	,158	1,975	,056[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * Triage * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,150	,165	,885	,382[c]
	Ordinal by Ordinal	Spearman Correlation	,115	,168	,673	,506[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,140	,185	,826	,414[c]
	Ordinal by Ordinal	Spearman Correlation	,083	,188	,489	,628[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * AIS * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,036	,181	,209	,836[c]
	Ordinal by Ordinal	Spearman Correlation	,068	,179	,397	,694[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,175	,188	-1,036	,307[c]
	Ordinal by Ordinal	Spearman Correlation	-,113	,201	-,663	,512[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * Cardio * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,043	,157	,250	,804[c]
	Ordinal by Ordinal	Spearman Correlation	,007	,156	,041	,967[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,278	,171	1,687	,101[c]
	Ordinal by Ordinal	Spearman Correlation	,258	,166	1,557	,129[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * Cancer * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,220	,089	1,313	,198[c]
	Ordinal by Ordinal	Spearman Correlation	,197	,106	1,171	,250[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,239	,119	1,435	,160[c]
	Ordinal by Ordinal	Spearman Correlation	,219	,108	1,308	,200[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * DM * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,109	,163	-,638	,528[c]
	Ordinal by Ordinal	Spearman Correlation	-,160	,144	-,947	,351[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,014	,171	-,081	,936[c]
	Ordinal by Ordinal	Spearman Correlation	-,018	,164	-,107	,916[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * Surgery * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,268	,157	1,625	,113[c]
	Ordinal by Ordinal	Spearman Correlation	,274	,156	1,661	,106[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,048	,173	,279	,782[c]
	Ordinal by Ordinal	Spearman Correlation	-,015	,178	-,085	,933[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * Smok * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,149	,177	-,879	,385[c]
	Ordinal by Ordinal	Spearman Correlation	-,111	,178	-,653	,518[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,076	,169	,442	,661[c]
	Ordinal by Ordinal	Spearman Correlation	,097	,157	,568	,574[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * Cholest * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,261	,137	1,579	,124[c]
	Ordinal by Ordinal	Spearman Correlation	,240	,143	1,441	,159[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,132	,161	,778	,442[c]
	Ordinal by Ordinal	Spearman Correlation	,152	,154	,898	,375[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * Symptoms * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,099	,150	-,583	,564[c]
	Ordinal by Ordinal	Spearman Correlation	-,087	,165	-,507	,615[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,133	,180	,781	,440[c]
	Ordinal by Ordinal	Spearman Correlation	,189	,178	1,120	,271[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * Want_info * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,119	,056	-,701	,488[c]
	Ordinal by Ordinal	Spearman Correlation	-,073	,063	-,427	,672[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,085	,138	-,499	,621[c]
	Ordinal by Ordinal	Spearman Correlation	-,120	,117	-,703	,487[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * Age * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,383	,153	-2,418	,021[c]
	Ordinal by Ordinal	Spearman Correlation	-,343	,168	-2,127	,041[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,302	,159	-1,849	,073[c]
	Ordinal by Ordinal	Spearman Correlation	-,217	,163	-1,299	,203[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * Sex * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,148	,152	,871	,390[c]
	Ordinal by Ordinal	Spearman Correlation	,155	,154	,913	,368[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,064	,168	,377	,709[c]
	Ordinal by Ordinal	Spearman Correlation	,065	,166	,379	,707[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * Educ * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,347	,156	2,155	,038[c]
	Ordinal by Ordinal	Spearman Correlation	,278	,172	1,688	,101[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,202	,158	1,206	,236[c]
	Ordinal by Ordinal	Spearman Correlation	,181	,164	1,071	,292[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * Martal_s * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,290	,152	-1,767	,086[c]
	Ordinal by Ordinal	Spearman Correlation	-,256	,154	-1,541	,133[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,090	,132	-,525	,603[c]
	Ordinal by Ordinal	Spearman Correlation	-,076	,138	-,443	,661[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

P_Cont_2 * Time * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,147	,162	-,865	,393[c]
	Ordinal by Ordinal	Spearman Correlation	-,157	,160	-,926	,361[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,210	,159	-1,253	,219[c]
	Ordinal by Ordinal	Spearman Correlation	-,222	,167	-1,330	,192[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * Triage * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,166	,165	,981	,333[c]
	Ordinal by Ordinal	Spearman Correlation	,152	,166	,897	,376[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,050	,176	,293	,771[c]
	Ordinal by Ordinal	Spearman Correlation	,034	,177	,198	,844[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * AIS * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,068	,152	,397	,694[c]
	Ordinal by Ordinal	Spearman Correlation	,097	,158	,567	,575[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,015	,177	,086	,932[c]
	Ordinal by Ordinal	Spearman Correlation	,018	,182	,103	,919[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * Cardio * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,080	,143	,467	,643[c]
	Ordinal by Ordinal	Spearman Correlation	,057	,144	,332	,742[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,199	,154	1,182	,245[c]
	Ordinal by Ordinal	Spearman Correlation	,213	,156	1,272	,212[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * Cancer * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,226	,093	1,356	,184[c]
	Ordinal by Ordinal	Spearman Correlation	,214	,108	1,274	,211[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,068	,046	,400	,692[c]
	Ordinal by Ordinal	Spearman Correlation	,093	,063	,542	,591[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * DM * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,020	,125	-,116	,908[c]
	Ordinal by Ordinal	Spearman Correlation	-,056	,114	-,328	,745[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,099	,188	,579	,566[c]
	Ordinal by Ordinal	Spearman Correlation	,071	,183	,413	,682[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * Surgery * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,209	,163	1,246	,221[c]
	Ordinal by Ordinal	Spearman Correlation	,211	,163	1,259	,217[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,023	,169	-,133	,895[c]
	Ordinal by Ordinal	Spearman Correlation	-,039	,172	-,229	,820[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * Smok * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,084	,179	-,489	,628[c]
	Ordinal by Ordinal	Spearman Correlation	-,045	,180	-,262	,795[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,000	,175	,000	1,000[c]
	Ordinal by Ordinal	Spearman Correlation	-,010	,171	-,058	,954[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * Cholest * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,258	,129	1,559	,128[c]
	Ordinal by Ordinal	Spearman Correlation	,223	,142	1,332	,192[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,108	,144	,634	,530[c]
	Ordinal by Ordinal	Spearman Correlation	,140	,149	,823	,416[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * Symptoms * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,103	,157	-,601	,552[c]
	Ordinal by Ordinal	Spearman Correlation	-,102	,169	-,597	,554[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,006	,188	,035	,972[c]
	Ordinal by Ordinal	Spearman Correlation	,061	,180	,356	,724[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * Want_info * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,120	,056	-,703	,487[c]
	Ordinal by Ordinal	Spearman Correlation	-,086	,064	-,503	,618[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,041	,132	-,237	,814[c]
	Ordinal by Ordinal	Spearman Correlation	-,060	,126	-,351	,728[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * Age * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,416	,147	-2,667	,012[c]
	Ordinal by Ordinal	Spearman Correlation	-,379	,165	-2,388	,023[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,169	,180	-1,003	,323[c]
	Ordinal by Ordinal	Spearman Correlation	-,124	,174	-,726	,473[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * Sex * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,186	,150	1,103	,278[c]
	Ordinal by Ordinal	Spearman Correlation	,188	,156	1,117	,272[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,138	,161	,814	,421[c]
	Ordinal by Ordinal	Spearman Correlation	,156	,160	,921	,363[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * Educ * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,374	,159	2,349	,025[c]
	Ordinal by Ordinal	Spearman Correlation	,302	,178	1,844	,074[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,138	,147	,813	,422[c]
	Ordinal by Ordinal	Spearman Correlation	,155	,153	,918	,365[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * Martal_s * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,315	,144	-1,932	,062[c]
	Ordinal by Ordinal	Spearman Correlation	-,289	,147	-1,760	,087[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,110	,166	-,645	,524[c]
	Ordinal by Ordinal	Spearman Correlation	-,116	,165	-,679	,502[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Certainty_2 * Time * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,162	,168	-,958	,345[c]
	Ordinal by Ordinal	Spearman Correlation	-,191	,158	-1,135	,265[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,222	,156	-1,329	,193[c]
	Ordinal by Ordinal	Spearman Correlation	-,255	,166	-1,536	,134[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Annex G

Output: Associations between background and biomedical factors post-intervention.

Output: Associations between background and biomedical factors post-intervention.

HR_2 * Triage * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,069	,164	-,405	,688[c]
	Ordinal by Ordinal	Spearman Correlation	-,126	,167	-,742	,463[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,024	,184	,142	,888[c]
	Ordinal by Ordinal	Spearman Correlation	,054	,183	,316	,754[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * AIS * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,038	,159	,222	,825[c]
	Ordinal by Ordinal	Spearman Correlation	,036	,165	,212	,834[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,402	,142	-2,557	,015[c]
	Ordinal by Ordinal	Spearman Correlation	-,344	,150	-2,133	,040[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * Cardio * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,020	,148	-,117	,908[c]
	Ordinal by Ordinal	Spearman Correlation	-,024	,160	-,138	,891[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,045	,134	-,263	,794[c]
	Ordinal by Ordinal	Spearman Correlation	-,024	,147	-,139	,890[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * Cancer * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,059	,078	,343	,734[c]
	Ordinal by Ordinal	Spearman Correlation	,063	,108	,369	,715[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,085	,050	-,500	,620[c]
	Ordinal by Ordinal	Spearman Correlation	-,082	,060	-,479	,635[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * DM * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,105	,103	,614	,543[c]
	Ordinal by Ordinal	Spearman Correlation	,093	,125	,545	,589[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,031	,072	-,183	,856[c]
	Ordinal by Ordinal	Spearman Correlation	-,081	,108	-,473	,639[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * Surgery * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,041	,161	,238	,813[c]
	Ordinal by Ordinal	Spearman Correlation	-,032	,169	-,188	,852[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,133	,155	-,785	,438[c]
	Ordinal by Ordinal	Spearman Correlation	-,120	,163	-,706	,485[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * Smok * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,240	,154	-1,443	,158[c]
	Ordinal by Ordinal	Spearman Correlation	-,205	,160	-1,222	,230[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,038	,121	-,221	,826[c]
	Ordinal by Ordinal	Spearman Correlation	,010	,137	,057	,955[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * Cholest * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,093	,140	-,544	,590[c]
	Ordinal by Ordinal	Spearman Correlation	-,120	,152	-,703	,487[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,201	,140	-1,194	,241[c]
	Ordinal by Ordinal	Spearman Correlation	-,204	,155	-1,215	,233[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * Symptoms * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,095	,142	,555	,582[c]
	Ordinal by Ordinal	Spearman Correlation	,165	,158	,973	,338[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,165	,158	,974	,337[c]
	Ordinal by Ordinal	Spearman Correlation	,264	,158	1,598	,119[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * Want_info * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,018	,050	-,106	,916[c]
	Ordinal by Ordinal	Spearman Correlation	-,006	,077	-,034	,973[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,094	,102	,552	,585[c]
	Ordinal by Ordinal	Spearman Correlation	,107	,111	,628	,534[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * Age * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,164	,147	-,970	,339[c]
	Ordinal by Ordinal	Spearman Correlation	-,127	,172	-,747	,460[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,208	,146	1,239	,224[c]
	Ordinal by Ordinal	Spearman Correlation	,222	,157	1,329	,193[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * Sex * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,164	,130	-,972	,338[c]
	Ordinal by Ordinal	Spearman Correlation	-,217	,135	-1,295	,204[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,099	,172	-,583	,564[c]
	Ordinal by Ordinal	Spearman Correlation	-,119	,171	-,697	,490[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * Educ * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,145	,179	-,854	,399[c]
	Ordinal by Ordinal	Spearman Correlation	-,192	,182	-1,139	,263[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,231	,144	-1,385	,175[c]
	Ordinal by Ordinal	Spearman Correlation	-,249	,152	-1,499	,143[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * Martal_s * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,199	,193	-1,184	,245[c]
	Ordinal by Ordinal	Spearman Correlation	-,153	,189	-,900	,374[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,123	,134	-,723	,474[c]
	Ordinal by Ordinal	Spearman Correlation	-,108	,148	-,634	,531[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

HR_2 * Time * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,031	,136	,181	,857[c]
	Ordinal by Ordinal	Spearman Correlation	,119	,166	,697	,490[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,190	,142	1,127	,268[c]
	Ordinal by Ordinal	Spearman Correlation	,100	,179	,586	,562[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * Triage * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,234	,156	-1,405	,169[c]
	Ordinal by Ordinal	Spearman Correlation	-,257	,157	-1,553	,130[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,086	,163	,504	,618[c]
	Ordinal by Ordinal	Spearman Correlation	,111	,170	,653	,518[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * AIS * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,065	,153	,383	,704[c]
	Ordinal by Ordinal	Spearman Correlation	,051	,161	,296	,769[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,214	,161	1,279	,209[c]
	Ordinal by Ordinal	Spearman Correlation	,259	,156	1,565	,127[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * Cardio * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,475	,126	-3,151	,003[c]
	Ordinal by Ordinal	Spearman Correlation	-,484	,112	-3,221	,003[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,371	,180	-2,327	,026[c]
	Ordinal by Ordinal	Spearman Correlation	-,289	,177	-1,761	,087[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * Cancer * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,288	,154	-1,756	,088[c]
	Ordinal by Ordinal	Spearman Correlation	-,286	,139	-1,738	,091[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,363	,162	-2,268	,030[c]
	Ordinal by Ordinal	Spearman Correlation	-,279	,134	-1,691	,100[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * DM * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,399	,131	-2,536	,016[c]
	Ordinal by Ordinal	Spearman Correlation	-,400	,113	-2,549	,016[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,201	,151	-1,195	,240[c]
	Ordinal by Ordinal	Spearman Correlation	-,200	,123	-1,190	,242[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * Surgery * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,035	,167	-,206	,838[c]
	Ordinal by Ordinal	Spearman Correlation	-,048	,170	-,282	,780[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,078	,166	-,455	,652[c]
	Ordinal by Ordinal	Spearman Correlation	-,098	,167	-,576	,568[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * Smok * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,051	,130	,297	,768[c]
	Ordinal by Ordinal	Spearman Correlation	,034	,149	,196	,846[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,080	,164	-,469	,642[c]
	Ordinal by Ordinal	Spearman Correlation	-,094	,159	-,550	,586[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * Cholest * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,300	,159	-1,831	,076[c]
	Ordinal by Ordinal	Spearman Correlation	-,266	,165	-1,609	,117[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,255	,167	-1,540	,133[c]
	Ordinal by Ordinal	Spearman Correlation	-,217	,160	-1,296	,204[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * Symptoms * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,103	,157	,603	,551[c]
	Ordinal by Ordinal	Spearman Correlation	,075	,165	,437	,665[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,012	,161	-,071	,944[c]
	Ordinal by Ordinal	Spearman Correlation	-,005	,169	-,028	,978[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * Want_info * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,078	,204	,454	,653[c]
	Ordinal by Ordinal	Spearman Correlation	,064	,199	,376	,710[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,129	,195	,761	,452[c]
	Ordinal by Ordinal	Spearman Correlation	,088	,199	,513	,611[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * Age * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,365	,143	2,284	,029[c]
	Ordinal by Ordinal	Spearman Correlation	,379	,148	2,389	,023[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,556	,100	3,901	,000[c]
	Ordinal by Ordinal	Spearman Correlation	,540	,119	3,741	,001[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * Sex * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,346	,144	-2,147	,039[c]
	Ordinal by Ordinal	Spearman Correlation	-,334	,141	-2,065	,047[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,025	,167	,145	,885[c]
	Ordinal by Ordinal	Spearman Correlation	,036	,181	,209	,835[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * Educ * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,422	,129	-2,713	,010[c]
	Ordinal by Ordinal	Spearman Correlation	-,381	,149	-2,406	,022[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,562	,118	-3,964	,000[c]
	Ordinal by Ordinal	Spearman Correlation	-,511	,139	-3,466	,001[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * Martal_s * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,373	,162	2,342	,025[c]
	Ordinal by Ordinal	Spearman Correlation	,393	,160	2,488	,018[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,442	,128	2,873	,007[c]
	Ordinal by Ordinal	Spearman Correlation	,435	,130	2,814	,008[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

SBP_2 * Time * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,013	,160	,078	,938[c]
	Ordinal by Ordinal	Spearman Correlation	,087	,170	,507	,615[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,053	,190	-,312	,757[c]
	Ordinal by Ordinal	Spearman Correlation	-,132	,169	-,779	,441[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * Triage * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,051	,166	-,299	,767[c]
	Ordinal by Ordinal	Spearman Correlation	-,086	,168	-,502	,619[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,082	,156	,483	,632[c]
	Ordinal by Ordinal	Spearman Correlation	,051	,161	,297	,768[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * AIS * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,103	,172	,603	,551[c]
	Ordinal by Ordinal	Spearman Correlation	,011	,178	,063	,950[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,012	,173	-,071	,944[c]
	Ordinal by Ordinal	Spearman Correlation	,064	,174	,372	,713[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * Cardio * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,051	,137	,298	,768[c]
	Ordinal by Ordinal	Spearman Correlation	,024	,157	,138	,891[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,111	,141	-,653	,518[c]
	Ordinal by Ordinal	Spearman Correlation	-,146	,139	-,858	,397[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * Cancer * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,091	,157	,532	,598[c]
	Ordinal by Ordinal	Spearman Correlation	,087	,191	,510	,613[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,224	,112	-1,343	,188[c]
	Ordinal by Ordinal	Spearman Correlation	-,204	,103	-1,214	,233[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * DM * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,075	,119	-,437	,665[c]
	Ordinal by Ordinal	Spearman Correlation	-,140	,137	-,823	,416[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,125	,098	,733	,468[c]
	Ordinal by Ordinal	Spearman Correlation	,069	,116	,406	,687[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * Surgery * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,080	,168	-,465	,645[c]
	Ordinal by Ordinal	Spearman Correlation	-,059	,176	-,345	,732[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,039	,160	,229	,820[c]
	Ordinal by Ordinal	Spearman Correlation	-,005	,167	-,032	,975[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * Smok * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,029	,183	-,171	,865[c]
	Ordinal by Ordinal	Spearman Correlation	,037	,172	,217	,830[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,162	,127	-,958	,345[c]
	Ordinal by Ordinal	Spearman Correlation	-,222	,130	-1,330	,192[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * Cholest * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,378	,150	-2,377	,023[c]
	Ordinal by Ordinal	Spearman Correlation	-,377	,148	-2,371	,024[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,044	,143	,257	,799[c]
	Ordinal by Ordinal	Spearman Correlation	,013	,152	,075	,941[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * Symptoms * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,035	,140	,205	,839[c]
	Ordinal by Ordinal	Spearman Correlation	,084	,161	,489	,628[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,176	,188	1,041	,305[c]
	Ordinal by Ordinal	Spearman Correlation	,277	,170	1,684	,101[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * Want_info * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,153	,075	-,900	,374[c]
	Ordinal by Ordinal	Spearman Correlation	-,164	,091	-,967	,340[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,040	,140	-,234	,816[c]
	Ordinal by Ordinal	Spearman Correlation	-,019	,175	-,113	,911[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * Age * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,181	,140	1,072	,291[c]
	Ordinal by Ordinal	Spearman Correlation	,135	,161	,792	,434[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,257	,160	1,548	,131[c]
	Ordinal by Ordinal	Spearman Correlation	,279	,167	1,693	,100[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * Sex * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,443	,162	-2,877	,007[c]
	Ordinal by Ordinal	Spearman Correlation	-,393	,177	-2,490	,018[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,167	,163	-,986	,331[c]
	Ordinal by Ordinal	Spearman Correlation	-,151	,168	-,892	,379[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * Educ * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,230	,146	-1,376	,178[c]
	Ordinal by Ordinal	Spearman Correlation	-,196	,162	-1,166	,252[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,354	,153	-2,206	,034[c]
	Ordinal by Ordinal	Spearman Correlation	-,326	,162	-2,013	,052[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * Martal_s * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	,142	,142	,835	,410[c]
	Ordinal by Ordinal	Spearman Correlation	,099	,155	,582	,565[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	-,016	,156	-,095	,925[c]
	Ordinal by Ordinal	Spearman Correlation	,025	,168	,148	,883[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

DBP_2 * Time * Group

Symmetric Measures

Group			Value	Asymp. Std. Error[a]	Approx. T[b]	Approx. Sig.
,00	Interval by Interval	Pearson's R	-,059	,183	-,342	,734[c]
	Ordinal by Ordinal	Spearman Correlation	,003	,184	,015	,988[c]
	N of Valid Cases		36			
1,00	Interval by Interval	Pearson's R	,331	,159	2,048	,048[c]
	Ordinal by Ordinal	Spearman Correlation	,255	,149	1,539	,133[c]
	N of Valid Cases		36			

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

c. Based on normal approximation.

Annex H

Output: Effects of group x time on Anxiety in the Emergency Room

Annex H – Output: Effects of group x time on Anxiety in the Emergency Room

General Linear Model

Within-Subjects Factors

Measure: MEASURE_1

factor1	Dependent Variable
1	ANX_1
2	ANX_2

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Multivariate Tests[b]

Effect		Value	F	Hypothesis df	Error df	Sig.
factor1	Pillai's Trace	,004	,252[a]	1,000	68,000	,617
	Wilks' Lambda	,996	,252[a]	1,000	68,000	,617
	Hotelling's Trace	,004	,252[a]	1,000	68,000	,617
	Roy's Largest Root	,004	,252[a]	1,000	68,000	,617
factor1 * AIS	Pillai's Trace	,025	1,749[a]	1,000	68,000	,190
	Wilks' Lambda	,975	1,749[a]	1,000	68,000	,190
	Hotelling's Trace	,026	1,749[a]	1,000	68,000	,190
	Roy's Largest Root	,026	1,749[a]	1,000	68,000	,190
factor1 * Want_info	Pillai's Trace	,000	,021[a]	1,000	68,000	,886
	Wilks' Lambda	1,000	,021[a]	1,000	68,000	,886
	Hotelling's Trace	,000	,021[a]	1,000	68,000	,886
	Roy's Largest Root	,000	,021[a]	1,000	68,000	,886
factor1 * Group	Pillai's Trace	,215	18,579[a]	1,000	68,000	,000
	Wilks' Lambda	,785	18,579[a]	1,000	68,000	,000
	Hotelling's Trace	,273	18,579[a]	1,000	68,000	,000
	Roy's Largest Root	,273	18,579[a]	1,000	68,000	,000

a. Exact statistic

b.
Design: Intercept+AIS+Want_info+Group
Within Subjects Design: factor1

Mauchly's Test of Sphericity[b]

Measure: MEASURE_1

Within Subjects Effect	Mauchly's W	Approx. Chi-Square	df	Sig.	Epsilon[a]		
					Greenhouse-Geisser	Huynh-Feldt	Lower-bound
factor1	1,000	,000	0	.	1,000	1,000	1,000

Tests the null hypothesis that the error covariance matrix of the orthonormalized transformed dependent variables is proportional to an identity matrix.

a. May be used to adjust the degrees of freedom for the averaged tests of significance. Corrected tests are displayed in the Tests of Within-Subjects Effects table.

b.
Design: Intercept+AIS+Want_info+Group
Within Subjects Design: factor1

Tests of Within-Subjects Effects

Measure: MEASURE_1

Source		Type III Sum of Squares	df	Mean Square	F	Sig.
factor1	Sphericity Assumed	,418	1	,418	,252	,617
	Greenhouse-Geisser	,418	1,000	,418	,252	,617
	Huynh-Feldt	,418	1,000	,418	,252	,617
	Lower-bound	,418	1,000	,418	,252	,617
factor1 * AIS	Sphericity Assumed	2,900	1	2,900	1,749	,190
	Greenhouse-Geisser	2,900	1,000	2,900	1,749	,190
	Huynh-Feldt	2,900	1,000	2,900	1,749	,190
	Lower-bound	2,900	1,000	2,900	1,749	,190
factor1 * Want_info	Sphericity Assumed	,034	1	,034	,021	,886
	Greenhouse-Geisser	,034	1,000	,034	,021	,886
	Huynh-Feldt	,034	1,000	,034	,021	,886
	Lower-bound	,034	1,000	,034	,021	,886
factor1 * Group	Sphericity Assumed	30,796	1	30,796	18,579	,000
	Greenhouse-Geisser	30,796	1,000	30,796	18,579	,000
	Huynh-Feldt	30,796	1,000	30,796	18,579	,000
	Lower-bound	30,796	1,000	30,796	18,579	,000
Error(factor1)	Sphericity Assumed	112,711	68	1,658		
	Greenhouse-Geisser	112,711	68,000	1,658		
	Huynh-Feldt	112,711	68,000	1,658		
	Lower-bound	112,711	68,000	1,658		

Tests of Within-Subjects Contrasts

Measure: MEASURE_1

Source	factor1	Type III Sum of Squares	df	Mean Square	F	Sig.
factor1	Linear	,418	1	,418	,252	,617
factor1 * AIS	Linear	2,900	1	2,900	1,749	,190
factor1 * Want_info	Linear	,034	1	,034	,021	,886
factor1 * Group	Linear	30,796	1	30,796	18,579	,000
Error(factor1)	Linear	112,711	68	1,658		

Tests of Between-Subjects Effects

Measure: MEASURE_1
Transformed Variable: Average

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Intercept	68,397	1	68,397	5,826	,018
AIS	27,245	1	27,245	2,321	,132
Want_info	30,342	1	30,342	2,584	,113
Group	29,342	1	29,342	2,499	,119
Error	798,366	68	11,741		

Estimated Marginal Means

Estimates

Measure: MEASURE_1

Group	Mean	Std. Error	95% Confidence Interval	
			Lower Bound	Upper Bound
,00	5,192[a]	,406	4,382	6,002
1,00	4,280[a]	,406	3,470	5,090

a. Covariates appearing in the model are evaluated at the following values: AIS = ,4444, Want_info = 1,0694.

Pairwise Comparisons

Measure: MEASURE_1

(I) Group	(J) Group	Mean Difference (I-J)	Std. Error	Sig.[a]	95% Confidence Interval for Difference[a]	
					Lower Bound	Upper Bound
,00	1,00	,912	,577	,119	-,239	2,063
1,00	,00	-,912	,577	,119	-2,063	,239

Based on estimated marginal means

a. Adjustment for multiple comparisons: Least Significant Difference (equivalent to no adjustments).

Univariate Tests

Measure: MEASURE_1

	Sum of Squares	df	Mean Square	F	Sig.
Contrast	14,671	1	14,671	2,499	,119
Error	399,183	68	5,870		

The F tests the effect of Group. This test is based on the linearly independent pairwise comparisons among the estimated marginal means.

2. factor1

Estimates

Measure: MEASURE_1

factor1	Mean	Std. Error	95% Confidence Interval	
			Lower Bound	Upper Bound
1	5,139[a]	,305	4,530	5,748
2	4,333[a]	,305	3,725	4,942

a. Covariates appearing in the model are evaluated at the following values: AIS = ,4444, Want_info = 1,0694.

Pairwise Comparisons

Measure: MEASURE_1

(I) factor1	(J) factor1	Mean Difference (I-J)	Std. Error	Sig.[a]	95% Confidence Interval for Difference[a]	
					Lower Bound	Upper Bound
1	2	,806*	,215	,000	,377	1,234
2	1	-,806*	,215	,000	-1,234	-,377

Based on estimated marginal means

*. The mean difference is significant at the ,05 level.

a. Adjustment for multiple comparisons: Least Significant Difference (equivalent to no adjustments).

Multivariate Tests

	Value	F	Hypothesis df	Error df	Sig.
Pillai's trace	,172	14,094[a]	1,000	68,000	,000
Wilks' lambda	,828	14,094[a]	1,000	68,000	,000
Hotelling's trace	,207	14,094[a]	1,000	68,000	,000
Roy's largest root	,207	14,094[a]	1,000	68,000	,000

Each F tests the multivariate effect of factor1. These tests are based on the linearly independent pairwise comparisons among the estimated marginal means.

a. Exact statistic

3. Group * factor1

Measure: MEASURE_1

Group	factor1	Mean	Std. Error	95% Confidence Interval	
				Lower Bound	Upper Bound
,00	1	5,128[a]	,434	4,262	5,993
	2	5,257[a]	,434	4,392	6,122
1,00	1	5,150[a]	,434	4,285	6,016
	2	3,410[a]	,434	2,545	4,275

a. Covariates appearing in the model are evaluated at the following values: AIS = ,4444, Want_info = 1,0694.

Univariate Analysis of Variance

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Tests of Between-Subjects Effects

Dependent Variable: ANX_1

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	24,851[a]	3	8,284	1,236	,303
Intercept	39,757	1	39,757	5,932	,017
AIS	6,184	1	6,184	,923	,340
Want_info	16,205	1	16,205	2,418	,125
Group	,009	1	,009	,001	,971
Error	455,760	68	6,702		
Total	2382,000	72			
Corrected Total	480,611	71			

a. R Squared = ,052 (Adjusted R Squared = ,010)

Univariate Analysis of Variance

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Tests of Between-Subjects Effects

Dependent Variable: ANX_2

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	110,683[a]	3	36,894	5,510	,002
Intercept	29,058	1	29,058	4,340	,041
AIS	23,960	1	23,960	3,578	,063
Want_info	14,172	1	14,172	2,116	,150
Group	60,129	1	60,129	8,980	,004
Error	455,317	68	6,696		
Total	1918,000	72			
Corrected Total	566,000	71			

a. R Squared = ,196 (Adjusted R Squared = ,160)

Means

Case Processing Summary

	Cases					
	Included		Excluded		Total	
	N	Percent	N	Percent	N	Percent
ANX_1 * Group	72	100,0%	0	,0%	72	100,0%
ANX_2 * Group	72	100,0%	0	,0%	72	100,0%

Report

Group		ANX_1	ANX_2
,00	Mean	5,1389	5,3056
	N	36	36
	Std. Deviation	2,58736	3,11512
1,00	Mean	5,1389	3,3611
	N	36	36
	Std. Deviation	2,65279	2,12674
Total	Mean	5,1389	4,3333
	N	72	72
	Std. Deviation	2,60176	2,82344

Annex I

Output: Effects of group x time on Perceived-Control in the Emergency Room

Annex I – Output: Effects of group x time on Perceived-Control in the Emergency Room

General Linear Model

Within-Subjects Factors

Measure: MEASURE_1

factor1	Dependent Variable
1	P_Cont_1
2	P_Cont_2

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Multivariate Tests[b]

Effect		Value	F	Hypothesis df	Error df	Sig.
factor1	Pillai's Trace	,005	,369[a]	1,000	67,000	,546
	Wilks' Lambda	,995	,369[a]	1,000	67,000	,546
	Hotelling's Trace	,006	,369[a]	1,000	67,000	,546
	Roy's Largest Root	,006	,369[a]	1,000	67,000	,546
factor1 * Cancer	Pillai's Trace	,012	,791[a]	1,000	67,000	,377
	Wilks' Lambda	,988	,791[a]	1,000	67,000	,377
	Hotelling's Trace	,012	,791[a]	1,000	67,000	,377
	Roy's Largest Root	,012	,791[a]	1,000	67,000	,377
factor1 * Educ	Pillai's Trace	,000	,002[a]	1,000	67,000	,963
	Wilks' Lambda	1,000	,002[a]	1,000	67,000	,963
	Hotelling's Trace	,000	,002[a]	1,000	67,000	,963
	Roy's Largest Root	,000	,002[a]	1,000	67,000	,963
factor1 * Age	Pillai's Trace	,000	,000[a]	1,000	67,000	,993
	Wilks' Lambda	1,000	,000[a]	1,000	67,000	,993
	Hotelling's Trace	,000	,000[a]	1,000	67,000	,993
	Roy's Largest Root	,000	,000[a]	1,000	67,000	,993
factor1 * Group	Pillai's Trace	,069	4,964[a]	1,000	67,000	,029
	Wilks' Lambda	,931	4,964[a]	1,000	67,000	,029
	Hotelling's Trace	,074	4,964[a]	1,000	67,000	,029
	Roy's Largest Root	,074	4,964[a]	1,000	67,000	,029

a. Exact statistic

b.
Design: Intercept+Cancer+Educ+Age+Group
Within Subjects Design: factor1

Mauchly's Test of Sphericity[b]

Measure: MEASURE_1

Within Subjects Effect	Mauchly's W	Approx. Chi-Square	df	Sig.	Epsilon[a]		
					Greenhouse-Geisser	Huynh-Feldt	Lowe
factor1	1,000	,000	0	.	1,000	1,000	

Tests the null hypothesis that the error covariance matrix of the orthonormalized transformed dependent variables is proportional to an identity matrix.

a. May be used to adjust the degrees of freedom for the averaged tests of significance. Corrected tests are displa the Tests of Within-Subjects Effects table.

b.
Design: Intercept+Cancer+Educ+Age+Group
Within Subjects Design: factor1

Tests of Within-Subjects Effects

Measure: MEASURE_1

Source		Type III Sum of Squares	df	Mean Square	F	Sig.
factor1	Sphericity Assumed	,278	1	,278	,369	,546
	Greenhouse-Geisser	,278	1,000	,278	,369	,546
	Huynh-Feldt	,278	1,000	,278	,369	,546
	Lower-bound	,278	1,000	,278	,369	,546
factor1 * Cancer	Sphericity Assumed	,596	1	,596	,791	,377
	Greenhouse-Geisser	,596	1,000	,596	,791	,377
	Huynh-Feldt	,596	1,000	,596	,791	,377
	Lower-bound	,596	1,000	,596	,791	,377
factor1 * Educ	Sphericity Assumed	,002	1	,002	,002	,963
	Greenhouse-Geisser	,002	1,000	,002	,002	,963
	Huynh-Feldt	,002	1,000	,002	,002	,963
	Lower-bound	,002	1,000	,002	,002	,963
factor1 * Age	Sphericity Assumed	5,14E-005	1	5,14E-005	,000	,993
	Greenhouse-Geisser	5,14E-005	1,000	5,14E-005	,000	,993
	Huynh-Feldt	5,14E-005	1,000	5,14E-005	,000	,993
	Lower-bound	5,14E-005	1,000	5,14E-005	,000	,993
factor1 * Group	Sphericity Assumed	3,739	1	3,739	4,964	,029
	Greenhouse-Geisser	3,739	1,000	3,739	4,964	,029
	Huynh-Feldt	3,739	1,000	3,739	4,964	,029
	Lower-bound	3,739	1,000	3,739	4,964	,029
Error(factor1)	Sphericity Assumed	50,469	67	,753		
	Greenhouse-Geisser	50,469	67,000	,753		
	Huynh-Feldt	50,469	67,000	,753		
	Lower-bound	50,469	67,000	,753		

Tests of Within-Subjects Contrasts

Measure: MEASURE_1

Source	factor1	Type III Sum of Squares	df	Mean Square	F	Sig.
factor1	Linear	,278	1	,278	,369	,546
factor1 * Cancer	Linear	,596	1	,596	,791	,377
factor1 * Educ	Linear	,002	1	,002	,002	,963
factor1 * Age	Linear	5,14E-005	1	5,14E-005	,000	,993
factor1 * Group	Linear	3,739	1	3,739	4,964	,029
Error(factor1)	Linear	50,469	67	,753		

Tests of Between-Subjects Effects

Measure: MEASURE_1

Transformed Variable: Average

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Intercept	11,475	1	11,475	4,281	,042
Cancer	1,422	1	1,422	,530	,469
Educ	,561	1	,561	,209	,649
Age	10,054	1	10,054	3,751	,057
Group	7,493	1	7,493	2,795	,099
Error	179,604	67	2,681		

Univariate Analysis of Variance

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Tests of Between-Subjects Effects

Dependent Variable: P_Cont_1

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	13,954[a]	4	3,488	1,858	,128
Intercept	7,662	1	7,662	4,080	,047
Age	5,004	1	5,004	2,665	,107
Educ	,251	1	,251	,134	,716
Cancer	,088	1	,088	,047	,829
Group	,323	1	,323	,172	,680
Error	125,824	67	1,878		
Total	764,000	72			
Corrected Total	139,778	71			

a. R Squared = ,100 (Adjusted R Squared = ,046)

Univariate Analysis of Variance

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Tests of Between-Subjects Effects

Dependent Variable: P_Cont_2

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	34,403[a]	4	8,601	5,528	,001
Intercept	4,091	1	4,091	2,630	,110
Age	5,050	1	5,050	3,245	,076
Educ	,311	1	,311	,200	,656
Cancer	1,929	1	1,929	1,240	,270
Group	10,909	1	10,909	7,011	,010
Error	104,249	67	1,556		
Total	867,000	72			
Corrected Total	138,653	71			

a. R Squared = ,248 (Adjusted R Squared = ,203)

Means

Case Processing Summary

	Cases					
	Included		Excluded		Total	
	N	Percent	N	Percent	N	Percent
P_Cont_1 * Group	72	100,0%	0	,0%	72	100,0%
P_Cont_2 * Group	72	100,0%	0	,0%	72	100,0%

Report

Group		P_Cont_1	P_Cont_2
,00	Mean	2,8056	2,6944
	N	36	36
	Std. Deviation	1,45051	1,43067
1,00	Mean	3,0833	3,6667
	N	36	36
	Std. Deviation	1,36015	1,19523
Total	Mean	2,9444	3,1806
	N	72	72
	Std. Deviation	1,40310	1,39745

Annex J

Output: Effects of group x time on Perceived-Certainty in the Emergency Room

Annex J – Output: Effects of group x time on Perceived-Certainty in the Emergency Room

General Linear Model

Within-Subjects Factors

Measure: MEASURE_1

factor1	Dependent Variable
1	Certainty_1
2	Certainty_2

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Multivariate Tests[b]

Effect		Value	F	Hypothesis df	Error df	Sig.
factor1	Pillai's Trace	,001	,090[a]	1,000	67,000	,764
	Wilks' Lambda	,999	,090[a]	1,000	67,000	,764
	Hotelling's Trace	,001	,090[a]	1,000	67,000	,764
	Roy's Largest Root	,001	,090[a]	1,000	67,000	,764
factor1 * Educ	Pillai's Trace	,001	,034[a]	1,000	67,000	,855
	Wilks' Lambda	,999	,034[a]	1,000	67,000	,855
	Hotelling's Trace	,001	,034[a]	1,000	67,000	,855
	Roy's Largest Root	,001	,034[a]	1,000	67,000	,855
factor1 * Martal_s	Pillai's Trace	,001	,043[a]	1,000	67,000	,836
	Wilks' Lambda	,999	,043[a]	1,000	67,000	,836
	Hotelling's Trace	,001	,043[a]	1,000	67,000	,836
	Roy's Largest Root	,001	,043[a]	1,000	67,000	,836
factor1 * Age	Pillai's Trace	,001	,066[a]	1,000	67,000	,797
	Wilks' Lambda	,999	,066[a]	1,000	67,000	,797
	Hotelling's Trace	,001	,066[a]	1,000	67,000	,797
	Roy's Largest Root	,001	,066[a]	1,000	67,000	,797
factor1 * Group	Pillai's Trace	,061	4,382[a]	1,000	67,000	,040
	Wilks' Lambda	,939	4,382[a]	1,000	67,000	,040
	Hotelling's Trace	,065	4,382[a]	1,000	67,000	,040
	Roy's Largest Root	,065	4,382[a]	1,000	67,000	,040

a. Exact statistic

b.
Design: Intercept+Educ+Martal_s+Age+Group
Within Subjects Design: factor1

Mauchly's Test of Sphericity[b]

Measure: MEASURE_1

Within Subjects Effect	Mauchly's W	Approx. Chi-Square	df	Sig.	Epsilon[a]		
					Greenhouse-Geisser	Huynh-Feldt	Lower-bound
factor1	1,000	,000	0	.	1,000	1,000	1,000

Tests the null hypothesis that the error covariance matrix of the orthonormalized transformed dependent variables is proportional to an identity matrix.

a. May be used to adjust the degrees of freedom for the averaged tests of significance. Corrected tests are displayed in the Tests of Within-Subjects Effects table.

b.
Design: Intercept+Educ+Martal_s+Age+Group
Within Subjects Design: factor1

Tests of Within-Subjects Effects

Measure: MEASURE_1

Source		Type III Sum of Squares	df	Mean Square	F	Sig.
factor1	Sphericity Assumed	,076	1	,076	,090	,764
	Greenhouse-Geisser	,076	1,000	,076	,090	,764
	Huynh-Feldt	,076	1,000	,076	,090	,764
	Lower-bound	,076	1,000	,076	,090	,764
factor1 * Educ	Sphericity Assumed	,028	1	,028	,034	,855
	Greenhouse-Geisser	,028	1,000	,028	,034	,855
	Huynh-Feldt	,028	1,000	,028	,034	,855
	Lower-bound	,028	1,000	,028	,034	,855
factor1 * Martal_s	Sphericity Assumed	,036	1	,036	,043	,836
	Greenhouse-Geisser	,036	1,000	,036	,043	,836
	Huynh-Feldt	,036	1,000	,036	,043	,836
	Lower-bound	,036	1,000	,036	,043	,836
factor1 * Age	Sphericity Assumed	,056	1	,056	,066	,797
	Greenhouse-Geisser	,056	1,000	,056	,066	,797
	Huynh-Feldt	,056	1,000	,056	,066	,797
	Lower-bound	,056	1,000	,056	,066	,797
factor1 * Group	Sphericity Assumed	3,665	1	3,665	4,382	,040
	Greenhouse-Geisser	3,665	1,000	3,665	4,382	,040
	Huynh-Feldt	3,665	1,000	3,665	4,382	,040
	Lower-bound	3,665	1,000	3,665	4,382	,040
Error(factor1)	Sphericity Assumed	56,041	67	,836		
	Greenhouse-Geisser	56,041	67,000	,836		
	Huynh-Feldt	56,041	67,000	,836		
	Lower-bound	56,041	67,000	,836		

Tests of Within-Subjects Contrasts

Measure: MEASURE_1

Source	factor1	Type III Sum of Squares	df	Mean Square	F	Sig.
factor1	Linear	,076	1	,076	,090	,764
factor1 * Educ	Linear	,028	1	,028	,034	,855
factor1 * Martal_s	Linear	,036	1	,036	,043	,836
factor1 * Age	Linear	,056	1	,056	,066	,797
factor1 * Group	Linear	3,665	1	3,665	4,382	,040
Error(factor1)	Linear	56,041	67	,836		

Tests of Between-Subjects Effects

Measure: MEASURE_1

Transformed Variable: Average

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Intercept	62,386	1	62,386	27,163	,000
Educ	,767	1	,767	,334	,565
Martal_s	,838	1	,838	,365	,548
Age	4,001	1	4,001	1,742	,191
Group	5,919	1	5,919	2,577	,113
Error	153,880	67	2,297		

Univariate Analysis of Variance

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Tests of Between-Subjects Effects

Dependent Variable: Certainty_1

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	9,482[a]	4	2,371	1,493	,214
Intercept	29,058	1	29,058	18,299	,000
Educ	,251	1	,251	,158	,692
Age	1,557	1	1,557	,980	,326
Martal_s	,611	1	,611	,385	,537
Group	,134	1	,134	,085	,772
Error	106,393	67	1,588		
Total	677,000	72			
Corrected Total	115,875	71			

a. R Squared = ,082 (Adjusted R Squared = ,027)

Univariate Analysis of Variance

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Tests of Between-Subjects Effects

Dependent Variable: Certainty_2

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	25,125[a]	4	6,281	4,065	,005
Intercept	33,404	1	33,404	21,618	,000
Educ	,545	1	,545	,352	,555
Age	2,500	1	2,500	1,618	,208
Martal_s	,263	1	,263	,170	,681
Group	9,450	1	9,450	6,116	,016
Error	103,528	67	1,545		
Total	807,000	72			
Corrected Total	128,653	71			

a. R Squared = ,195 (Adjusted R Squared = ,147)

Annex K

Output: Effects of group x time on Heart Rate in the Emergency Room

Output: Effects of group x time on Heart Rate in the Emergency Room

General Linear Model

Within-Subjects Factors

Measure: MEASURE_1

factor1	Dependent Variable
1	HR_1
2	HR_2

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Multivariate Tests[b]

Effect		Value	F	Hypothesis df	Error df	Sig.
factor1	Pillai's Trace	,006	,432[a]	1,000	68,000	,513
	Wilks' Lambda	,994	,432[a]	1,000	68,000	,513
	Hotelling's Trace	,006	,432[a]	1,000	68,000	,513
	Roy's Largest Root	,006	,432[a]	1,000	68,000	,513
factor1 * Age	Pillai's Trace	,000	,024[a]	1,000	68,000	,877
	Wilks' Lambda	1,000	,024[a]	1,000	68,000	,877
	Hotelling's Trace	,000	,024[a]	1,000	68,000	,877
	Roy's Largest Root	,000	,024[a]	1,000	68,000	,877
factor1 * Cardio	Pillai's Trace	,018	1,263[a]	1,000	68,000	,265
	Wilks' Lambda	,982	1,263[a]	1,000	68,000	,265
	Hotelling's Trace	,019	1,263[a]	1,000	68,000	,265
	Roy's Largest Root	,019	1,263[a]	1,000	68,000	,265
factor1 * Group	Pillai's Trace	,373	40,377[a]	1,000	68,000	,000
	Wilks' Lambda	,627	40,377[a]	1,000	68,000	,000
	Hotelling's Trace	,594	40,377[a]	1,000	68,000	,000
	Roy's Largest Root	,594	40,377[a]	1,000	68,000	,000

a. Exact statistic

b.
Design: Intercept+Age+Cardio+Group
Within Subjects Design: factor1

Mauchly's Test of Sphericity[b]

Measure: MEASURE_1

Within Subjects Effect	Mauchly's W	Approx. Chi-Square	df	Sig.	Epsilon[a]		
					Greenhouse-Geisser	Huynh-Feldt	Lower-bound
factor1	1,000	,000	0	.	1,000	1,000	1,000

Tests the null hypothesis that the error covariance matrix of the orthonormalized transformed dependent variables is proportional to an identity matrix.

a. May be used to adjust the degrees of freedom for the averaged tests of significance. Corrected tests are displayed in the Tests of Within-Subjects Effects table.

b.
Design: Intercept+Age+Cardio+Group
Within Subjects Design: factor1

Tests of Within-Subjects Effects

Measure: MEASURE_1

Source		Type III Sum of Squares	df	Mean Square	F	Sig.
factor1	Sphericity Assumed	21,594	1	21,594	,432	,513
	Greenhouse-Geisser	21,594	1,000	21,594	,432	,513
	Huynh-Feldt	21,594	1,000	21,594	,432	,513
	Lower-bound	21,594	1,000	21,594	,432	,513
factor1 * Age	Sphericity Assumed	1,204	1	1,204	,024	,877
	Greenhouse-Geisser	1,204	1,000	1,204	,024	,877
	Huynh-Feldt	1,204	1,000	1,204	,024	,877
	Lower-bound	1,204	1,000	1,204	,024	,877
factor1 * Cardio	Sphericity Assumed	63,176	1	63,176	1,263	,265
	Greenhouse-Geisser	63,176	1,000	63,176	1,263	,265
	Huynh-Feldt	63,176	1,000	63,176	1,263	,265
	Lower-bound	63,176	1,000	63,176	1,263	,265
factor1 * Group	Sphericity Assumed	2019,185	1	2019,185	40,377	,000
	Greenhouse-Geisser	2019,185	1,000	2019,185	40,377	,000
	Huynh-Feldt	2019,185	1,000	2019,185	40,377	,000
	Lower-bound	2019,185	1,000	2019,185	40,377	,000
Error(factor1)	Sphericity Assumed	3400,592	68	50,009		
	Greenhouse-Geisser	3400,592	68,000	50,009		
	Huynh-Feldt	3400,592	68,000	50,009		
	Lower-bound	3400,592	68,000	50,009		

Tests of Within-Subjects Contrasts

Measure: MEASURE_1

Source	factor1	Type III Sum of Squares	df	Mean Square	F	Sig.
factor1	Linear	21,594	1	21,594	,432	,513
factor1 * Age	Linear	1,204	1	1,204	,024	,877
factor1 * Cardio	Linear	63,176	1	63,176	1,263	,265
factor1 * Group	Linear	2019,185	1	2019,185	40,377	,000
Error(factor1)	Linear	3400,592	68	50,009		

Tests of Between-Subjects Effects

Measure: MEASURE_1
Transformed Variable: Average

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Intercept	17898,089	1	17898,089	93,559	,000
Age	10,564	1	10,564	,055	,815
Cardio	7,769	1	7,769	,041	,841
Group	475,435	1	475,435	2,485	,120
Error	13008,568	68	191,302		

Univariate Analysis of Variance

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Tests of Between-Subjects Effects

Dependent Variable: HR_1

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	373,103[a]	3	124,368	,910	,441
Intercept	8338,159	1	8338,159	60,993	,000
Age	2,317	1	2,317	,017	,897
Cardio	57,627	1	57,627	,422	,518
Group	267,518	1	267,518	1,957	,166
Error	9296,008	68	136,706		
Total	448966,000	72			
Corrected Total	9669,111	71			

a. R Squared = ,039 (Adjusted R Squared = -,004)

Univariate Analysis of Variance

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Tests of Between-Subjects Effects

Dependent Variable: HR_2

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	2271,834[a]	3	757,278	7,239	,000
Intercept	9581,524	1	9581,524	91,597	,000
Age	9,451	1	9,451	,090	,765
Cardio	13,318	1	13,318	,127	,722
Group	2227,101	1	2227,101	21,291	,000
Error	7113,152	68	104,605		
Total	427845,000	72			
Corrected Total	9384,986	71			

a. R Squared = ,242 (Adjusted R Squared = ,209)

Means

Case Processing Summary

	Cases					
	Included		Excluded		Total	
	N	Percent	N	Percent	N	Percent
HR_1 * Group	72	100,0%	0	,0%	72	100,0%
HR_2 * Group	72	100,0%	0	,0%	72	100,0%

Report

Group		HR_1	HR_2
,00	Mean	76,1111	81,8333
	N	36	36
	Std. Deviation	11,13239	11,27956
1,00	Mean	80,1111	70,6389
	N	36	36
	Std. Deviation	12,00423	8,74448
Total	Mean	78,1111	76,2361
	N	72	72
	Std. Deviation	11,66982	11,49708

Annex L

Output: Effects of group x time on Systolic Blood Pressure in the Emergency Room

Output: Effects of group x time on Systolic Blood Pressure in the Emergency Room

General Linear Model

Within-Subjects Factors

Measure: MEASURE_1

factor1	Dependent Variable
1	SBP_1
2	SBP_2

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Multivariate Tests [b]

Effect		Value	F	Hypothesis df	Error df	Sig.
factor1	Pillai's Trace	,069	4,688[a]	1,000	63,000	,034
	Wilks' Lambda	,931	4,688[a]	1,000	63,000	,034
	Hotelling's Trace	,074	4,688[a]	1,000	63,000	,034
	Roy's Largest Root	,074	4,688[a]	1,000	63,000	,034
factor1 * Age	Pillai's Trace	,021	1,339[a]	1,000	63,000	,252
	Wilks' Lambda	,979	1,339[a]	1,000	63,000	,252
	Hotelling's Trace	,021	1,339[a]	1,000	63,000	,252
	Roy's Largest Root	,021	1,339[a]	1,000	63,000	,252
factor1 * Martal_s	Pillai's Trace	,005	,315[a]	1,000	63,000	,577
	Wilks' Lambda	,995	,315[a]	1,000	63,000	,577
	Hotelling's Trace	,005	,315[a]	1,000	63,000	,577
	Roy's Largest Root	,005	,315[a]	1,000	63,000	,577
factor1 * Cardio	Pillai's Trace	,011	,705[a]	1,000	63,000	,404
	Wilks' Lambda	,989	,705[a]	1,000	63,000	,404
	Hotelling's Trace	,011	,705[a]	1,000	63,000	,404
	Roy's Largest Root	,011	,705[a]	1,000	63,000	,404
factor1 * Cancer	Pillai's Trace	,023	1,458[a]	1,000	63,000	,232
	Wilks' Lambda	,977	1,458[a]	1,000	63,000	,232
	Hotelling's Trace	,023	1,458[a]	1,000	63,000	,232
	Roy's Largest Root	,023	1,458[a]	1,000	63,000	,232
factor1 * DM	Pillai's Trace	,071	4,794[a]	1,000	63,000	,032
	Wilks' Lambda	,929	4,794[a]	1,000	63,000	,032
	Hotelling's Trace	,076	4,794[a]	1,000	63,000	,032
	Roy's Largest Root	,076	4,794[a]	1,000	63,000	,032
factor1 * Cholest	Pillai's Trace	,014	,925[a]	1,000	63,000	,340
	Wilks' Lambda	,986	,925[a]	1,000	63,000	,340
	Hotelling's Trace	,015	,925[a]	1,000	63,000	,340
	Roy's Largest Root	,015	,925[a]	1,000	63,000	,340
factor1 * Educ	Pillai's Trace	,000	,021[a]	1,000	63,000	,885
	Wilks' Lambda	1,000	,021[a]	1,000	63,000	,885
	Hotelling's Trace	,000	,021[a]	1,000	63,000	,885
	Roy's Largest Root	,000	,021[a]	1,000	63,000	,885
factor1 * Group	Pillai's Trace	,409	43,642[a]	1,000	63,000	,000
	Wilks' Lambda	,591	43,642[a]	1,000	63,000	,000
	Hotelling's Trace	,693	43,642[a]	1,000	63,000	,000
	Roy's Largest Root	,693	43,642[a]	1,000	63,000	,000

a. Exact statistic

b. Design: Intercept+Age+Martal_s+Cardio+Cancer+DM+Cholest+Educ+Group
Within Subjects Design: factor1

Mauchly's Test of Sphericity[b]

Measure: MEASURE_1

Within Subjects Effect	Mauchly's W	Approx. Chi-Square	df	Sig.	Epsilon[a]		
					Greenhouse-Geisser	Huynh-Feldt	Lower-bound
factor1	1,000	,000	0	.	1,000	1,000	1,000

Tests the null hypothesis that the error covariance matrix of the orthonormalized transformed dependent variables is proportional to an identity matrix.

a. May be used to adjust the degrees of freedom for the averaged tests of significance. Corrected tests are displayed in the Tests of Within-Subjects Effects table.

b.
Design: Intercept+Age+Martal_s+Cardio+Cancer+DM+Cholest+Educ+Group
Within Subjects Design: factor1

Tests of Within-Subjects Effects

Measure: MEASURE_1

Source		Type III Sum of Squares	df	Mean Square	F	Sig.
factor1	Sphericity Assumed	728,337	1	728,337	4,688	,034
	Greenhouse-Geisser	728,337	1,000	728,337	4,688	,034
	Huynh-Feldt	728,337	1,000	728,337	4,688	,034
	Lower-bound	728,337	1,000	728,337	4,688	,034
factor1 * Age	Sphericity Assumed	208,043	1	208,043	1,339	,252
	Greenhouse-Geisser	208,043	1,000	208,043	1,339	,252
	Huynh-Feldt	208,043	1,000	208,043	1,339	,252
	Lower-bound	208,043	1,000	208,043	1,339	,252
factor1 * Martal_s	Sphericity Assumed	48,947	1	48,947	,315	,577
	Greenhouse-Geisser	48,947	1,000	48,947	,315	,577
	Huynh-Feldt	48,947	1,000	48,947	,315	,577
	Lower-bound	48,947	1,000	48,947	,315	,577
factor1 * Cardio	Sphericity Assumed	109,600	1	109,600	,705	,404
	Greenhouse-Geisser	109,600	1,000	109,600	,705	,404
	Huynh-Feldt	109,600	1,000	109,600	,705	,404
	Lower-bound	109,600	1,000	109,600	,705	,404
factor1 * Cancer	Sphericity Assumed	226,505	1	226,505	1,458	,232
	Greenhouse-Geisser	226,505	1,000	226,505	1,458	,232
	Huynh-Feldt	226,505	1,000	226,505	1,458	,232
	Lower-bound	226,505	1,000	226,505	1,458	,232
factor1 * DM	Sphericity Assumed	744,875	1	744,875	4,794	,032
	Greenhouse-Geisser	744,875	1,000	744,875	4,794	,032
	Huynh-Feldt	744,875	1,000	744,875	4,794	,032
	Lower-bound	744,875	1,000	744,875	4,794	,032
factor1 * Cholest	Sphericity Assumed	143,720	1	143,720	,925	,340
	Greenhouse-Geisser	143,720	1,000	143,720	,925	,340
	Huynh-Feldt	143,720	1,000	143,720	,925	,340
	Lower-bound	143,720	1,000	143,720	,925	,340
factor1 * Educ	Sphericity Assumed	3,279	1	3,279	,021	,885
	Greenhouse-Geisser	3,279	1,000	3,279	,021	,885
	Huynh-Feldt	3,279	1,000	3,279	,021	,885
	Lower-bound	3,279	1,000	3,279	,021	,885
factor1 * Group	Sphericity Assumed	6780,628	1	6780,628	43,642	,000
	Greenhouse-Geisser	6780,628	1,000	6780,628	43,642	,000
	Huynh-Feldt	6780,628	1,000	6780,628	43,642	,000
	Lower-bound	6780,628	1,000	6780,628	43,642	,000
Error(factor1)	Sphericity Assumed	9788,284	63	155,370		
	Greenhouse-Geisser	9788,284	63,000	155,370		
	Huynh-Feldt	9788,284	63,000	155,370		
	Lower-bound	9788,284	63,000	155,370		

Tests of Within-Subjects Contrasts

Measure: MEASURE_1

Source	factor1	Type III Sum of Squares	df	Mean Square	F	Sig.
factor1	Linear	728,337	1	728,337	4,688	,034
factor1 * Age	Linear	208,043	1	208,043	1,339	,252
factor1 * Martal_s	Linear	48,947	1	48,947	,315	,577
factor1 * Cardio	Linear	109,600	1	109,600	,705	,404
factor1 * Cancer	Linear	226,505	1	226,505	1,458	,232
factor1 * DM	Linear	744,875	1	744,875	4,794	,032
factor1 * Cholest	Linear	143,720	1	143,720	,925	,340
factor1 * Educ	Linear	3,279	1	3,279	,021	,885
factor1 * Group	Linear	6780,628	1	6780,628	43,642	,000
Error(factor1)	Linear	9788,284	63	155,370		

Tests of Between-Subjects Effects

Measure: MEASURE_1

Transformed Variable: Average

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Intercept	25974,300	1	25974,300	32,776	,000
Age	171,333	1	171,333	,216	,644
Martal_s	1565,232	1	1565,232	1,975	,165
Cardio	3471,745	1	3471,745	4,381	,040
Cancer	238,264	1	238,264	,301	,585
DM	60,649	1	60,649	,077	,783
Cholest	24,629	1	24,629	,031	,861
Educ	4538,027	1	4538,027	5,726	,020
Group	663,818	1	663,818	,838	,364
Error	49926,201	63	792,479		

Univariate Analysis of Variance

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Tests of Between-Subjects Effects

Dependent Variable: SBP_1

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	23116,664[a]	8	2889,583	5,196	,000
Intercept	9001,832	1	9001,832	16,187	,000
Age	378,486	1	378,486	,681	,413
Educ	2392,639	1	2392,639	4,302	,042
Martal_s	1083,882	1	1083,882	1,949	,168
Cardio	2407,523	1	2407,523	4,329	,042
Cancer	,074	1	,074	,000	,991
DM	615,307	1	615,307	1,106	,297
Cholest	143,669	1	143,669	,258	,613
Group	5843,803	1	5843,803	10,508	,002
Error	35035,781	63	556,124		
Total	1576596,000	72			
Corrected Total	58152,444	71			

a. R Squared = ,398 (Adjusted R Squared = ,321)

Univariate Analysis of Variance

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Tests of Between-Subjects Effects

Dependent Variable: SBP_2

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	17041,073[a]	8	2130,134	5,438	,000
Intercept	17700,805	1	17700,805	45,187	,000
Age	,890	1	,890	,002	,962
Educ	2148,667	1	2148,667	5,485	,022
Martal_s	530,298	1	530,298	1,354	,249
Cardio	1173,822	1	1173,822	2,997	,088
Cancer	464,694	1	464,694	1,186	,280
DM	190,216	1	190,216	,486	,488
Cholest	24,680	1	24,680	,063	,803
Group	1600,643	1	1600,643	4,086	,047
Error	24678,705	63	391,725		
Total	1454040,000	72			
Corrected Total	41719,778	71			

a. R Squared = ,408 (Adjusted R Squared = ,333)

Means

Case Processing Summary

	Cases					
	Included		Excluded		Total	
	N	Percent	N	Percent	N	Percent
SBP_1 * Group	72	100,0%	0	,0%	72	100,0%
SBP_2 * Group	72	100,0%	0	,0%	72	100,0%

Report

Group		SBP_1	SBP_2
,00	Mean	137,3056	145,9444
	N	36	36
	Std. Deviation	24,02120	25,51408
1,00	Mean	153,1389	134,1667
	N	36	36
	Std. Deviation	30,91200	21,67223
Total	Mean	145,2222	140,0556
	N	72	72
	Std. Deviation	28,61902	24,24051

Annex M

Output: Effects of group x time on Diastolic Blood Pressure in the Emergency Room

Output: Effects of group x time on Diastolic Blood Pressure in the Emergency Room

```
GLM
  DBP_1 DBP_2 BY Group  WITH Age Sex Educ Cardio
  /WSFACTOR = factor1 2 Polynomial
  /METHOD = SSTYPE(3)
  /PLOT = PROFILE( Group*factor1 )
  /CRITERIA = ALPHA(.05)
  /WSDESIGN = factor1
  /DESIGN = Age Sex Educ Cardio Group .
```

General Linear Model

Within-Subjects Factors

Measure: MEASURE_1

factor1	Dependent Variable
1	DBP_1
2	DBP_2

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Multivariate Tests [b]

Effect		Value	F	Hypothesis df	Error df	Sig.
factor1	Pillai's Trace	,021	1,412[a]	1,000	66,000	,239
	Wilks' Lambda	,979	1,412[a]	1,000	66,000	,239
	Hotelling's Trace	,021	1,412[a]	1,000	66,000	,239
	Roy's Largest Root	,021	1,412[a]	1,000	66,000	,239
factor1 * Age	Pillai's Trace	,018	1,195[a]	1,000	66,000	,278
	Wilks' Lambda	,982	1,195[a]	1,000	66,000	,278
	Hotelling's Trace	,018	1,195[a]	1,000	66,000	,278
	Roy's Largest Root	,018	1,195[a]	1,000	66,000	,278
factor1 * Sex	Pillai's Trace	,004	,282[a]	1,000	66,000	,597
	Wilks' Lambda	,996	,282[a]	1,000	66,000	,597
	Hotelling's Trace	,004	,282[a]	1,000	66,000	,597
	Roy's Largest Root	,004	,282[a]	1,000	66,000	,597
factor1 * Educ	Pillai's Trace	,003	,193[a]	1,000	66,000	,662
	Wilks' Lambda	,997	,193[a]	1,000	66,000	,662
	Hotelling's Trace	,003	,193[a]	1,000	66,000	,662
	Roy's Largest Root	,003	,193[a]	1,000	66,000	,662
factor1 * Cardio	Pillai's Trace	,017	1,157[a]	1,000	66,000	,286
	Wilks' Lambda	,983	1,157[a]	1,000	66,000	,286
	Hotelling's Trace	,018	1,157[a]	1,000	66,000	,286
	Roy's Largest Root	,018	1,157[a]	1,000	66,000	,286
factor1 * Group	Pillai's Trace	,278	25,417[a]	1,000	66,000	,000
	Wilks' Lambda	,722	25,417[a]	1,000	66,000	,000
	Hotelling's Trace	,385	25,417[a]	1,000	66,000	,000
	Roy's Largest Root	,385	25,417[a]	1,000	66,000	,000

a. Exact statistic

b. Design: Intercept+Age+Sex+Educ+Cardio+Group
Within Subjects Design: factor1

Mauchly's Test of Sphericity[b]

Measure: MEASURE_1

Within Subjects Effect	Mauchly's W	Approx. Chi-Square	df	Sig.	Epsilon[a]		
					Greenhouse-Geisser	Huynh-Feldt	Lower-bound
factor1	1,000	,000	0	.	1,000	1,000	1,000

Tests the null hypothesis that the error covariance matrix of the orthonormalized transformed dependent variables is proportional to an identity matrix.

a. May be used to adjust the degrees of freedom for the averaged tests of significance. Corrected tests are displayed in the Tests of Within-Subjects Effects table.

b.
Design: Intercept+Age+Sex+Educ+Cardio+Group
Within Subjects Design: factor1

Tests of Within-Subjects Effects

Measure: MEASURE_1

Source		Type III Sum of Squares	df	Mean Square	F	Sig.
factor1	Sphericity Assumed	83,918	1	83,918	1,412	,239
	Greenhouse-Geisser	83,918	1,000	83,918	1,412	,239
	Huynh-Feldt	83,918	1,000	83,918	1,412	,239
	Lower-bound	83,918	1,000	83,918	1,412	,239
factor1 * Age	Sphericity Assumed	71,029	1	71,029	1,195	,278
	Greenhouse-Geisser	71,029	1,000	71,029	1,195	,278
	Huynh-Feldt	71,029	1,000	71,029	1,195	,278
	Lower-bound	71,029	1,000	71,029	1,195	,278
factor1 * Sex	Sphericity Assumed	16,735	1	16,735	,282	,597
	Greenhouse-Geisser	16,735	1,000	16,735	,282	,597
	Huynh-Feldt	16,735	1,000	16,735	,282	,597
	Lower-bound	16,735	1,000	16,735	,282	,597
factor1 * Educ	Sphericity Assumed	11,477	1	11,477	,193	,662
	Greenhouse-Geisser	11,477	1,000	11,477	,193	,662
	Huynh-Feldt	11,477	1,000	11,477	,193	,662
	Lower-bound	11,477	1,000	11,477	,193	,662
factor1 * Cardio	Sphericity Assumed	68,760	1	68,760	1,157	,286
	Greenhouse-Geisser	68,760	1,000	68,760	1,157	,286
	Huynh-Feldt	68,760	1,000	68,760	1,157	,286
	Lower-bound	68,760	1,000	68,760	1,157	,286
factor1 * Group	Sphericity Assumed	1510,562	1	1510,562	25,417	,000
	Greenhouse-Geisser	1510,562	1,000	1510,562	25,417	,000
	Huynh-Feldt	1510,562	1,000	1510,562	25,417	,000
	Lower-bound	1510,562	1,000	1510,562	25,417	,000
Error(factor1)	Sphericity Assumed	3922,469	66	59,431		
	Greenhouse-Geisser	3922,469	66,000	59,431		
	Huynh-Feldt	3922,469	66,000	59,431		
	Lower-bound	3922,469	66,000	59,431		

Tests of Within-Subjects Contrasts

Measure: MEASURE_1

Source	factor1	Type III Sum of Squares	df	Mean Square	F	Sig.
factor1	Linear	83,918	1	83,918	1,412	,239
factor1 * Age	Linear	71,029	1	71,029	1,195	,278
factor1 * Sex	Linear	16,735	1	16,735	,282	,597
factor1 * Educ	Linear	11,477	1	11,477	,193	,662
factor1 * Cardio	Linear	68,760	1	68,760	1,157	,286
factor1 * Group	Linear	1510,562	1	1510,562	25,417	,000
Error(factor1)	Linear	3922,469	66	59,431		

Tests of Between-Subjects Effects

Measure: MEASURE_1

Transformed Variable: Average

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Intercept	13806,030	1	13806,030	55,166	,000
Age	36,867	1	36,867	,147	,702
Sex	1199,625	1	1199,625	4,793	,032
Educ	841,931	1	841,931	3,364	,071
Cardio	166,677	1	166,677	,666	,417
Group	79,447	1	79,447	,317	,575
Error	16517,286	66	250,262		

Univariate Analysis of Variance

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Tests of Between-Subjects Effects

Dependent Variable: DBP_1

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	3033,140[a]	5	606,628	3,999	,003
Intercept	8021,346	1	8021,346	52,874	,000
Age	105,121	1	105,121	,693	,408
Educ	525,006	1	525,006	3,461	,067
Cardio	224,774	1	224,774	1,482	,228
Sex	466,492	1	466,492	3,075	,084
Group	1141,428	1	1141,428	7,524	,008
Error	10012,735	66	151,708		
Total	467627,000	72			
Corrected Total	13045,875	71			

a. R Squared = ,232 (Adjusted R Squared = ,174)

Univariate Analysis of Variance

Between-Subjects Factors

		N
Group	,00	36
	1,00	36

Tests of Between-Subjects Effects

Dependent Variable: DBP_2

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	2196,092[a]	5	439,218	2,780	,024
Intercept	5868,602	1	5868,602	37,147	,000
Age	2,775	1	2,775	,018	,895
Educ	328,403	1	328,403	2,079	,154
Cardio	10,664	1	10,664	,067	,796
Sex	749,867	1	749,867	4,746	,033
Group	448,580	1	448,580	2,839	,097
Error	10427,019	66	157,985		
Total	416424,000	72			
Corrected Total	12623,111	71			

a. R Squared = ,174 (Adjusted R Squared = ,111)

Means

Case Processing Summary

	Cases					
	Included		Excluded		Total	
	N	Percent	N	Percent	N	Percent
DBP_1 * Group	72	100,0%	0	,0%	72	100,0%
DBP_2 * Group	72	100,0%	0	,0%	72	100,0%

Report

Group		DBP_1	DBP_2
,00	Mean	74,7222	77,1389
	N	36	36
	Std. Deviation	13,00024	13,93075
1,00	Mean	84,1944	72,6389
	N	36	36
	Std. Deviation	12,55347	12,49721
Total	Mean	79,4583	74,8889
	N	72	72
	Std. Deviation	13,55525	13,33380