

PERSONALITY CHARACTERISTICS OF INDIVIDUALS WITH CHRONIC RHEUMATOID ARTHRITIS¹

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Summary.—MMPI profiles of 22 chronic arthritic patients were compared to 22 control pain (nonorganic) patients. While elevations were noted in the *HS*, *D*, and *Hy* scales for the rheumatoid patients, the over-all profiles differed from controls on the *PA* scale.

The abnormal personality characteristics of arthritic individuals, most frequently being depression, has been previously reported (Achterberg, 1982; Anderson, Bradley, Young, McDaniel, & Wise, 1985; Bradley, 1985; Mildofsky & Rothman, 1970; Moss & Solomon, 1970; Polley, Swenson, & Steinhilber, 1970; Udelman & Udelman, 1981; Ward, 1971). In these studies, however, subjects were derived from the entire arthritic population with disregard for chronicity of the disease as well as for control groups. Relatively little is known regarding maladaptive personality traits of individuals with chronic arthritis. In this study, personality characteristics of chronic rheumatoid arthritics referred to a university-affiliated arthritis center were documented. Rheumatoid arthritis is the most devastating and crippling form of arthritis, a disease that attacks a large number of people and affects joints and connective tissue. The early form of this type of arthritis is marked by inflammation of the tissues associated with the skeletal structure while the later stages are marked by consolidation of joints and chronic pain.

METHOD

Twenty-two arthritic individuals consecutively referred for psychological evaluation to the Northeast Florida Arthritis and Connective Tissue Disease Treatment Center (University Hospital, Jacksonville, Florida) volunteered for the study. These individuals had been diagnosed as having arthritis but the type or chronicity of arthritis as well as treatment regimen had not been determined by the referring physician. It was the purpose of the Center to provide the referring physician with a more specific diagnosis as well as treatment recommendations. Individuals were diagnosed as having rheumatoid arthritis for a minimum of five years and so were considered chronic rheumatoid cases. Approximately 50% of the clients were seen on an outpatient

¹A preliminary version of this study was presented at the 31st annual meeting of Southeastern Psychological Association in Atlanta, Georgia on March 28, 1985. Complete medical records were not available, making it impossible to apply American Rheumatoid Association standards. Requests for reprints should be addressed to Antonio E. Puente, Department of Psychology, UNC-Wilmington, Wilmington, North Carolina 28403-3297.

basis during the five days of intensive evaluation. The sample consisted of 11 men and women of mean age 54.1 yr. and 57.6 yr., respectively. All had completed a minimum of an eighth grade education with an average of slightly less than 12 years of schooling. Of the 22, about 14 were married and 20 were unemployed. During the third day of evaluation, volunteers were interviewed by a doctorate level, licensed psychologist and were instructed to complete Form R of the Minnesota Multiphasic Personality Inventory (Hathaway & McKinley, 1948). Subjects were debriefed, regarding their performance on the last day of evaluation.

A control group of 22 medical pain patients (11 of each sex; *M* ages of men = 45.1 yr. and of women = 48.6 yr.) were also included. These individuals were referred by a board-certified neurologist to a licensed, doctoral level psychologist for outpatient evaluation of pain behavior. Each patient had been diagnosed as having "minor" trauma to spinal vertebrae (mostly cervical) using neuroradiologic technique (e.g., myelogram) completed by a board-certified orthopedic surgeon and the neurologist. No evidence of arthritic changes were observed in any of these patients. Average educational attainment of all participants in this group was slightly lower than 12 years, with all having completed at least the eighth grade. Of this group, 14 were married and 19 were unemployed. Educational attainment, marital status, and employment status were similar between groups while a statistically significant difference ($F_{1,35} = 6.21, p \leq .025$) of nine years in age between groups was noted. MMPIs were individually administered on an outpatient basis within two weeks of initial referral.

RESULTS AND DISCUSSION

Means and standard deviations for each MMPI scale across the four groups (arthritic men and women; control men and women) are shown in Table 1. Two \times two (group \times sex) analyses of variance were performed on each of the scales with an alpha level of .004 adopted based on the Bonferroni correction. Of the 13 analyses completed no group differences were noted.

Although these results are constrained by the limited number of participants and the lack of a control group containing less chronic cases or different types of arthritis, the findings warrant attention in that they provide information regarding the personality of individuals with chronic arthritis as compared to cervical pain patients.

The present findings suggest that a unique personality profile may not be feasible for chronic arthritic patients. According to Spergel, Ehrlich, and Glass (1978) self-report of psychological distress is common to any chronic, disabling disease so a true "rheumatoid arthritic personality may not be feasible. These results also support the findings of Mason, Weener, Gertman, and Meehan (1983) who reported that scores on personality measures for rheumatoid

TABLE 1
MMPI MEANS AND STANDARD DEVIATIONS ACROSS GROUPS

Group	MMPI Scales												
	L	F	K	HSK	D	Hy	PTK	PDK	MF	PA	SCK	MAK	Si
Control, <i>n</i> = 22													
Men	53.91	62.91	52.91	86.55	77.27	78.18	68.00	70.45	62.91	63.73	71.36	59.36	50.91
SD	9.45	15.55	9.77	18.01	18.52	14.61	12.38	23.36	7.45	11.30	18.39	12.66	13.97
Women	58.18	54.82	55.73	75.91	71.00	72.91	61.64	57.36	57.55	57.09	64.82	53.09	61.00
SD	8.54	7.10	10.24	15.06	15.63	13.69	7.55	8.41	10.16	10.38	10.93	12.66	8.96
Arthritis, <i>n</i> = 22													
Men	52.64	52.82	59.45	77.09	75.00	73.91	63.18	61.27	61.45	52.45	61.36	52.00	53.55
SD	5.30	7.36	9.71	10.90	19.48	13.62	13.08	14.74	16.48	7.33	16.48	11.59	10.96
Women	56.36	54.73	54.36	66.18	68.73	71.64	56.82	57.91	56.09	55.73	55.91	49.09	55.18
SD	6.34	6.92	12.47	11.33	10.57	10.23	12.00	14.79	9.90	11.45	14.86	8.64	10.45

arthritis cannot be distinguished from those of individuals with other chronic physical illnesses. Nevertheless, further investigations need to be undertaken with larger samples and other control groups (e.g., for levels of disability) to determine whether acute as well as varying forms of arthritis which affect the skeletal structure less severely, also produce the patterns noted in this study.

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