

# Programme to Improve Psychological and Social adjustment among Hepatitis C Patients

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## Abstract

The study to determine the effectiveness of the program Behavioural improve the level of Environmental Compliance for a sample of patients with viral hepatitis (C) due to the risk of hepatitis where liver injury affects all organs of the human body according to the carried out by the liver from a huge amount of jobs and involvement with members of the other for the success of its functions and reached a sample study (30) patients were divided into two groups (15) patients represent a sample pilot was selected to deliberate to ensure the availability of the conditions selected sample them and reluctant to National Institute of the liver to address the drug interferon was their consent to participate in the program of cognitive behavioral through interdependence between sessions mixing cognitive behavioral, which included the definition of injury and protective factors, treatment and use the mechanisms of treatment is cognitive to confront ideas and beliefs of patients negative associated with the future of the injury and the use of a method to relax and follow the approach of rational thinking and immunization against the pressure and the expression of feelings of patients to confirm the capacity of patients to cope and accept to continue the plan therapeutic approved by the doctors To determine the effectiveness of the program applied to and included the study sample control group compared to strong (15) patients subject to take a drug interferon only and use a researcher with the study tools included a measure of Environmental Compliance of the design of the researcher to assess the level of psychological adjustment and social development for patients in the two samples experimental and control groups before and after application of the program and to determine the effectiveness of the program to sample experimental and comparison of results Sample control The results of the study that there are significant differences in favor of measurement post test in the sample experimental subject for the program Cognitive Behavioral with continued eating interferon as a treatment chemical compared to sample the control subject to take a drug interferon as a treatment chemical only in the level of psychological adjustment and social, which refers the effectiveness of the program in improving the compatibility level of viral hepatitis patients (C).

## Introduction

The injury of the individual one of the diseases, organic chronic pressures that cause psychological problems for the individual and disturbances in behavior and the situation is bad with the length of treatment with medicines and drugs and the problem is not in the incidence of the disease, but in the problems of injury, where the relationship exchange between disease and psychological problems and that the direction of the victim and his feelings and ideas about illness and injury and the future of image formed by himself and his relationship to others and his hopes and fears affect the receptivity of treatment [1].

It is widely between patients one of the infectious diseases fears of illness transmission to family members during the meal or the use of certain tools, such fears are based on some of the ideas and beliefs, irrational and these ideas lead to the isolation of the patient to interact with members of his family in order from the health of his family and not being subjected to a similar injury may lead these beliefs to power to end family life, separation and distance from the rest of the family members and when the disease is chronic, the adjustment with the disease more difficult and becomes a depression is linked with the loss of user to do his job, and warp the image that have the individual from the body and he has to give up to do to its activities and give up its independence and its self-sufficiency [2].

The incidence of liver disease from the most dangerous hopeless diseases of healing where the World Health Organization points to the deaths of more than a million people a year because of hepatitis and of injury to children from birth to age (15) years about 4000 cases per year through the mother is hepatitis virus and the child is born holder of the disease and grow up injured. In Egypt, according to the WHO report the number of injured reached 10 million Egyptian about 12% of the population are infected (C) [3]. The increased ratio during the period from 2000 to 2011 to reach 16.8% and expected the death of five million patients during the next ten years as a result of disease progression and liver cancer and liver failure and, despite awareness of sources of infection conventional because of the injection and take reserves, but the problem remains Egyptians face the risk of infection because of neglect in hospitals through the negligence of sterilization of surgical

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instruments during blood transfusion and the number of Egyptians at risk of liver disease is likely to increase and the schistosomiasis reason for the spread of hepatitis viral settler has been injection therapy for many years only for the treatment of schistosomiasis, which helped the transmission of hepatitis and is currently still low awareness of the causes of transmission virus infection (C) the cause of its spread as well as the traditional customs of tattooing and the use of medical equipment the bearer of the virus helps to move during purification and during surgical operations and handle non-security with blood components or the use of tools patient as teeth brush of razors [4].

The viral hepatitis (C) of the most dangerous diseases of the liver and start to get cirrhosis of the liver and liver failure if neglected treatment and lives of the individual patient pressures viral hepatitis (C) barred from practicing the activities of normal life for the lack of liver ability to perform its functions and emotion of the individual wound down its response to the resistance and the clear appearance of symptoms of fear and anxiety as well as some compatibility problems of social, psychological and vocational education for people living with and suffering patients with viral hepatitis (C) of the symptoms of depression and mood disorder and the general behavior as a side effect of the drug interferon - alpha or ribavirin for their effects on the central nervous system due to increased secretion of cytokine leading to the symptoms of depression are more two properties common forms proved their effectiveness in the face of virus activity during the period and in the age of 40 years to 50 years for patients [5,6].

### Psychological and cognitive symptoms of patients

A decrease in self-esteem to changes physical negative include pain area abdominal distention and hypertrophy of the places in the body tissues of the face and muscle pain, indigestion and affected the process of vision and feeling symptoms of fatigue year, and fatigue and a tendency to vomiting, dizziness, changes in appetite, difficulty in thinking and memory disorders of the functions of cognitive [7,8].

Ease of arousal and the speed of change the emotional state of patients for the spread of feelings of despair and lack of hope in the possibility of treatment and the difficulty of obtaining it, as well as sleep disorders, which impedes agree the patient with the reality of social and fear of the patient from infection around him impose on the patient process of isolation from his family, his community and also his sense of guilt for the affected his family wound and increases the burden of those negative feelings to the patient look and trends in society and beliefs about the type of injury the patient, which sometimes appears in the escape from the interaction with others and sometimes the appearance of some feelings of disgust toward the use of certain personal items of the patient and to address the mental disorders associated with degradation agree the patient and the isolation is to resort to treat cognitive to alleviate the grief and psychological pain by correcting misconceptions and assumptions of self-help [9-11].

Patients to identify these ideas irrational and change the ideas of rationality through the foresight and the interpretation of the patients and the therapy is cognitive behavioral tool to correct mental imaginations and reasoning associated with the development of injury and the future of the patient to help him vent about the problems emotional and behavioral adjustment with symptoms of infection

through the use of the mechanisms of cognitive and behavioral processes relax to get rid of tensions, physical and ideas pessimistic and feeling tired and change awareness and understanding of the patient in a realistic manner based on scientific evidence to change his view to hit him in order to comply with and exercise moderately asylum for treatment of religious to help patients to accept it now, which confirms the effectiveness of cognitive therapy in the management of response of patients to cope with the spread of the virus through patient awareness of transmission factors and support the patient to continue treatment and accept the psychological symptoms and physical disorders associated with drug taking at the start of interferon therapy as a period of temporary [12].

The question becomes for the pivotal study of the extent to which the program affects cognitive behavioral Think on psychological and social compatibility of the patient and helps the patient to accept treatment and response to reduce physical disorders.

### Importance of theory

Clear to the enrichment of the theory on the identification of environmental and psychological factors that help the spread of viral hepatitis (C) and factors help to resist injury. And identify the difficulties faced by patients and the problems that hinder their agreement.

The importance of this study to the scarcity of studies that verify the effectiveness of cognitive therapy in improving the level of compliance for patients with viral hepatitis (C).

### Practical importance

Cognitive therapy program is designed to reduce symptoms of anxiety, depression and cognitive distorted associated with the disease and work to change to improve the level of compatibility among a sample study and face the consequences of injury.

Experimental verification of the effectiveness of cognitive-behavioral program to improve the level of psychological and social compatibility of a sample of patients. Alleviate the pressures associated with injury to these diseases.

Shed light on a sample of patients with hepatitis to improve the level of their agreement through knowledge of their problems of health, social, psychological and help them accept themselves and the current status and acceptance of treatment during the advanced stages of infection.

Possibility of using these programs and modification tool for use in the face of compatibility issues hopeless patients from recovery to guide and direct patients and their families by providing them with skills and knowledge and behavioral methods to help them comply with injury.

### Objectives of the study

1. Study of cognitive and emotional problems and behavioral faced by patients with (C) and equip them with skills and techniques to face the pressures associated with injury.
2. Preparation of a program of cognitive-behavioral treatment for a number of patients with (C).

3. Determination of the effectiveness of cognitive behavioral therapy in the face of compatibility problems for patients with viral hepatitis (C).

Application program on a sample of patients with virus (C) and measuring pre and post them and use another sample compared to the homogeneous patients virus (C) subject to the treatment of chemical just was not subject to the program of knowledge as control and to apply the same measure them pre and post test.

### Hypotheses of the study

1. There are significant differences statistically between the two samples of patients with viral hepatitis (C) subject to the treatment of chemical (interferon) as control and patients with viral hepatitis (C) subject to the program of cognitive behavioral and Chemists (interferon) as a group test for the experimental group on the steps of a measure of psychological adjustment and the social side and the measure of cognitive and behavioral and emotional.
2. There are statistically significant differences between the experimental group of patients with viral hepatitis (C) subjected to chemical treatment (interferon) and cognitive behavioral program for grades measure of psychological adjustment and social before and after the program intervention.

**Concepts of the study:** The concept of viral hepatitis (C) hepatitis due to infection through blood contaminated with infection (C).

**Concept of effectiveness:** Differences between the function scores statistically measure of environmental compatibility and the measure of the cognitive behavioral and emotional, before the application of cognitive-behavioral program for patients with hepatitis Virus (C) and after the application.

**The concept of the program of cognitive behavioral:** Professional activity planned exercises to help patients with hepatitis viral (C) in order to alleviate the pressures associated with the injury through the correct content of ideas and beliefs, irrational and modify negative thoughts and refuted as factors causing the disorder and psychological maladjustment, taking into account the nature of each patient and conditions social, health, economic and using the methods of treatment, individual and collective strategies of persuasion and modify ideas, trends and techniques irrationality of self-control and self-monitoring and duties of Household with some professionals and behavioral improvement against the pressure.

**Mechanisms of the concept of adaptation:** The case of mismatch between the patient and itself and between the patient and the environment surrounding it and include the patient's ability to modify his behavior and ideas if they encountered a problem provided that the amendment together.

**The concept of psychological adjustment:** A group of operations performed by the patient in response to deal with the pressures of life caused by infection with C, which indicated the extent of adequacy of personal and accepted the same and his outlook on life and being free of symptoms of neurotic and his desire to isolation and the persistence of emotional when dealing with events and ideas associated with the events of his life and the future of his injuries.

**The concept of social compatibility:** The ability of the patient to establish positive relations and friendly atmosphere and the enjoyment of calm and stability within the family and the area of currency and the extent of liberation from a sense of alienation and acceptance of his residence.

### The Methodology

Current study is based on the use of experimental method is the best curriculum in scientific research to study the effect of cognitive behavioral program as an independent variable on the group of patients with virus (C). By measuring the psychological and social adjustment among a among a sample of patients before implementing the program of cognitive behavioral variable experimental and measurement post test of the level of compatibility psychosocial dependent variable after the end of the meetings of the program and compare the significant differences between the measurement pre and post test to determine the effectiveness of the program, and advantages of this approach is the use of groups equal of patients.

### Place of Study

National Institute of Liver in Cairo and for the following reasons:

1. Large numbers of patients with hepatitis visitors to the Institute and the possibility of selection of patients who meet the conditions of the study.
2. Followed patients hesitant to institute long-term treatment and this fits the pilot study.
3. Approval of the Institute to conduct the study institute.

### The study sample

Been applied tools of the study on a sample test strength (15) patients from patients with viral hepatitis (C) of both sexes who are receiving chemotherapy from the National Institute of Liver and resistance to endemic diseases were chosen way intentional and re-apply the tools of the study and compared to the same sample after commitment hearings therapeutic program Cognitive behavioral treatment adherence chemical drug interferon with psychiatric treatment through therapy sessions and meetings in the measurement post test to be applied tools of the study on the gender of age (34-50) years and compare the results of the application given other control homogeneous reached (15) a patient undergoing treatment chemical only are not subject to the program of cognitive behavioral and required in the two samples do not receive any psychiatric treatment or taking antidepressants and the subordination of the two samples to test-PCR ELISA-in period of 1 / 2/2013 to 1/6/2013 were conducted homogenizing in terms of age, gender, socioeconomic status and the degree of injury.

### Method of sample selection

#### Inclusion criteria

1. Not less than 34 years of age and not more than 50 years to ensure that patients in different social roles imposed by the nature of the age group to clarify the effect of the virus to various areas of compatibility of the patient.

2. Number of children ranging from two to six individuals.
3. Ranging from primary case learning phase of the university to easily respond to a questionnaire.
4. Before the discovery of infection (C) two years.
5. Virus-free patients (C) injury of any other chronic diseases.
6. Do not members of the sample received any psychiatric treatment

**Study tools**

Design scale environmental compatibility for patients with viral hepatitis (C) by measuring the level of psychological adjustment and social status of patients.

Program is designed cognitive behavior includes the use of some methods of emptying the emotional and the use of cognitive-behavioral therapy during several sessions lasted four months and other methods of treatment through a number of lectures on proper nutrition for the inevitably unsatisfactory, and for the judiciary and destiny and resist the grief and feeling of happiness and rely on methods relax and rational thinking and mechanisms of cognitive behavioral therapy and self-assertion and immunization against pressure and adjust the face negative concepts and treatment of religious and spiritual guide to give patients cognitive-behavioral therapy for patients with viral hepatitis (C). Design a questionnaire for the cognitive and emotional and behavioral patients.

**Reliability**

The tools of the study expressed a sincere, if the contents and activities and actions that seek to measure and the sincerity of content means that the instruments measure what has been prepared to measure and include the clauses and the quality is sufficient to cover all aspects of what is intended to measure. And to verify the validity of the study tools were displayed in the image of the initial set of arbitrators from the disciplines of psychology, medicine, meeting and strong (9) arbitrators to determine the suitability of these tools for the study and give advice on how to approve the entire contents of the tools and what they see from delete or correct the statements or content that requires it. And has been modified by the phrases was no agreement on the need to modify and also add words that the arbitrator saw her more closely related to the study and is not mentioned, as has been deleted phrases that did not achieve 80% of the agreement by the arbitrators. And has been in the light of the above writing tools in the study finalized. And the stability of the scale was calculated in a manner re-test and the test interval between the first application and the second (15) days by the number (15) of patients and therefore outside the framework of the study sample and reliability coefficient was calculated by the correlation coefficient between the degree of measurement and tribal post test, as well as the significance level, Wu said there is a correlation is very strong and statistically significant.

**Training Program and may be included on the program**

**Pre test:** And that training on the use of various scales and this phase lasted four sessions since training on standards of knowledge and take a long time to understand and apply.

**The activities of the program:** The program took a period of two months at two sessions per week, for one hours to every session. And has been hierarchy of concepts and skills in a logical order. And each patient had the opportunity to express his feelings and his thoughts and beliefs about the disease. And patients were trained to discuss ideas and modify them. And included sessions for participants on the definition of Cognitive Behavioural therapy and relaxation training and self-observation and solve problems and were also the development of communication skills and rational thinking, as well as the expression of feelings. And included some sessions how to face wrong believes and immunization against pressure.

**Post test:** That the application of measurement and post test to measure the differences between tribal and post test measurement after the end of the program and monitor the changes resulting from the application of the program and compared to the emotional and cognitive status before and after the completion of the program.

**Limitation of the Study**

1. Patients resistant to therapy sessions for not convinced of its importance and not interest him, especially in the advanced stages of infection.
2. Duration of meetings link strongly to the injury and the degree of depression and convinced the patient’s disease as the end.
3. Focus on the impact of the disease the patient and aware.
4. Not the possibility of assembling consultants and specialists in religious side and some patients Daik time.
5. Large numbers of patients attending the Institute led to the difficulty refer to medical records for patients.

**The Results of the Study - (Tables 1-5).**

**Table 1:** The differences between the control group and the experimental group on the psychological adjustment scale.

psychological adjustment scale	control group		experimental group		t	p
	Mean	SD	Mean	SD		
Reliability	14.97	3.37	9.73	2.37	8.80	0.00
Support of Self	15.73	3.18	19	3.43	3.82	0.00
Sufficiently personal	19	2.80	21.83	2.26	4.30	0.00
Outlook of life	21.87	2.03	27.83	1.74	12.2	0.00
Neurotic symptoms	43.73	5.27	23.30	3.43	15.02	0.00
Emotional responsiveness	7.73	0.86	8.5	1.04	3.09	0.1
Emotional stability	9.60	1.73	14.60	2.73	8.45	0.00

**Table 2:** Differences between the experimental group (before - after) on the psychological adjustment scale.

psychological adjustment scale	Before	After
Reliability	14.93	9.73
Self-supporting	17.27	19
Personal Efficiency	18.43	21.83
Outlook on life	22.8	27.83
Symptoms of Empirical	43.73	23.3
Emotional response	7.5	8.5
Emotional stability	8.57	14.6



**Table 3:** The differences between the control group and the experimental group on the social scale compatibility.

Social dimensions of compatibility	control group		experimental group		t	p
	Mean	SD	Mean	SD		
The ability to establish relationships	19.47	2.40	26.40	2.92	10.04	0.00
Family harmony	27.67	3.33	28.40	2.26	0.996	0.324
Alienation	13.60	3.21	10.17	1.53	11.22	0.00
Residential compatibility	19.37	3.11	27.47	3.03	10.62	0.00

**Table 4:** Differences between the experimental group (before - after) on the social scale compatibility.

	Before	After
The ability to establish relationships	19.83	26.4
family relationships	28.13	28.4
alienation	20.9	10.17
residential compatibility	19.37	27.47

**Table 5:** The differences between the control group and the experimental group on the cognitive and emotional and behavioral scale.

scale	control group		experimental group		t	p
	Mean	SD	Mean	SD		
Cognitive dimension	113.80	14.69	159.23	17.126	11.02	0.00
Emotional dimension	79.20	19.14	133.47	7.81	14.37	0.00
Behavioral dimension	98.53	7.96	101.87	7.45	1.673	0.01

### Discussion and Interpretation of Results

Affect the incidence of hepatitis viral (C) on the quality of life, where lead to social problems and cause a negative effect on the activity of the patient and his emotional [13]. And is considered the injury of viral hepatitis (C) of more health problems prevalent where the number of people infected 170 million patient in the world. [14] and despite the availability of treatment drug interferon alpha - symptoms as both side effects to address the drug interferon - alpha or ribavirin and impact positive in the face of activity of the virus do not they cause symptoms of mental users of treatment such as depression and mood disorder and the general behavior and as a result of increased cytokine secretion leading to the symptoms of depression [15].

And defines the program as a plan of action designed and organized in the light of the scientific basis to provide psychological direct and indirect services in order to achieve the objectives of psychology developmental and preventive and curative and software used in the psychological field is committed to the foundations of psychology and seeks to achieve its objectives and we can say that the program is one means by which services that provide psychological help and maybe it means more accurate and specific psychological and flexibility [16].

And results showed the presence of statistically significant differences measurable post test between control group and experimental group the direction of the experimental group on a scale of psychological adjustment and returns this result to enhance the possibilities for patients in the experimental result of the expression

of negative feelings such as anger, anxiety, and encourage patients to satisfy themselves and trust in their abilities and free from feelings of deficiency and inferiority and to help patients on the output of negative charges and the transfer of negative feelings to the words of frank and promote the exchange of feelings of love and understanding to family members and strengthen the religious faith and patience on the trials and seek forgiveness and go to God to raise the level of psychological adjustment for patients through attendance at meetings and the changing structure of cognitive agent-related transmission of infection through the transfer only blood and its components and re-realism to the size of injury, according to scientific evidence which improves the patient to look the same sense of worth.

The results showed the presence of statistically significant differences between the degrees of tribal and post test measurement of the patients from the experimental group in response to measure the dimensions of psychological adjustment in favor of post test measurement. These results indicate the effectiveness of the program of cognitive behavioral in improving psychological adjustment for patients with viral hepatitis by taking advantage of the interdependence of family atmosphere of sympathy for the prisoners and accept the emotions the patient's changing response after injury and to clarify the reality of the injury the actual and take advantage of drawing closer to God and patience on the trials and reverence to pray to accept the changes after the discovery of the injury and take advantage of the possibilities available environmental to get treatment and help patients to discharge emotional and feeling comfortable and get rid of tensions cognitive and physical during the relaxation of the patients and the integration of the patient's social environment within the family and the currency and help him to identify his ideas wrong and how to confront and replaced with ideas and realistic and that the patient repeat the contest and keep the ideas negative and reassure the patient to himself through his commitment to treatment to control the activity of the spread of the virus and to stop immediately thinking pessimistic on that injury hepatitis will lead to death and think about the treatment and consistent result with the current study Naima Mohammed Kandil 1998 [17]. And because the impact of psychological treatment through reinforcement and relaxation to alleviate disorders of the disease and face depression through positive reinforcement of ideas and practice exercises to relax and rely on the promotion of the religious and the patience to improve the patient's feelings and emotions to accept it now and are also consistent with Fagerstrom1999 [18].

The improvement was due in the level of psychological adjustment for patients of the improvement in the emotional state of the impact of treatment is rational and emotional, which guaranteed the program to modify the ideas of the end of life and isolation from family and lack of hope for treatment and the replacement of those ideas, the ideas of rational responding and responding to the doctors and have the ability to confront the ideas of pessimism and take advantage of homework identify negative thoughts and discuss those ideas and imagine what is the worst of those ideas and how to address them, which had an impact in reducing emotional disorders for patients and reduce feelings of guilt towards the family.

And agrees with the study of 2009 Sockalingam & Abbey [19]. where the expression of thoughts and feelings of psychological therapist and find out the difficulties anticipated consequences of

injury and awareness of the importance of expression of the face and the use of social support and medical treatment together to address mental disorders contribute to improve the level of psychological adjustment for patients.

Shows the existence of statistically significant differences between the measurable post test control group and experimental group in the direction of the experimental group after me on a scale measuring social harmony. And due to persuade the patient to inform his work on hit him for the benefit of your treatment to work and reduce the pressures of work and to persuade him to strengthen his relations with his colleagues to work and take advantage of all assistance Environmental available to work and all medical bodies specialized to meet the injury and the exploitation of all available capacity for the management of financial resources to allow the continued adherence to treatment which reflected the impact of improved compatibility level of patients.

And agree that the result with the Zandi et al., 2005 [13]. where give the patients social skills and the opportunity for the establishment of communication skills and participation in social events within the family, work and visit neighbors improves the compatibility of the patient socially and increases self-confidence and change the direction of the patient to think of becoming infected with C in a realistic manner and the expression of feelings toward the disease and the future of the injury and how to live with them in a positive way and gain the skills of participation and homework increases the social harmony of the patients after the use of the meetings of the program and the direction of the patient virus C during the hearings to express positive emotions such as durability and appreciation of self-esteem and morale contribute to the increase the patient's ability to meet the demands of the disease away from the negative emotions that Deplete the patient's ability to meet the demands of the disease, which increases the compatibility Social patients Non-subject for treatment in the program of cognitive behavioral and direction of the patient to think positive is a strength that helps to change the reality and the compatibility with and control the response the pressures of life and not vulnerable to the negative and surrender to the injury.

It is clear from the results and there are significant differences between the degrees of tribal and post test measurement of the patients from the experimental group in response to measure the dimensions of social consensus in favor of post test measurement. Consistent with that outcome study dreams Abdul samee 2005 [20]. where the program during the sessions of cognitive behavioral overcome the problems of isolation of the patient and the lack of face insecurity and integrates the patient into the community and increases the compatibility of social.

And results indicate the existence of statistically significant differences between the post test to measure the control group and experimental group in the direction of the experimental group to measure cognitive and emotional and behavioral. The following result showed the effectiveness of cognitive behavior therapy program for patients and the resulting decline in the level of anxiety and depression for patients by teaching patients how to live with the virus and the system of treatment and prevention for others. And resort to counter the ideas of principle distorted irrationality associated with feelings of anxiety and depression and strengthen the confrontation of ideas through the use of skills, relax and use the guide for patients

with viral hepatitis to meet the knowledge and negative thoughts as well as explain the information about the disease sufficiently linked connotations scientific and explain some of the changes of physical-related injuries and the medical community that can be to benefit from its services to meet the injury and that result agrees with the study of study of Aklan 2007 [21].

And awareness of knowledge has the potential to bring about behavioral change and improve the compatibility of self and improve the quality of life in patients with virus C Zandi et al., 2005 [13] and the method of meetings, communication and expression of each patient for injury of the strongest human ties are capable of speech and verbal communication and discussions attitude learning allows patients express their ideas and feelings and try to accept this injury and this is reflected positively on their behavior to cope with symptoms consistent with Johnston 1999 [22].

Previous studies indicated that the health of the patient C virus emotional and psychological improved when the information acquired from the pressures associated with the injury of others and participate with them and recognize the injury of others. And treatment efforts focus on the following reasoning, refute negative thoughts and feelings, training, follow the instructions on the self to cope with feelings of depression and anxiety which leads to the development of the general consensus of the patient [23].

The study showed the effectiveness of cognitive behavior therapy program for patients and the resulting decline in the level of anxiety and depression for patients through enhancing the concepts of faith in God and optimism and satisfaction to affect humans and the development of injury in the normal size and dimensions of the elements of exaggeration and ideas pessimistic negative impact on poor psychological state of the patient and reduce immunity to resist the spread of the virus liver and to avoid the link between negative past experiences and current injury as well as the importance of optimism and ability to cope with the disease have a positive impact in the high morale and health of patients [23].

The rational , emotional and cognitive therapy of thinking changes in the reformation of emotion, to remove the negative feelings and then conduct turmoil behavioral basis of disorder cognitive emotional and affect backing sentimental in the face of symptoms of depression associated with the injury and where to have a role in the demand for continuing treatment and improve the mood of the patients in addition to the preparation of program for the amendment to the sons of knowledge of the patient to cope with emotional disturbance to cope with symptoms of anxiety and depression for adopting ideas distorted and negative for injury and contribute to the future in dealing with emotional turmoil for patients and this result agrees with the study of yoke Izz Al-2004 [24].

Interaction cognitive support to clarify the factors of injury and infection to others and effective treatment for patients during the meetings to show the current problems and the integration of the patient's social environment and deepen the expression of his feelings, allowing him to self-respect and their abilities and encourages him to resist the pressures of his injury as well as the impact of review of the problems of some patients health during the group sessions and give examples of some patients, compatible with the injury as role models to resort to rational thinking and behavior modification

negative Alanzha by and patience to accept the injury and to reach the state of satisfaction is being reflected its impact on positive behavior and agree that the result with the study of left Aboul-Enein 2006, 1998 [25].

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