Comparative Psychiatric Studies on Children and Adolescents Suffering from Cystic Fibrosis and Bronchial Asthma

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ABSTRACT: Patients suffering from cystic fibrosis were compared to asthmatic children and to healthy controls with regard to psychopathology and family functioning. Furthermore, the relationship of some clinical parameters to psychopathology was examined in the clinical groups. Severity of the disease proved to be the most important determinant of psychopathology, since the group of severely ill patients suffering from cystic fibrosis had an excess of marked disturbances. Within this group a significant correlation of impaired pulmonary function and psychiatric disturbance was found. There were also some indications that among asthmatic children only the severely ill patients were in danger of psychiatric disorder. The predominant type of psychiatric disturbance was an emotional disorder. The three groups displayed only few differences in terms of disturbed family functioning.

The authors have recently studied the psychopathology of children and adolescents and family functioning among groups of severely and/or chronically ill patients. Within these investigations two diseases each affecting the same organ were compared. Our first report dealt with Crohn’s Disease and ulcerative colitis and we are currently in a position to extend these studies on two other groups of diseases, namely cystic fibrosis and bronchial asthma.

Cystic fibrosis is a hereditary disease which normally manifests itself shortly after birth and is characterized by progressive tissue destruction predominantly in the pancreas and the lungs. Despite the progress which has been made in the treatment of the disease it still implies a clearly limited life perspective which does not normally extend beyond adolescence. Investigations of psychosocial adaptation in cystic fibrosis have been influenced by different strategies...
conclusions. Problems in the areas of parent-child relationship, intrapsychic conflicts and emotional disorders have been emphasized by some authors²-⁴ while others have stressed a model of normalcy rather than deviance.⁵-⁷ Since the latter studies have been primarily based on psychological testing and self-report inventories while the former mostly stem from clinical impressions and experiences, it is possible that these different methods may have contributed to the wide variety of findings. The generalizability of results from studies reported so far is further affected by the lack of accurate incidence figures for psychiatric disturbances, unknown reliability and validity of data, and most of all the lack of normal controls.

Bronchial asthma on the other hand is a disease that has attracted considerable attention from a psychosomatic point of view. It surely is a multifactorially determined condition and psychological factors may not generally be important in its causation as classical psychodynamic thinking has suggested. However, there are no doubts that emotional stress may aggravate symptoms, precede exacerbations and influence clinical course. The huge amount of research findings has been reviewed from time to time⁸-¹⁶ and will not be summarized again here.

Our own research was aimed at achieving numerous goals. Of major interest was the question as to whether the individual and family pathology of children afflicted with chronic diseases affecting similar organs differ from each other. With reference to the common process of adjustment to illness it was assumed that the psychopathological phenomena under observation would be very similar for all kinds of chronic disease.

We also assumed that the prevalence of psychic disorders would be significantly higher than among the healthy control group. Such an assumption appeared justified on the basis of epidemiological research results in the USA and Great Britain.¹⁷-¹⁸ On the other hand, we felt that it would be worthwhile to test this hypothesis as doubts have arisen as to whether chronic afflictions automatically lead to a higher rate of psychic disorders.¹⁷

**Samples**

The study was conducted on three groups involving patients with cystic fibrosis or with bronchial asthma, and a control group of healthy children (see Table 1). To be included in the sample the