



Avoidant Coping Predicts Quality of Life for Persons with Multiple Sclerosis with High Cognitive Reserve

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Background

- Multiple Sclerosis (MS) impacts various aspects of health and wellness
- People with MS (PwMS) are at greater risk for poorer quality of life (QoL) outcomes when compared to the general public¹.
- QoL has been associated with cognitive reserve and coping strategy²⁻⁵.
- The goal of the present study was to determine the impact of the interaction between cognitive reserve and coping strategy on QoL outcomes in PwMS across multiple domains.

Methods

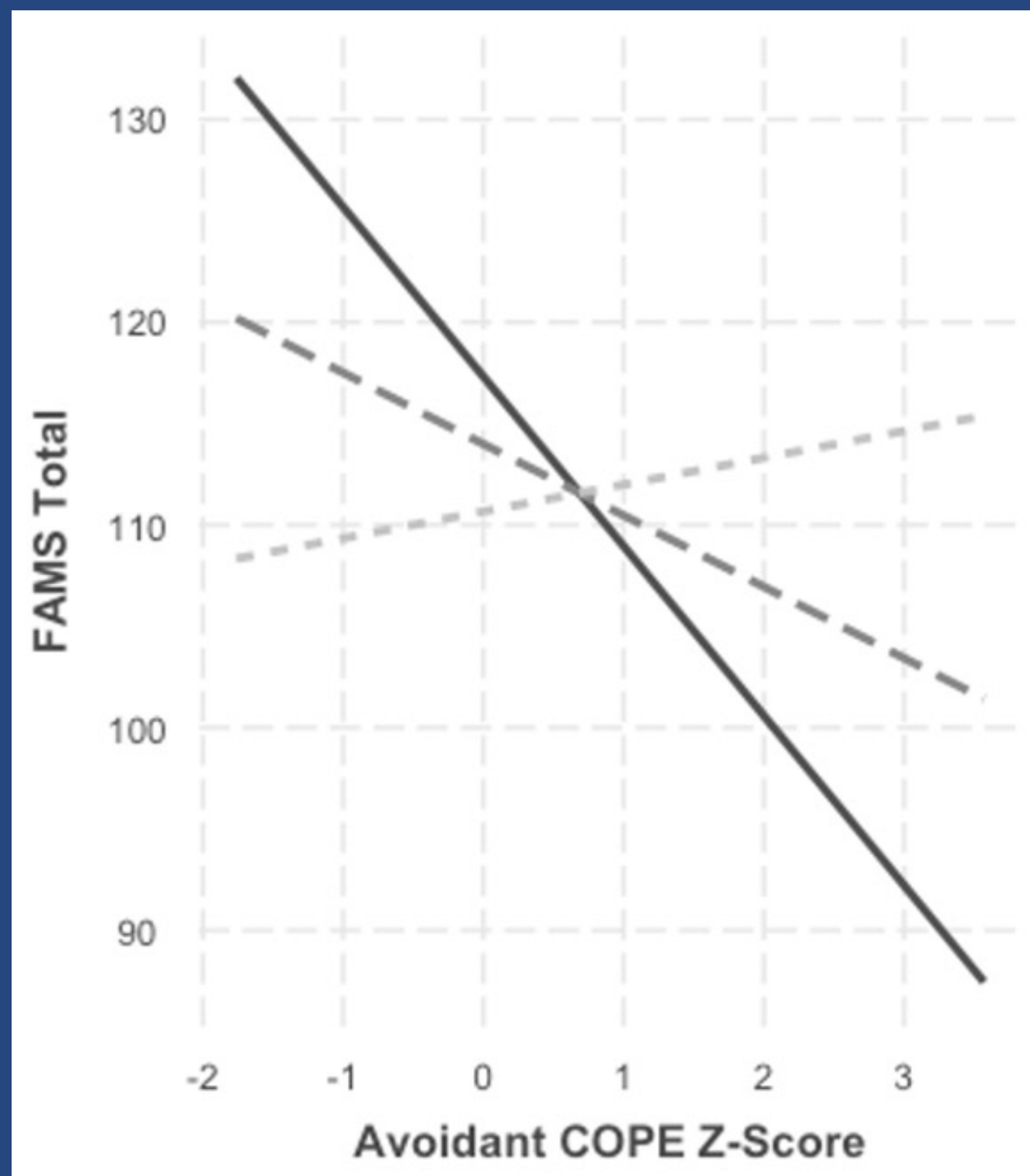
- We examined the effect of the interactions between coping style and cognitive reserve on QoL and disease burden in 97 PwMS (80 females, 17 males)
- Coping strategies, active and avoidant, were measured using the COPE inventory⁶
- We defined cognitive reserve as a composite measure that included years of education and scores on the Shipley-2 Vocabulary subtest
- QoL and disease burden were assessed using the Functional Assessment of MS (FAMS) scale and the Expanded Disability Status Scale (EDSS), respectively

Results

- For those with higher cognitive reserve, greater avoidant coping was associated with lower QoL for the thinking and fatigue subscale ($p < .001$) and poorer overall QoL ($p = .03$)
- Greater active coping was associated with poorer QoL for mobility ($p = .001$)
- However, these associations did not hold for those with lower cognitive reserve
- No associations between coping strategy and cognitive reserve with disease burden

Conclusions

- Avoidant coping, rather than active coping, is associated with poorer thinking and fatigue and overall QoL only for PwMS with greater cognitive reserve
- Similarly, greater active coping showed an association with poorer mobility scores, which may indicate that PwMS with greater cognitive reserve and greater subjective motor distress are more likely to employ active coping strategies
- Counseling PwMS on the impact of coping strategies on QoL outcomes, especially for those with greater reserve characteristics such as more years of education, may improve quality of life outcomes in this population



Left: Avoidant Coping on Total FAMS by Cognitive Reserve

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