

**UNIVERSITI TEKNOLOGI MARA**

**PSYCHOLOGICAL WELL-BEING AND HEALTH  
RELATED QUALITY OF LIFE AMONG  
PATIENTS POST MYOCARDIAL INFARCTION  
LIVING IN URBAN AREAS**

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Dissertation submitted in partial fulfilment  
of the requirements for degree of  
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## **AUTHOR DECLARATION**

I declare that the work in this dissertation was carried out in accordance with the regulations of Universiti Teknologi MARA. It is original and is the result of my own work, unless otherwise indicated or acknowledged as referenced work. This research has not been submitted to any other academic institution or non-institution for any degree or qualification.

I hereby, acknowledge that I have been supplied with Academic Rules and Regulation for Post Graduate, Universiti Teknologi MARA, regulating the conduct of my study and research.

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## ABSTRACT

Myocardial infarction is a life threatening occurs among these over 75 years old. Psychological well-being and health related quality of life is a challenge for patients post myocardial infarction. The study was conducted to identify the psychological well-being and health related quality of life among patients post myocardial infarction living in urban areas. A cross-sectional study was performed using questionnaires. Purposive sampling method was used with sample size (n=134). The results showed there was significant difference between psychological well-being with HRQoL as showed that psychological well-being was indeed associated with HRQoL [Global (p<0.001), emotional (p<0.001), physical (p<0.008) and social (p<0.002)] in post MI patients. There was significant association between demographic characteristic [family income (p<0.015), attend education program (p<0.015) and smoking status (p<0.030)] with psychological well-being. There was significant difference between demographic characteristic [age vs physical (p<0.002), age vs social (p<0.006), marital status vs global (p<0.029), marital status vs physical (p<0.025), marital status vs social (p<0.045) and occupation vs global (p<0.043) occupation vs physical (p<0.039) occupation vs social (p<0.001)] with HRQoL. In conclusion, majority of the patients in this study are normal psychological well-being (not distress) and representing higher HRQoL in patients afflicted with the disease. Therefore, the future research suggest to do observational study. Hence, health professional could closely observe the physically and psychologically to detect any abnormality as soon as possible to increase psychological well-being and quality of life post MI.

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# TABLE OF CONTENT

<b>TITLE</b>	<b>PAGE</b>
<b>CONFIRMATION BY PANEL OF EXAMINERS</b>	ii
<b>AUTHOR DECLARATION</b>	iii
<b>ABSTRACT</b>	iv
<b>INTELECTUAL PROPERTIES</b>	v
<b>ACKNOWLEDGEMENTS</b>	viii
<b>TABLE OF CONTENTS</b>	ix
<b>LIST OF TABLES</b>	xii
<b>LIST OF FIGURES</b>	xiii
<b>LIST OF APPENDICES</b>	xiv
<b>LIST OF ABBREVIATIONS</b>	xv
<b>CHAPTER 1: INTRODUCTION</b>	
1.1 Background	1
1.2 Problem Statement	3
1.2.1. Mortality due to myocardial infarction (MI)	3
1.2.2. Psychological well-being and HRQoL disturbances post Myocardial infarction	4
1.2.3. Highly expensive treatment of cardiovascular disease	5
1.3 Significant of Study	6
1.4 Research Questions	7
1.5 Research Objectives	7
1.5.1. Aim of study	7
1.5.2. Specific objective	8
1.6 Hypothesis	8
1.7 Operational Definitions	10
1.8 Summary	11
<b>CHAPTER 2: LITERATURE REVIEW</b>	
2.1 Introduction	12
2.2 Overview of Myocardial Infarction	13
2.3 Risk factors of Myocardial Infarction	14