

Hormones and illness behavior

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Nicoletta Sonino and associates, in the current issue of the *Journal of Clinical Endocrinology & Metabolism*, point to the importance of including illness behavior (the ways in which people experience, perceive, evaluate and respond to their own health status) in the evaluation of patients with hormone disorders.

Several [endocrine disorders](#) require prolonged or lifelong medications to prevent life-threatening consequences. However, with the exception of diabetes, the issue of treatment adherence has been virtually neglected in endocrinology. Both treatment-related and patient-related features were found to be significantly associated with poor adherence. Among patient-related characteristics, depression, lack of family support, and doubts about the effectiveness of the prescribed drugs contributed to poor adherence. Patients' actions and communications (the actual seeking of medical help and the reporting of symptoms) are the expression of experiential (what the patient perceives) and cognitive (the way he or she interprets such perceptions) individual characteristics. Cognitive representations of subjects of their own illnesses determine the coping behaviors adopted and, consequently, the illness outcome. These components may greatly vary according to illness-related, patient-related, and doctor-related variables and their complex interactions.

The goal of recovery in endocrinology clearly incorporates the achievement of adaptive coping strategies with one's own illness and prescribed treatments. Attention to illness behavior may provide insights into the clinical issues of delayed or impaired recovery from endocrine disease. Assessing [illness](#) behavior and giving appropriate responses to

patients' concerns and attitudes by healthcare providers may contribute to improve the management of the different phases of endocrine disease.

More information: Sonino N, Sirri L, Fava GA. "Including illness behavior in the assessment of endocrine patients". *J Clin Endocrinol Metab.* 2014;99(9):3122-4.

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