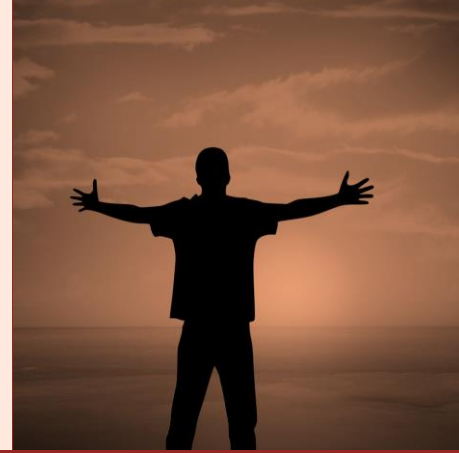
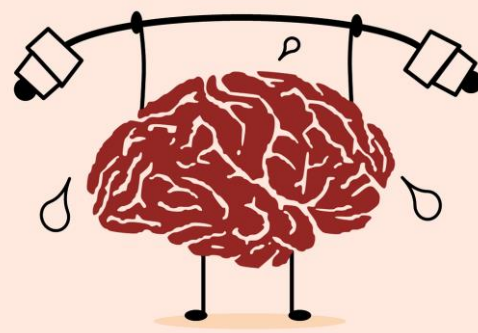


Cognitive Bias Modification against fatigue in different patient populations. User acceptance and preliminary effects



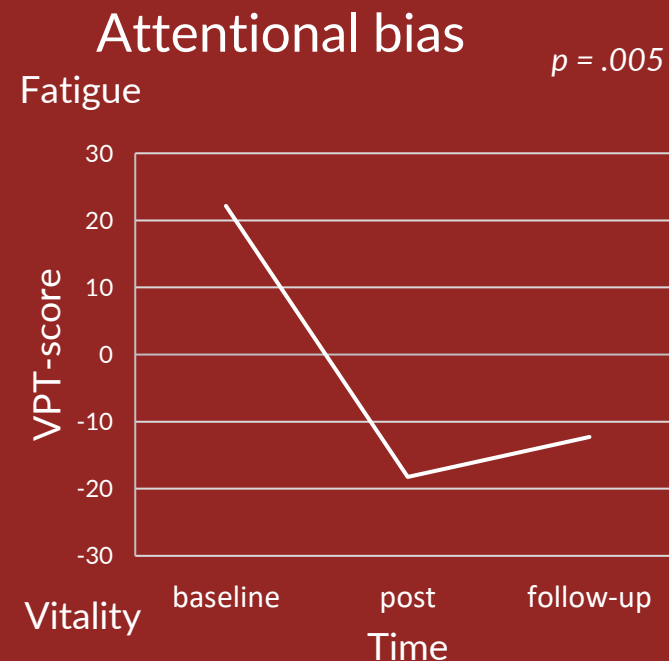
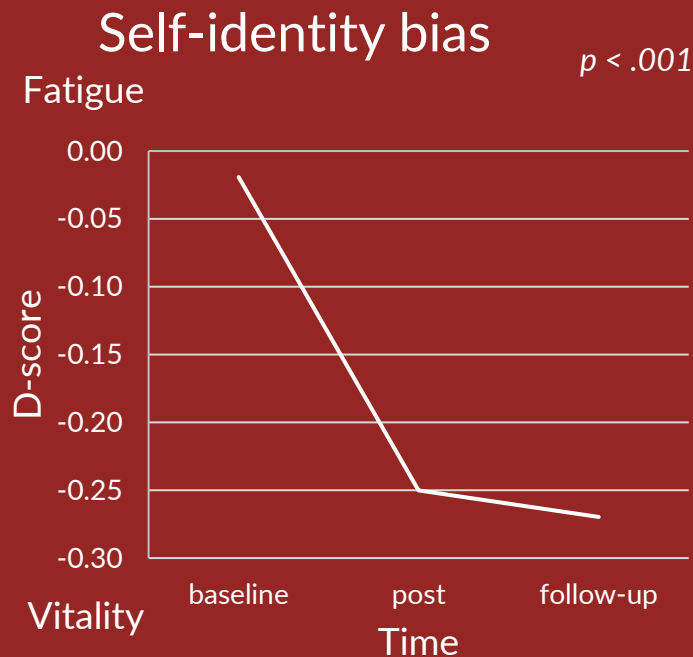
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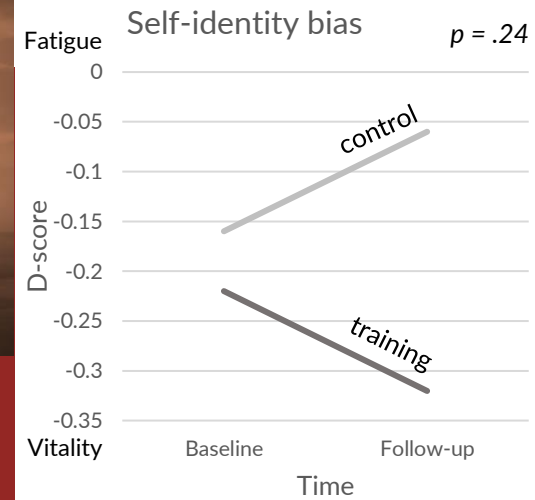


Conclusion: Positively evaluated brain training successfully changes cognitive bias from fatigue to vitality

Kidney patients:



Breast-cancer patients:



RESULTS USER EVALUATIONS

Common barriers:

- Doubts about effectiveness
- Annoyance monotony
- Integration with regular treatment

Specific barriers:

Kidney patients → digital literacy
 Breast-cancer patients → too early introduction

Suggestions:

- Helpdesk
- Personalize training
- Integrate with other interventions
- Key users among nurses

REFERENCES

1. Swain, M. G. (2000). Fatigue in chronic disease. *Clinical science*, 99(1), 1-8.

INTRODUCTION

Fatigue is one of the most frequent, important and quality of life determining symptoms in many illnesses¹

Promising: Cognitive Bias Modification: Low-burden associative tasks target unconscious bias

- Self-identity bias: 'I am a tired person'
- Attentional bias: hyperfocus on fatigue

Research questions:

- Can the training effectively change patients' fatigue bias? And self-reported fatigue, vitality, behaviour?
- How do people evaluate the training?

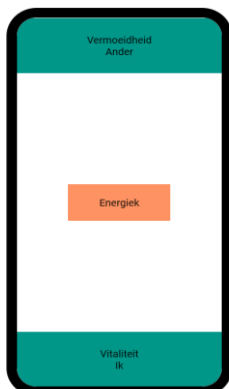
METHODS

1. 2 studies, 2 patient populations:

- Kidney patients (n=24)
- Breast-cancer patients (n=28) + their caretakers

2. Mixed methods

- Semi-structured interviews
- Single Case Experimental Design



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