

COPING STRATEGIES IN PATIENTS WITH BOXER'S FRACTURE

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Objective: The term boxer's fracture refers fifth metacarpal neck fracture. These people have problem with anger management and may be incapable of problem solving. In this study, it was aimed to determine their coping behavior and psychological symptoms and their relations with coping behaviors in patients with boxer's fracture.

Method: 36 male patients with diagnosis of fifth metacarpal neck fracture and 36 healthy male control subjects were included in study. Groups were evaluated with "Coping Orientation for Problem Experiences" (COPE) scale and Symptom Check List-90 (SCL-90).

Results: "Emotion-focused" coping strategies like "denial", "substance abuse", "use of emotional social support" and "avoidance" were seen to be used more often by patient group. In SCL-90 symptom check-list "obsessive-compulsive symptoms," "interpersonal sensitivity", "anxiety", "anger-hostility" sub-groups were significantly different in patient group than control group.

Conclusion: Coping strategies are divided in two categories as problem-focused and emotion-focused. The first targets main source of the problem. And latter targets the emotional impact caused by the main source. This may be only realistic option when the source of stress is outside the person's control. Sense of control directly reduces psychological disturbance. Feeling like you have control over smaller aspects of life could lead to a greater sense of overall control. In these patients, it can be predicted that to punch the wall can increase "sense of control". It is evaluated that the higher scores of "obsessive-compulsive symptoms" subscale of SCL-90 symptom check-list in patient group when compared with control group is consistent with this result.