

Oral presentation

Open Access

## The importance of quality of life (QoL) in the rehabilitation of mentally ill patients

Nikiforos Angelopoulos\*

Address: Department of Psychiatry, University of Thessalia Medical School, Greece

\* Corresponding author

from International Society on Brain and Behaviour: 2nd International Congress on Brain and Behaviour  
Thessaloniki, Greece. 17–20 November 2005

Published: 28 February 2006

*Annals of General Psychiatry* 2006, **5**(Suppl 1):S38 doi:10.1186/1744-859X-5-S1-S38

Quality of life (QOL) has been increasingly recognized as an important outcome measure in the care of patients with mental illnesses, in combination with other outcome measures such as the resolution of symptoms and the reduction of rates of hospitalization. WHO giving emphasis on the individuals' subjectiveness, defined QOL as the perception of their position in life, in the context of culture and value systems in which they live and in relation to their goals, expectations standards and concerns. Sense of wellness of the individual in relation to life circumstances, health status, and ultimate improvement of the overall well-being rearrange the traditional and formate new health care targets. QOL issues in mental patients include severity of psychiatric symptomatology, treatment interventions and outcome, identification of high-risk populations, psychosocial interventions, rehabilitation, health education and policy making. The concept of Rehabilitation consists of two distinct approaches with different philosophies and process implementations. A Medical approach and an Educational approach. The Medical approach seeks to identify a pathological target to diagnose and rectify. The Educational approach tries to recognize the skills, attitudes and motivation of the individual in order to use them constructively towards a process of change. Quality of life and Rehabilitation are closely interconnected. Factors influencing the quality of life influence also the patient's possibilities for a more successful rehabilitation especially in the vocational field. Patients, relatives, therapists, health planners and payers are directly affected from the way these concepts are perceived and applied in the patient's therapeutic, interpersonal, social and vocational environment.