Logotherapy on the Negative Life Regard among Myasthenia Gravis

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Abstract: The most common disease of neuromuscular transmission, myasthenia gravis (MG), is an antibodymediated muscle disease in which any skeletal muscle can be affected. MG may produce numerous symptoms and signs. Symptoms of MG include drooping of the eyelids (ptosis); blurred or double vision (diplopia), weakness in the neck, and from arms and legs to the extremities, change in facial expression, difficulty in swallowing; shortness of breath; and impaired speech. (Donald Sanders, MD). MG patients were anxious physically, emotionally and psychologically. Hopelessness, depression, anxiety, paranoid, pessimistic is still evident in the following factors: a negative view of self, a negative view of the world and a negative view of the future. This is how the MG regard lifenegatively. It undermines the patient's ability to cope with everyday activities, difficult solutions and financial constraint. It leads to isolation and lack of clear perception of the purpose of one's existence. This research utilized logotherapy as an intervention on MG respondents. Frankl's assumption that life is meaningful under circumstances, people has the will to meaning and freedom of the will to activate it (Frankl, 1984). The Within Group design is the method used in this experimental study. There were 15 respondents. This experimental design used the Purpose in Life (PIL) and Life Regards Index (LRI) test. All the respondents were given the logotherapy, quest for meaning and purpose in life. The test revealed that the experimental group, after subjected to logotherapy increased their score of PIL 120 and LRI 110, which indicated as there is the presence of definite meaning and purpose in life. Significant difference between the pretest and the posttest of the same group with Life Regard Index (p=0.00, d=9.2), with Purpose in Life (p=0.00, d=7.5). Logotherapy, quest for meaning and purpose in life, is an effective intervention addressing the suffering (hopelessness, meaninglessness, regarding life negatively) in patients suffering from Myasthenia Gravis.

Keywords: neuromuscular transmission, myasthenia gravis (MG), Logotherapy.

1. INTRODUCTION

Someone once said that life is what happens to a person while he/she is being busy making other plans. But what happens when what he/she plans is interrupted by the diagnosis of a chronic disease like Myasthenia Gravis? This is one of the common dilemmas of patients diagnosed with Myasthenia Gravis. How the patients feel, how well they can cope is determined by many factors such as who will be around to help them (medically, physically and emotionally), how severe the symptoms they are experiencing and how long are they going to endure the disease that has been bothering them.

Myasthenia Gravis (MG) is a chronic autoimmune neuromuscular disease characterized by varying degrees of weakness and fatigability of the skeletal (voluntary) muscles of the body (Conti-Fine BM).

The spectrum of severity of the disease is broad, ranging from mild extraocular muscle weakness to severe life-threatening generalized weakness. The symptoms include drooping of one or both eyelids (ptosis); blurred of double vision (diplopia) due to the weakness of the muscles that control eye movements. They experienced weakness in arms, hands, fingers, legs and neck; loss of facial expression, problem in swallowing, breathing and speech. (Evoli et al., 1996)

Twork et al (2010) study revealed that the persistent experience of weakness may negatively influence patients on the perception of what we called life.

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Life meaning and positivism—these are the two perception that MG patients lose because of the impact that was created by the chronic muscle weakening. These patients need to have the drive and motivation to continue living inspite of how they regard life-negatively.

When MG patients experienced loss, i.e. loss of muscle strength, it could perhaps lead also to a loss of functioning at home, at work or at play; and loss of perception of themselves as having a "well body". The loss of self confidence that comes along since they have to depend heavily on others to assist them in their basic needs. The stages of denial, anger, bargaining, depression and acceptance are normal for people coming terms with any type of major loss (Elisabeth Kubler Ross)

In a culture that places such an emphasis on physical perfection, health and fitness, athletic ability and independence, having contracted MG "blemishes" our health and reminds us of how vulnerable we are and how unpredictable life is. (Australia Myasthenia Association) Contantine (2001) also made an observation that some MG patients were very negative in their thinking. They regard their life – hopeless, meaningless, purposeless (very negative). The suffering they have experienced, their inability to do their own responsibility, the feeling that others doubt that they are really ill because of the absence in physical indications of the disease. Nothing seems certain any more, only the weakness that keeps them reminding that things are not the same, this may lead them to feel demoralized, frustrated, negative regards on one, depressed and worst suicidal ideation (Myasthenia Gravis Association, 1997-2009).

People tend to depend on external sources such as looks, abilities, careers and acceptance as bases for what they believe are "strong points". In an event, however, that something disturbs these external sources, meaning in life become likewise disturbed (Steger et al., 2008)

Chronically ill person tent to stroke their own feelings of anxiety and professional inadequacy (Breitbart W. 2002) due to fears of unemployment leading to financial strain, and the guilt of feeling a burden to the family, close friends and coworkers and their attending clinicians. Patients fear about job discrimination, especially those requires physical activities. Some fear termination from work because of constant tardiness or absences brought about by the fatigue that could lead to the patients' fear about financial security.

In MG, the mood swings and sudden appearance of symptoms were also constant source of tension for the patient. They think that the status they have hoped for in the future does not exist anymore. Nothing seems certain anymore, only the weakness that keeps them from reminding that things are not the same and then negative life regard, depression, anxious set in. This leads to withdrawing from further social contact knowing the inability of people to understand the true nature of their condition leading to decrease life satisfaction. (Gulick EE, 1997)

LOGOTHERAPY:

Originally refers to humanistic/existential school of psychotherapy that focuses on the human spirit and the meaning of human existence as well as on man's search for such meaning Frankl, the founder of Logotherapy theorized that human being seeks primarily to find meaning and purpose in human existence. When one fails to find a meaning and purpose, which gives his/her life a sense of unique identity, experiencing "existential vacuum" as a general sense of meaninglessness or inner emptiness, the feeling of having lost the meaning of existence and the content of life. He also elaborated that along the state of boredom, depression, suicide, aggression is at least partially to be traced back to the feeling of meaninglessness (Frankl, 1986). He cited that people are willing to endure any suffering if they are convinced that this suffering has meaning.

In finding meaning in life, Frankl (1984) also points to three ways, the meaning triangle: (1) "Creativity" (giving something to the world through self-expression, using one's talents in various ways. (2) Experiencing a value (receiving from the world: through nature, culture, relationships, inter action with others and with persons' environment). (3). Change of attitude (even if a person can't change a situation or circumstances, one can still choose one's attitude toward a condition, this is often a self-transcending way of finding meaning, especially in unavoidable suffering). (p.133).

Frankl (1986) asserted that it is not possible to practice Logotherapy without understanding the human spirit or the spiritual dimension of human existence. According to his dimensional ontology, human beings exist in three dimension – somatic, mental and spiritual.

One of the propositions of Logotherapy is that the human spirit if our healthy core. The human spirit may be blocked by biological or psychological sickness, but it will remain intact. The human spirit does not get sick, even when the

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psychological organism is injured. Wong (1999), however, suggested that it may be more helpful for scientific and therapeutic purposes to conceptualize the human spirit as inner resources, which can come to one's aid in coping with life's stress.

The need for meaning is central theme in Victor Frankl's (1984) writing. He believes that the healthy individual is primary motivated by the desire to find meaning and purpose in his or her personal existence. Based on Frankl's studies and experience, the human ideal is to discover a source of meaning in life, inspite of the fact that life carries with it the possibility of intense suffering and the inevitability of death. Frankl's (1984) report of his experiences in a Nazi concentration camp during World War II demonstrates how essential meaning is, to human existence. Full of conviction, he said that human life, under any circumstances, never ceases to have a meaning. This infinite meaning of life includes suffering and dying, privation and death. Frankl told his co-prisoners in the Nazi camp that they must not lose hope but should keep their courage in the certainty that hopelessness of their struggle did not detract from its dignity and meaning.

Frankl, the author of Logotherapy, firmly believed that thoughts of their beloved were an important component of that "will to meaning" that enabled people to survive. He had observed and experienced that love is the ultimate and the highest goal to which man can aspire. (Frankl, 1984).

Focus in meaning/purpose in life is one of the productive avenues to enhance subjective well-being in later life. Meaning in life was found to be positively associated in life satisfaction and negatively related to depression (Hyun and Park, 2012).

Frankl (1984) emphasizes that humans- by nature—consciously search for meaning in their lives in the hope of living a healthy and balanced life. Meaning is always there, whether the person sees it or not, and is not just an illusion of the mind. Being free and completely responsible for the self, which is what logotherapy is based on. He said, "Each man is unique and each man's life is singular; no one is replaceable nor is his life repeatable."

In logotherapy, personal meaning in life is important, but meaning must be shared with other individuals because it can be much bigger than any one person can fathom. This gives way to the idea that, not only should individuals seek out personal meaning, but maybe in order to be most productive, should start by doing something for others (Frankl).

2. METHODOLOGY

The researcher utilized the experimental design to determine the effectiveness of logotherapy in alleviating the negative life regard among the Filipinos suffering from MG. With-in group design is usually the preferred method used in true experimental design to measure change and compare the responses of the respondents. This design allows the administrator to assess the effect of the experimental manipulation by looking at the differences between the pretest and posttest.

The researcher used the purposive sampling technique. The 15 respondents with MG were from the Neurology Pavillion of the Philippine General Hospital, Manila, and some were the patients of Dr. Marita B. Dantes.

The respondents of the study were comprised of MG patients that fell under Class 1-3 of the Clinical Classification of Myasthenia Gravis. They were all under the care of neurologists. They were all taking prescribed medication that includes Mestinon and steroids. They all experienced MG crisis (which uses the oxygen equipment in order to breath). Respondents were female and male age ranging from 20 to 60 years old. Aside from the physiological complains of such as drooping of the eyelids, blurred or double vision, slurred speech, weakness in the arms and legs, chronic muscle fatigue, they also complained on difficulty in sleeping, loss of appetite, intense loneliness, lacking motivation in life. Since these respondents are not contained in any institution, the researcher did her pretest, interview, observation, intervention and posttest in the respondents' residences.

3. RESEARCH INSTRUMENTS

The Personal Data Sheet was used to obtain basic information about the respondents and was used as a reference during the intervention schedule.

Purpose in Life Test (PIL). The test is an attitude scale constructed for the orientation of logotherapy. The PIL was designed to measure an individual's experience of meaning and purpose in life. It is reliable enough to detect the meaninglessness of an individual. With the score of 91 and below, the interpretation is lack of clear meaning and purpose

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in life. With the scores of 92-112 the interpretation is indecisive range, uncertain definition of meaning and purpose in life. 113-140 indicates the presence of definite meaning and purpose in life.

Life Regard Index (LRI). The test was based on the concept of positive life regard, was developed by Battista and Almond in an attempt to provided a simple non-biased measure of meaning in life. With the scores of 87 and below, the interpretation is lack of clear meaning and purpose in life. Scores of 88-108, the interpretation is indecisive range. 109-140 indicates the presence of definite meaning and purpose in life.

4. THE INTERVENTION PROGRAM

The respondents of the study were selected based on the result of the pretest using the Purpose in Life (PIL) and Life Regard Index (LRI) tests. Respondents that were experiencing meaninglessness and lack of purpose in life, high in negative life regard with the score in PIL 91 and below and 87 and below in LRI, and had been confirmed through the result of the interviews, were purposely selected as the respondents of this study.

After choosing the 15 respondents for this study, they were given the logotherapy, searching for one's meaning and purpose in life. This intervention program has ten sessions, two sessions per week that last for five weeks. This includes the pretest, signing of consent letter, interview and the posttest.

An observation checklist was given to the caregiver or significant member of the family of the respondents. The researcher discussed this matter with the one who will accomplish the form. Through this, the researcher was able to know the behaviour or reactions of the respondents after each session of logotherapy.

On the last session, the 15 respondents took the posttest, the same assessment tools used during the pretest. The result was evaluated by subjecting pre-intervention and post-intervention scores to statistical analysis for significant differences. Moreover, the researcher justified the posttest results among the respondents through the observational checklist, pretest-posttest results and the respondents' behaviour, attitude encounter during the logotherapy session.

5. RESULT AND ANALYSIS

Myasthenia gravis is a rare disease and it is not directly inherited nor is it contagious. The disease can occur at any age, in all ethnic groups and both genders.

In this research, there are more female (10) than male (5); more married (11) than single respondents (4). From the age group of 20-30, 3 respondents; from the age group 30-40, 2 respondents; from the age group 40 to 50, 6 respondents; and lastly from the age group 50-60, 7 respondents.

The results of the pretest among the female and male in LRI is 53.34, 56.06 respectly and with PIL is 47.00, 47.80

The result of the pretest among married respondents in PIL is 47.00, in LRI is 55.65, while those single respondents in PIL is 47.80 and in LRI 54.50.

The result of the pretest among the age group of 20-30 in PIL is 47.60 and in LRI is 54.80. Among the age group of 30-40, the PIL is 48.00 and the LRI is 54.68. Among the age group of 40-50, the PIL is 47.00 and the LRI is 54.68. The last age group 50-60, the PIL is 47.20 and the LRI is 54.50.

The loss of ability to be as efficient as they were before makes them feels hopeless, depressed and some may even feel suicidal. They feel unclear of their future, they just don't know what they really want to do with their life. "Nothing very outstanding ever seems to happen to me. They get completely confused when they try to understand life" affirmed to the LRI assessment tools.

The respondents experienced sadness, emptiness, helplessness, loss of appetite, weakness, sleeplessness, anxious of another MG crisis and purposeless of their existence in this world. They need to ask help from others, physically and financially.

After the 10 session of logotherapy, respondents who are married, especially the female age 30 to 50 benefited the most. Their life regard from negative to positive, both PIL and LRI has the interpretation from lack of meaning to presence of definite meaning and purpose. Female, mothers are more optimistic, hopeful, have a greater faith in the creator and more trustful of oneself that they could still be someone to their family.

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All the respondents, after they experienced the logotherapy, quest for one's meaning and purpose of existence, they feel happier, they feel the love of the Creator that they were given a second life to be with their family. They were subjected to contemplate on the meaning triangle, they were able to cite what are their creativity, how we can render our creativeness or talents (even a simple good deed) to other people such as giving love, care, concern or cooking a simple meal to other people. Experience the value of oneself and others, it leads to change of attitude and among the MG, they felt so important, worthy, that in their own little way they can still do something for others.

Most of the respondents, they commented that it's their family that play most important to them. After the logotherapy, they know they can still flourish themselves as someone of help to other members of the kin. They were able to have a clearer perception of being to live their life to the fullest. Some said they can still try to find light work so they can help financially to their family.

They cried when the researcher commented to them "it is your choice to be happy or to be miserable." They said they would like to be optimistic, avoid self-dislike, self-dissatisfaction, fault-finding, and negative attitude towards life.

The results show that there is a significant difference between the pretest and posttest of the respondents as measured by LRI and PIL. The scores after the logotherapy, PIL increased to 120 and LRI to 110. with p.value of 0.00 on both. The results clearly demonstrate logotherapy has indeed a remarkable effect on alleviating negative life regard among people suffering from Myasthenia Gravis.

As being cited by Frankl that tap on the mind of the respondents "everything can be taken from a person except one thing: the human freedom--to choose one's attitude in any given set of circumstances, to choose one's own way.

6. DISCUSSION AND CONCLUSION

People who are suffering from chronic disease usually fathom themselves as not a complete whole. Myasthenia Gravis faces so many limitations, less capable in doing even personal chores, a total change of lifestyle, such as having to quit one's job or school. Without to say, the myasthenic looks, without facial expression, that stigmatized them where ever they go.

An autoimmune neuromuscular disorder characterized by fatique and exhaustion of muscles. It is caused by a mistaken immune response to the body's own nicotinic acetylcholine receptors, which are found in junctions between muscles and the nervous system. The body produces antibodies that attack these receptors, preventing signals from reaching the muscles. (Robert M. Pascuzzi)

While administering the logotherapy to the respondents, little by little they discovered their purpose of their existence. Why they choose to live in the midst of the time that breathing was so scarce. They were like fish not in the water habitat. With the use of meaning triangle, they realized that we, human being can endure the suffering once we see the meaning of it. As the session progressed, they became motivated with life. Their family is the primary reason for them to still continue their lives. They realized that still they can be someone to others, by rendering their creativity or talents. They felt worthy and important and there is significant change of attitudes.

Even when the physical body is weak, the mind is bothered because of the sickness, but there is still what we human beings have is the "human spirit." It is at the very core of being human; it will never get sick or die. Ultimately, it is the human spirit in us that will help us find our meaning and our purpose in life (Frankl, 1986)

Moreover, the feelings of intense sadness, hopelessness, regard life negatively diminished after the quest for one's meaning and purpose of the remaining life has culminated. It makes life more meaningful, worth living to the fullest. I therefore conclude that logotherapy, quest for purpose of one's existence, is effective among patients suffering from Myasthenia Gravis.

REFERENCES

BOOKS:

[1] Anotonovsky, A. (1987). Unraveling the mystery of Health: How people manage stress & stay well. San Francisco, CA: Jossy-Bass.

International Journal of Social Science and Humanities Research ISSN 2348-3164 (online) Vol. 3, Issue 2, pp: (331-338), Month: April - June 2015, Available at: www.researchpublish.com

- [2] Auhagen, A. E. (2000). On the psychology of meaning of life. Swiss Journal of Psychology, 59, 34–48.
- [3] Battista, J. & Almond, R. (1973). The development of meaning in life. Psychiatry, 36, 409-427.
- [4] Beck, AT, Rush AJ, Shaw BF & Emery G. (1979). Cognitive therapy of depression. New York. Guilford Press.
- [5] Conti-Fine BM, Milani M, Kaminski HJ. (2006). Myasthenia gravis: past, present, and future. J.Clin. Invest. 116 (11):2843-54.
- [6] Crumbaugh, J.C., Maholick, L.T. (1969). Manual of Instruction for the Purpose in Life test. Psychometric Affiliates, Munster, IN.
- [7] Deuna M. (1996). Living with life-threatening illness: A guide for parents, their families, & caregivers. Lexington books, An imprint of Mcmillan, Inc.
- [8] Deurzen-Smith, E. van (1997). Everyday Mysteries: Existential Dimensions of Psychotherapy. London: Routledge.
- [9] Erikson, E.H. (1963). Childhood and society. New York: W. W. Norton.
- [10] Fabry, J (1994). The Pursuit of Meaning. (New revised ed.). Abilene, Texas: Institute of Logotherapy Press.
- [11] Frankl, V.E. (1988). The will to meaning: Foundations and applications of logotherapy. New York: Penguin.
- [12] Glassman AH, Shapiro PA. ((1998). Depression and the course of coronary artery disease. Am J Psychiatry 55:4-11.
- [13] Guttman, D. (1997). Logotherapy for the helping professional: Meaningful social work. New York: Springer Publishing.
- [14] Harris EC, Barraclough BM. (1997). Suicide as an outcome for mental disorders: a meta-analysis. Br J Psychiatry 170:205-223.
- [15] Howard, James F. (2006). Myasthenia Gravis–A Summary. Reviewed by the MGFA's Medical Advisory Board, June 2010.
- [16] Kahn, R. L. (1995). Successful aging. New York: Dell Publishing.
- [17] Kendall J, Gloersen B, Gray P, McConnell S, Turner J, & West J. (1989). Doing well with AIDS.
- [18] Kimble, Melvin A. & Ellor, James W. (2000). Logotherapy: An Overview. The Haworth Press, Inc. Journal of Religious Gerontology, Vol. 11, Nos. 3/4.
- [19] Klienke, C. (1991). Coping with Life Challenges. Wadsworth California.
- [20] Klinger, E. (1977). Meaning & void: inner experience and the incentives in people's lives. Minneapolis: University of Minnesota Press.
- [21] Langle, A. (1999). Existential analysis. Translated by Langle, A. (2000). Fundamental Psychiatrica: EA-die Zustimmung Leben Finden.
- [22] Marcia, J. E. (1980). Identity in adolescence. In J. Adelson (Ed.), Handbook of Adolescent Psychology (pp. 159-187). New York: Wiley.
- [23] Paul Robert H, Mullins Larry L, Gilchrist James M. (2009). The impact of Myasthenia Gravis on mood cognitive function and Quality of Life. 279-292.
- [24] Paul RH, Nash JM, Cohen RA and Gilchrist JM, Goldstein JM. (2001). Quality of life and well-being of patients with myasthenia gravis. Muscle Nerve. 24:512-516.
- [25] Philips LH. (2003). The epidemiology of myasthenia gravis. Ann NY Academy Science. 998.407-412.
- [26] Russell, B. (1996). History of Western Philosophy. Routledge, London, U.K.
- [27] Schulz, R. (1986). Successful aging: Balancing primary and secondary control. Adult Development and Aging News, 13, 2-4. Spiegel D. Healing words: emotional expression and disease outcome [editorial]. JAMA 1999;281:1328.

Vol. 3, Issue 2, pp: (331-338), Month: April - June 2015, Available at: www.researchpublish.com

- [28] Turner, J & Kelly B. Emotional dimensions of chronic disease. Department of Psychiatry University of Queensland K Floor Mental Health Centre Herston, Queensland 4029 Australia.
- [29] Vincent A, Palace J, Hilton-Jones D. (2001). Myasthenia gravis. Lancet.
- [30] Welter, P. (1987). Counseling and the search for meaning. Waco, TX: Word Books.
- [31] .Wong, PTP & Fry PS (Eds). (1997). The human quest for meaning: A handbook of psychological research clinical applications. Mahwah, NJ: Lawrence Erlbaum Associates, Inc. Publishers.

JOURNALS AND ARTICLES:

- [32] Adamson, L. & Lyxell, B. (1996). Self-concept and questions of life: identity development during late adolescence. Journal of Adolescence, 19, 569-582.
- [33] Bachmann K, Burkhardt D, Schreiter I, Kaifi J, Schurr P, Busch C, Thayssen G, Izbicki JR, Strate T. ((2009) Thymectomy is more effective than conservative treatment for myasthenia gravis regarding outcome and clinical improvement. Surgery. 145:392-398.
- [34] Badger TA, Braden C, Mishel MH. (2001). Depression burden, self-help intervention and side effect experience in women receiving treatment for breast cancer. Oncol Forum. 28:567-574.
- [35] Crumbaugh, J. C., & Maholick, L. T. (1969). Manual of instructions for the Purpose in Life test. Munster, IN: Psychometric Affiliates.
- [36] Debats, D. L., Drost, J., & Hansen, P. (1995) Experiences of Meaning in Life: a Combined Qualitative and Quantitative Approach. British Journal of Psychology, 86, (3), 359-376. Retrieved from Expanded Academic Database: http://web7.infotrac.galegroup.com.
- [37] Devins GM, Stam HJ, Koopmans JP. (1994). Psychosocial impact of laryngectomy mediated by perceived stigma and illness intrusiveness. Can J Psychiatry. 39:608-616.
- [38] Goldstein MJ, Rodnick EH, Evans JR, May PRA, & Steinberg MR. (1978). Drug and family therapy in the aftercare of acute schizophrenia. Archives of General Psychiatry. 35, 11169-1177.
- [39] Grohar-Murray ME, Becker A, Reilly S and Ricci M (1998): self-care actions to manage fatigue among Myasthenia Gravis patients. Journal of Neuroscience Nursing 30 (3): 191-199.
- [40] Gulick EE.(1997). Correlates of Quality of Life Among Persons With Multiple Sclerosis. Nurs Res. 46:305-311.
- [41] Harlow, L. L., Newcomb, M. D., & Bentler, P. M. (1986). Depression, self-derogation, substance use, and suicide ideation: lack of purpose in life as a mediational factor. Journal of Clinical Psychology, 42(1), 5-21.
- [42] Kang, K. A., Kim, S. J., Lyu, C. J., You, Y.G., & Song, M. K. (2007). Development of a CD program applied logotherapy to promote quality of life in adolescents with terminal cancer. Journal of Korean Academy of Child Health Nursing, 13(4), 495-505
- [43] Koenig HG, Kuchibhatla M. (1998). Use of health services by hospitalized medically ill depressed elderly patients. Am J Psychiatry 155:871-877.
- [44] Lantz, J. (1986). Logotherapy and the person of the therapist. The International Forum for Logotherapy, 5, 119-122.
- [45] Lantz, J. (1993). Treatment Modalities in Logotherapy. The IFL, 16(2), 65-73.
- [46] Lantz, J.(1996). Stages and treatment activities in family logotherapy. The International Forum for Logotherapy, 19, 20-22.
- [47] Leonardi M, Raggi A, Antozzi C, Confalonieri P, Maggi L, Cornelio F, Mantegazza R. (2010). The relationship between health, disability and quality of life in Myasthenia Gravis: Results from an Italian study. J Neurol.257:98-102.
- [48] Lukas, E., & Hirsch, B. Z. (2002). Logotherapy. In F. W. Kaslow (Ed.-In-Chief) & R. F. Massey & S. D.
- [49] Massey (Vol. Eds.), Comprehensive handbook of psychotherapy: Vol. 3. Interpersonal/humanistic/existential (pp. 333–356). New York: John Wiley & Sons.

Vol. 3, Issue 2, pp: (331-338), Month: April - June 2015, Available at: www.researchpublish.com

- [50] McFarlane WR, McNary S, Dixon L, Hornby H, & Cimett E. (2001). Predictors of dissemination of family psychoeducation in community mental health centers in maine and Illinois. Psychiatric Services, 52, 935-942.
- [51] Mc Grogan A, Sneddon S, de Vries CS. (2010). The incidence of myasthenia gravis: a systematic literature review. Neuroepidemology 34 (3):171-183.
- [52] Mishel, M.H., Germino, B.B., Gil, K.M., Belyea, M., LaNey, I.C., Stewart, J., Porter, L., & Clayton, M. (2005). Benefits from an uncertainty management intervention for African-American and Caucasian older long-term breast cancer survivors. Psycho-Oncology, 14, 962-978.
- [53] Pearlin LL & Schooler C. (1978). The structure of coping. Journal of Health and Social Behavior. 19, 2-21.
- [54] Raggi A, Leonardi M, Antozzi C, Confalonieri P, Maggi L, Cornelio F, Mantegazza R. (2010). Concordance between severity of disease, disability and health-related quality of life in Myasthenia gravis. Neurol Sci, 31:41-45.
- [55] Rohr W. (1992). Myasthenia gravis in the diagnostic frontier area of psychiatry. Psychiat Prax . 19:157-163.
- [56] Reker, G. T., Peacock, E. J., & Wong, P. T. P. (1987). Meaning and purpose in life and well-being: a life span perspective. Journal of Gerentology, 42(1), 44-49.
- [57] Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. Journal of Personality and Social Psychology, 57(6), 1069-1081.
- [58] Walton L. (1989). Essentials of Neurology. 6th ed. London Churchill Livingstone.
- [59] Westgate, C. E. (1996) Spiritual Wellness and Depression Journal of Counseling and Development, 75 26-35

THESIS/RESEARCH:

- [60] Choi, M. O. (2000). The effects of logotherapy group counseling on the purpose in life and a life of faith of christian teenager, Unpublished master's thesis, Keimyung University, Daegu
- [61] Cho, H. S. (2000). The effects of logotherapeutic group counseling on purpose in life, self-concept, self-esteem and spiritual wellbeing of adolescence. Unpublished master's thesis, Kosin University, Pusan.
- [62] Thevasihamoni, Agnes Glory (2009). The Effectiveness of Mindfulness-Based Cognitive Intervention in Promoting Quality of Life of Caregivers of Cancer Patients. University of Sto Tomas Graduate School.
- [63] Julom, Mary Angelyn M CSFN. The Effectiveness of Logotherapy in Alleviating the Existential Vacuum of the Selected Paralyzed Inpatients. University of Sto Tomas Graduate School.
- [64] Zervoulakos, Rhea Angeles.(2006). Cognitive Narrative Therapy and its Effects on the Level of Stress of Nursing Interns Students. University of Sto Tomas Graduate School.

WEBSITES:

- [65] Australian Myasthenic Association in NSW. http://www.myasthenia.org.au/. © 2004 -2011
- [66] Korea Youth Research Association (2003). Adolescence. Seoul: YangSueWon Publishing Co.
- [67] Lau, Stephen. Myasthenia Gravis: my struggle. http://www.longevityforyou.com
- [68] Muscular Dystrophy Association website (2004). http://www.mda.org.nz/
- [69] Myasthenia Gravis Foundation of America, Inc. http://www.myasthenia.org
- [70] National Institutes of Health. http://www.nih.gov
- [71] Nursing Care Plan/NCP Myathenia Gravis. http://www.ncp.org
- [72] Schiffbauer Judith, Stress and Myasthenia Gravis (MG).http://www.mgawpa.org/
- [73] Shah AK.MyastheniaGravis. http://:emedicine.medscape.com/Copyright© 1994-2011 by WebMD LLC.
- [74] Vesely, Franz. Viktor Frankl-Institut: The Official Website of the Viktor Frankl Institute Vienna. Retrieved March 25, 2008. http://www.viktorfrankl.org/e/logotherapy.html.