Palliative and Supportive Care

cambridge.org/pax

Letter to the Editor

Cite this article: Fitri HU, Saputra R, Suhardita K, Suarta IM, Oktasari M, Aminah S, Laras PB (2024) Digging deeper: A critique of the mediation study of spirituality in ALS patients. *Palliative and Supportive Care* 22(5), 1550–1551. https://doi.org/10.1017/S1478951524001275

Received: 22 May 2024 Revised: 23 May 2024 Accepted: 1 June 2024

Corresponding author: Hartika Utami Fitri; Email: hartika.uf@radenfatah.ac.id

Digging deeper: A critique of the mediation study of spirituality in ALS patients

Hartika Utami Fitri, M.PD.¹ D, Rikas Saputra, M.PD.¹ D, Kadek Suhardita, M.PD.² D, I Made Suarta, M.PD.², Maria Oktasari, M.PD.³, Siti Aminah, M.PD.⁴ and Palasara Brahmani Laras, M.PD.⁵ D

¹Department of Islamic Guidance and Counselling, Universitas Islam Negeri Raden Fatah Palembang, South Sumatra, Indonesia; ²Department of Guidance and Counselling, Universitas PGRI Mahadewa Indonesia, Denpasar, Indonesia; ³Department of Guidance and Counselling, Universitas Negeri Malang, Malang, Indonesia; ⁴Department of Guidance and Counselling, Universitas Negeri Yogyakarta, Yogyakarta, Indonesia and ⁵Department of Guidance and Counselling, Universitas Merca Buana Yogyakarta, Yogyakarta, Indonesia

Dear Editor,

It was with great enthusiasm that I read the recent article by Fernandez et al. (2024), which examined the effects of social support on the emotional well-being of amyotrophic lateral sclerosis (ALS) patients with a focus on the role of spirituality as a mediator (Fernandez et al. 2024). With valuable insights into how the interaction between social support and spirituality can influence emotional well-being, this article is a significant contribution to our field (Fernandez et al. 2024). However, I feel the need to address some constructive criticisms to deepen our analysis and understanding of this complex relationship.

First, with its positive relationship between social support, spirituality, and emotional well-being, this study is a testament to the rigorous methodology employed (Labrague 2021). However, the online sampling method used, while innovative, calls into question the accurate representation of the ALS population as a whole. Limited internet access and technology use among patients with significant physical disabilities may have affected the external validity of the results (Rios et al. 2016). Therefore, more inclusive and representative recruitment methods are needed for future research.

Second, this study adopted a spiritual well-being scale commonly used for other chronic and terminal illnesses, such as cancer (Rabitti et al. 2020). Given that ALS has unique psychosocial dynamics, a more specific scale that can capture the nuances of spirituality in the context of motor neurone disease may be more appropriate.

Third, the mediation analyses conducted, while robust, relied on the assumption that there were no unmeasured confounding variables (Lutz et al. 2017). However, this study did not consider factors such as disease severity, pain experience, or medical support that could influence emotional well-being and spirituality (Rawdin et al. 2013). I believe the addition of these variables in future research will significantly strengthen the proposed theoretical model.

Fourth, this study's results showed that the "faith" dimension of spirituality did not significantly correlate with emotional well-being, which raises questions about the relevance and interpretation of the different components of spirituality in the context of ALS (Fernandez et al. 2024). It is essential to explore further how the individual components of spirituality contribute to emotional well-being and how interventions targeted at specific dimensions may improve patient outcomes (Chen et al. 2018).

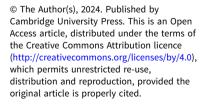
Fifth, while the analyses were impressive, further research with larger samples and longitudinal methods is needed to understand how the relationship dynamics between social support, spirituality and emotional well-being may change, especially as ALS disease progresses (van Groenestijn et al. 2016).

In conclusion, although Fernandez et al.'s study makes a valuable contribution, several methodological and theoretical issues must be addressed to enrich our understanding of the interactions between social support, spirituality, and emotional well-being in ALS patients (Harris et al. 2018). Further discussion on this topic will trigger more in-depth and focused research.

Competing interests. The authors declare that they have no known competing financial interests or personal relationships that could have influenced the work reported in this paper.

References

Chen J, Lin Y, Yan J, et al. (2018) The effects of spiritual care on quality of life and spiritual well-being among patients with terminal illness: A systematic review. Palliative Medicine 32(7), 1167–1179. doi:10.1177/0269216318772267







- Fernandez A, Guenegou L, Corcia P, et al. (2024) The effect of social support on the emotional well-being of people with amyotrophic lateral sclerosis: Exploring the mediating role of spirituality. Palliative and Supportive Care 19, 45–67. doi:10.1017/S1478951524000610
- Harris M, Thomas G, Thomas M, et al. (2018) Supporting wellbeing in motor neurone disease for patients, carers, social networks, and health professionals: A scoping review and synthesis. Palliative and Supportive Care 16(2), 228–237. doi:10.1017/S1478951517000700
- Labrague LJ (2021) Psychological resilience, coping behaviours and social support among health care workers during the COVID-19 pandemic: A systematic review of quantitative studies. *Journal of Nursing Management* 29(7), 1893–1905. doi:10.1111/jonm.13336
- Lutz SM, Thwing A, Schmiege S, et al. (2017) Examining the role of unmeasured confounding in mediation analysis with genetic and genomic applications. BMC Bioinformatics 18(1), 1–6. doi:10.1186/s12859-017-1749-y

- Rabitti E, Cavuto S, Iani L, et al. (2020) The assessment of spiritual well-being in cancer patients with advanced disease: Which are its meaning-ful dimensions? BMC Palliative Care 19(1), 1–8. doi:10.1186/s12904-020-0534-2
- Rawdin B, Evans C and Rabow MW (2013) The relationships among hope, pain, psychological distress, and spiritual well-being in oncology outpatients. *Journal of Palliative Medicine* **16**(2), 167–172. doi:10.1089/jpm.2012.0223
- Rios D, Magasi S, Novak C, *et al.* (2016) Conducting accessible research: Including people with disabilities in public health, epidemiological, and outcomes studies. *American Journal of Public Health* **106**(12), 2137–2144. doi:10.2105/AJPH.2016.303448
- van Groenestijn AC, Kruitwagen-van Reenen ET, Visser-Meily JMA, et al. (2016) Associations between psychological factors and health-related quality of life and global quality of life in patients with ALS: A systematic review. Health and Quality of Life Outcomes 14(1), 107. doi:10.1186/s12955-016-0507.6