

## Abstract 2

### **Secular Spirituality? - Faith Factors Relate to Outcomes in Middle-aged and Older Patients Undergoing Coronary Artery Bypass Surgery.**

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#### **Abstract**

This prospective study replicated the findings in an earlier survey with a sample of patients from a Midwest cardiac center. Same medical outcomes and some similar faith factors and controls, as well as a new faith factor, sense of reverence in secular contexts, were examined. Face-to-face interviews were conducted with 177 patients (age 65+) two weeks before heart surgery. Medical variables were retrieved from the Medical Center's Society of Thoracic Surgeons' Database. Sense of reverence in secular contexts predicted fewer postoperative complications (PC) and shorter hospital length of stay (LOS), before PC is introduced into the equation. Controlling for PC reduced the initial influence of reverence on LOS, suggesting the mediating role of PC between reverence and LOS. Prayer was associated with the reduced PC but not LOS. Neither attendance at religious services nor spiritual experiences that enhanced one's belief was related to outcomes. Women had longer LOS, but no age influence, nor interaction between demographics and faith factors, was evident. The similarity and differences between the two studies were discussed in relation to contextual factors and some measures.