

Psychosocial Aspects among Women with Breast Cancer

By

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Abstract

The present study aims to assess the psychosocial status of Breast cancer women and to find out relationships between the psychosocial status of breast cancer who receive different types of treatment and their demographic characteristics including age, gender, marital status, educational level, family income, famous history, the degree of kinship of breast cancer, living, number of children, type of breastfeeding, and their medical conditions.

Keywords: Breast cancer, Psychosocial aspect.

Introduction

One in ten new cancer diagnoses in women each year is breast cases of cancer, making it the most prevalent type of cancer in this population. It is the second most typical cancer death cause for women worldwide. (World Health Organization, [WHO] 2020).

Breast cancer is the most frequent cancer among Iraqi women and the cause of morbidity and mortality (Abdalzahra & Ali 2017). Breast cancer cases in Iraq have risen from 26.6 per 100,000 in 2000 to 31.5 per 100,000 in 2009 (Zuhair et al., 2020). Moreover, Iraq's related incidence rate was found to be higher than Turkey, Iran, Saudi Arabia, and Bahrain, but lesser than Jordan and Kuwait (Ferlay et al., 2015).

Many women still face major psychological and social issues while getting care and after their treatment plan is finished, despite great improvements in the therapy and aftercare offered by medical professionals and Breast Cancer Treatment Services. Age, obesity, smoking, and estrogen use, among other demographic and lifestyle factors, have all been connected to the development and spread of breast cancer, according to clinical research. (Xuan et al., 2020).

Even though breast cancer is a physical disease, social and psychological issues are common. Anxiety, despair, unease, grieving, helplessness, exhaustion, attention deficit disorder, sleep difficulties, mental and cognitive reserve, sexual dysfunction, infertility, psychological anguish, and psychiatric illnesses are among the psychosocial issues that breast cancer patients experience. The frequency of psychiatric disorders among cancer patients ranges from 29 to 47%. Severe stress disorder, depressive disorder, adjustment disorder, and other neurotic disorders are the most prevalent psychological issues among cancer patients. (Dana G., 2018; Jermittiparsert, 2021; Leshoro, 2021; Mao & Ma, 2021).

Depression is one of the psychological disorders that affect breast cancer survivors the most frequently. The majority of research numbers range between 10 percent and 25 percent, while the prevalence of depression can range from 5 percent to 40 percent. (Su Ja., et al., 2017).

In addition to the psychological problems that breast cancer patient faces, they may experience social problems, such as social support, communication avoidance, sexual problem, separation, or termination of relationships. (Adam H., et al., 2016).

Social isolation can be defined by factors like the size of one's social network or the

number and frequency of interactions with others, as well as subjective criteria like an individual's level of perceived social isolation (commonly referred to as loneliness). are also assessed for the quantity of social support offered, which includes both instrumental and emotional support (help with daily activities, transportation, and therapy). (Adam H., et al., 2016).

Methodology

A descriptive correlational design was conducted on breast cancer women. The study was carried out to assess the psychological states including depression, and anxiety, of breast cancer women and to find-out relationships between the psychological and social status of breast cancer women and their demographic characteristics including age, gender, marital status, education level, functional status, family income, family history about breast cancer, medical status, stage of the disease and type of therapy.

Instrument of the study

This protocol was provided with the research's instrument which was consisting of four parts: (I) a list of items for assessing demographical data of the participated breast cancer patients (II) breast cancer patients of medical status that includes the period of the diagnosis of breast cancer, the prevalence of the disease, the stage of breast cancer, and the type of treatment (III) Scale of The Hospital Anxiety and Depression Scale (HADS) performed well in both interviews and were strongly correlated with the external validation questionnaires (i.e., GAD-7 and MDI). (IV) the scale of WHO Quality of Life Scoring Domains (WHOQOL) of the Scale-Brief Domain 3 Social relationships.

Results Of the Study

This part describes the significant differences and relationships between study variables.

Table (1) Distribution of the Study Sample according to their Demographic Characteristics

List	Characteristics	F	%
1	Age (years) M±SD= 50±11.77	18 - 27	1 1
		28 - 37	15 15
		38 - 47	28 28
		48 - 57	31 31
		58 and more	25 25
		Total	100 100
2	Marital status	Single	19 19
		Married	57 57
		Widower	20 20
		Divorced	4 4
		Total	100 100
		Do not read and write	37 37
3	Level of education	Primary school graduate	14 14
		Intermediate school graduate	20 20
		Preparatory school graduate	7 7
		Diploma degree	6 6
		Bachelor's degree	3 3
		Higher education degree	13 13
4	Job	Total	100 100
		Housewife	76 76
		Employee	16 16
		Self-employee	5 5
		Not work	0 0
		Retired	3 3
		Student	0 0
		Total	100 100
		Sufficient	13 13
		Barely sufficient	36 36
5	Income	Not Sufficient	51 51
		Total	100 100
		Yes	54 54
6	Family history of injury by breast cancer	No	46 46
		Total	100 100

F= Frequency, %= Percentage, M= Mean, SD= Standard deviation.

Table (1) presented that the majority of the study sample were within the age group (48 – 57) years old with a mean age of 50 years, and also 57 percent of them were married. Related to the level of education, the highest proportion of the study sample 37 percent were not read and write. Moreover, the greatest percent (76 %) of the study sample were housewives. Approximately more than half of the study sample (51%) presented that they have insufficient income. Related to family history of breast cancer, 54 percent presented that they have a positive family history of this disease, and 29 percent presented with first-degree relatives with breast cancer. The highest percent (58 %) of the study sample lived in urban areas. Table 1 also presented that 32 percent of the study sample have 5 children and more, and 44 percent of the study sample used breastfeeding during child postnatal time.

Table (2) Assessment of Depression Status among the study sample

0	F	%
Normal	8	8
Mild depression	24	24
Moderate depression	51	51
Severe depression	17	17
Total	100	100

F= Frequency, %= Percentage. Normal patients without depression disorder scored as 7 and less, mild depression = 8 – 10, moderate depression = 11 – 14, severe depression = 15 – 21.

Table (2) presented that more than half of the study sample have moderate depression disorder and 17 percent have severe depression. This reflected a significant psychological disorder among the study sample.

Table (3): Assessment of Anxiety Status among the study sample

Anxiety	F	%
Normal	16	16
Mild anxiety	38	38
Moderate anxiety	42	42
Severe anxiety	4	4
Total	100	100

F= Frequency, %= Percentage

Normal patients without anxiety disorder scored as 7 and less, mild anxiety = 8 – 10, moderate anxiety = 11 – 14, and severe anxiety = 15 – 21.

Table (4) presented that the highest percent (44 %) of the study sample have moderate anxiety disorder and 38 percent have mild anxiety disorder. This also reflected that breast cancer affects the psychological status of the study sample.

Table (4): Social Status of the Study Sample

Social Domains	F	%
Social Relationships	Low	2
	Moderate	49
	High	49
Social Support	Low	16
	Moderate	58
	High	26
Sexual Behaviors	Not present	35
	Low	30
	Moderate	7
	Normal	28

F= Frequency, %= Percentage

Table (4) presented that (49) percent of the study sample have a moderate level of social

relationships. In addition, a significant percentage of the study sample (58 %) have moderate social support and 16 percent have a low level of social support. A significant percent (35 %) of the study sample has no sexual behaviors with their partner, while just 28 percent were presented with normal sexual behaviors.

Discussion

This part presents a discussion and explanation of the study results

Discussion of the Demographic Variables

Results show the study sample was within the age group (48 –57) years old with a mean age of 50 years, and also 57 percent of them were married. Related to the level of education, the highest proportion of the study sample 37 percent were not read and write. According to this study, breast cancer patients with low socioeconomic positions had poor quality of life.

Corresponding to the job of the study sample, the greatest percent (76 %) of the study sample were housewives. Related to family history of breast cancer, 54 percent presented that they have a positive family history of this disease, and 29 percent presented with first-degree relatives with breast cancer. The highest percent (58 %) of the study sample lived in urban areas. The study also indicates that the breast cancer in the urban area compared the rural areas people undergo treatment because of the availability of health centers in cities than in rural areas.

44 percent of the study sample used breastfeeding during the child's postnatal time

Discussion of the Psychological Status of the Study Sample

Results study show that more than half of the study sample have moderate depression disorder and 17 percent have severe depression. This reflected a significant psychological disorder among the study sample. And the prevalence of anxiety symptoms in the study group was about 73.3%. with (26.6%) of study samples having mild anxiety symptoms, (7.8%) had a low anxiety disorder, (23.4%) had high, (9.4%) had above moderate anxiety disorder, and (21.9%) had severe anxiety symptoms.

Discussion of the Social Status of the Study Sample

The results of the present study are that (49) percent of the study sample have a moderate level of social support. In addition, a significant percentage of the study sample (58 %) have moderate social support and 16 percent have a low level of social support.

Conclusions

Breast cancer patients can face psychosocial problems as well as affect the life and cure process of breast cancer patients

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