A study to assess mental stress factors among cancer patients attending OPD in selected hospitals, at Ahmednagar

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Abstract

A Quantitative approach was used for the present study and the data were collected from 30 cancer patients from Garud hospital at Ahmednagar, by using Non-probability purposive sampling technique. The structured observation schedule consisted Section A deals with socio-demographic data, Section B consists of 32 statements which relates to the assessment of mental stressors among cancer patients. Data was analyzed by using descriptive and inferential statistical in terms of mean, frequency distribution, and chi-square test. The study concluded that, among the sample majority (100%) of cancer patient had mild level of mental stress, 0% had moderate level of mental stress, and 0% had severe level of mental stress.

Keywords: stress, psychosocial, mental stress, cancer

Introduction

Cancer is a disease caused by an uncontrolled division of abnormal cells in a part of the body. Cancer is not a single disease with a single cause rather; it is a group of distinct diseases with different causes, manifestations, treatment and prognosis. Cancer nursing practice covers all age groups & nursing specialties & is carried out in a variety, acute care institutions, outpatient centers, rehabilitation and long term care facilities. The scope, responsibilities and goal of cancer nursing, also called oncology nursing, are as diverse and complex as those of any nursing specialty. Because many people associate cancer with pain and death, nurses need to identify their own reactions to cancer and set realistic goals to meet the challenges inherent in caring for patients with cancer. In addition, cancer nurses must be prepared to support patients and families through a wide range of physical, emotional, social, cultural and spiritual crises.

Mental stress describes what people feel when they are under Psychological, physical, or emotional pressure. People who have cancer may find the physical, emotional, and social effects of the disease to be stressful.

Cancer and stress disease are both characterized by a huge complexity, heterogeneity and multi-factorial pathogenesis. It is well accepted that cancer growth involves the microenvironment, a space where tumour cells receive nutrients from the host tissue, produce angiogenetic factors and form new vessels. Additionally the whole process is in a subtle equilibrium involving immune system through a myriad of pathways: cytokines, growth factors, receptors, hormones and adhesion molecules. Initially tumour is in a symbiosis/parasitosis status in the host organism that tolerates it, and then growth factors and microenvironments changes led to invasiveness with “tumour escape”. Epidemiological and clinical studies over the past 30 years have provided strong evidence for links between chronic stress, depression, social isolation and cancer progression. By contrast, there is only limited evidence for the role of these behavioral factors in cancer initiation. Recent cellular and molecular studies have identified specific stress-induced signaling pathways that impact on cancer growth and metastasis.

The psychosocial and behavioral aspect of cancer has increased steadily over the last 40 years. Anxiety along with the depression, has been described has the most common psychosocial reaction among clients with cancer. It is vital to realize that each client diagnosis with cancer reacts to the diagnosis differently and has unique concerns and problems regarding the diagnosis and treatment. Each client copes with the cancer experience.
in his or her own way. Cancer can have a serious impact on patient well-being and quality of life. The international literature reports a higher existence of psychosocial problems among oncologic clients primarily problems associated with difficulties in the family, duties in the household, work and leisure, sexuality and finances and emotional distress. A considerable proportion of oncology patients experience significant levels of distress. This distressed patients also have unmet needs of psychosocial support. The important psychosocial problems and psychiatric disturbances that have been reported in oncology underlines the need for a comprehensive psychosocial support of cancer patients and their families. Psychosocial support is designed to preserve, restore or enhance quality of life. The impact of cancer on patients brought psychosocial problems like difficulties in the family, smoking, alcohol abuse, work and leisure, social isolation, dependency, financial crisis. The psychosocial problems are leading for major psychiatric problems in oncologic clients. The researcher has personally witnessed the diagnosis of cancer in many cases provokes a crisis resulting in an increase of regression and defense mechanism. The most of the oncologic clients undergone the psychological problems and social problems. The psychological problems are depression, anxiety, thought of death, insomnia, hopelessness. The social problems are social isolation financial crisis, dependency on family members. This motivated the researcher to assess the selected mental stress problems among oncologic clients.

**Objectives of the Study**

1. To assess the mental stress factors among cancer patients attending OPD in selected hospitals, at Ahmednagar.
2. To find the association between mental stress factors and related to demographic variable.

**Operational Definitions:**

**Assess:** Assess is the identification of the mental stress factor experienced by the cancerous patient receiving initial course of various therapies and which are assessed with help of structured questionnaires.

**Mental stress:** Describe what people feel when they are under psychological, social, emotional, economical pressure. People who have cancer may find the psychological, emotional, economical and social effects of the disease to be stressful.

**Cancer:** Cancer is the group of diseases involving abnormal cell growth with the potential to invade or spread to other parts of the body.

**Cancer Patient:** Patient who are suffering with cancer.

**Methodology:**

**Research Approach:** A quantitative approach.

**Research design:** Descriptive exploratory research design.

**Research Setting:** Garud Cancer Hospital, Ahmednagar.

**Population:** The population of the study were different type’s cancer patients.

**Sample:** Different types of cancer patients from Garud hospital, Ahmednagar district were selected.

**Sample size:** 30 different types of cancer patients of Ahmednagar district.

**Sampling Technique:** Purposive sampling technique was used in this study.

**Criteria for Sample Selection:**

**Inclusion Criteria:**

1. Different type of cancer.
2. Able to read and understand Marathi, Hindi or English.
3. Who are responding and interested?
4. Available at the time of the study.

**Exclusion Criteria:**

1. The patients who have the other diagnosis.
2. The patients who are not willing to participate in the study.

**Major Findings of the Study**

The following are the major findings of the study:

Majority of 40% (12) of cancer patients were in the age group above 58 year.70% (21) were females,40% (12) were illiterate, 56.67% (17) were from agriculture, 63.33% (19) were belongs to joint family,43.33% (13) had monthly income of Rs 1617-2785,96.67% (29) were married, 66.67% (20) had family history of cancer,33.33% (10) had the history of addictive drugs,30% (9) were suffering from breast cancer,96.67% (29) had duration of cancer ≤6 months-12 months,86.67% (26) were suffering from Stage 1, 66.67% (20) of cancer patients receiving surgery type of treatment,100%(30) were receiving treatment from private hospital.

<table>
<thead>
<tr>
<th>Level of Mental stress (Category)</th>
<th>Criteria</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mild</td>
<td>&lt;50</td>
<td>100%</td>
</tr>
<tr>
<td>Moderate</td>
<td>&gt;50 &amp; 75</td>
<td>0%</td>
</tr>
<tr>
<td>Severe</td>
<td>&gt;75</td>
<td>0%</td>
</tr>
</tbody>
</table>

Findings showed that, among the sample majority (100%) of cancer patient had mild level of mental stress, 0% had moderate level of mental stress, 0% had severe level of mental stress. Chi-square test was computed in order to determine the significance of association between mental stresses and related to demographical variable. There was no significant association found between their demographic variables like, age, gender, educational qualification, occupation, type of family, family history of cancer, personal habit, type of cancer, duration of cancer, type of treatment, marital status, monthly income in Rs, place of seeking treatment and mental stress.

**Conclusion**

Findings showed that, among the sample majority (100%) of cancer patient had mild level of mental stress, 0% had...
moderate level of mental stress, and 0% had severe level of mental stress.

**Nursing Implications**
Nursing is a service-oriented profession and it must advance and keep pace with the advancing technology, newer problems, and growing demands of consumers. The findings of the study have thrown new light on the implications of the future. It has implication related to nursing practice, nursing education, nursing administration, and nursing research.

**Nursing Education**
Education is the key to the development of excellent nursing practice. Education faces tremendous challenges in keeping pace with changes in nursing practice to maintain its high quality. Nurses must be lifelong learners and they should be given an opportunity for continuing education. Nurses with higher education deliver cost-effective care.

The nursing curriculum should emphasize on imparting health information to community using different teaching methods. So nursing students should be educated on health promotion activities.

Nurse educators need to organize regular short-term training programmes, workshops, etc., with support of nursing administrator for the nurses about menstrual hygiene practices.

Nurse educations must prepare students to play a useful role in the total health care of the person instead of disease.

Nurses can assess the mental stress of the cancer patient and stress factor.

**Nursing Practice**
Nurse can play an important role in disease prevention and health promotion. Education programmes with effective teaching strategies and audio-visual aids motivates the people to follow healthy practices in day-to-day life, involving changes in lifestyles.

More health education activities can be initiated among cancer patient to cope with stress.

**Nursing Administration**
Nurses need to involve more actively in educating, and giving more education regarding how to cope with cancer. Nurse administrator should plan, the health education about coping with cancer.

**Nursing Research**
The essence of the research is to build a body of knowledge in the nursing. The findings of the present study serve as the basis for the professional and the students to conduct further studies. The generalization of the study result can be made by replication of the study; nursing research is the means by which nursing profession is growing.

**Recommendations**
Keeping in view the findings of the present study, the following recommendation were made:

1. A similar study can be replicated on a sample with different demographic characteristics.
2. The study can be done in large sample.
3. A similar study can be replicated with control group.
4. An explorative study can be done on cancer.
5. Comparative study can be done in urban area.

**References**