

A Study to Assess the Level of Anxiety among Cancer patients at Krishna Hospital, Karad

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Abstract: Anxiety is an unpleasant emotion expressed by words such as worry, apprehension, terror and fear. To many patients, stunned by the diagnosis, suffering numerous losses and discomforts, moved from one place to another for one procedure after another, the experience is bewildering and frightening¹. **Objective** is to assess knowledge of level of anxiety among cancer patients and to find out the significant association between socio-demographic variables and level of anxiety among cancer patients. The present study non-experimental descriptive design. **Methodology:** Descriptive approach was used for the study. Purposive sampling technique is used to select Samples of cancer patients admitted at Krishna Hospital. **Findings:** 32 (64%) of samples are studied til secondary education, 8 (16%) samples are having service and 6 (12) samples are working on Daily wages. 41 (82%) of samples are belongs to hindu religion, 3 (6%) samples are Muslim and 6 (12) samples are belongs to other religions. 36 (72%) of samples are belongs to farmer occupation, 8 (16%) samples are having service and 6 (12) samples are working on Daily wages. 42 (84%) of samples are belongs to above 45 years of age and 8 (16%) are within 35 to 45 age group. 74% cancer patients are having moderate level of anxiety, 24% of patients are having severe level of anxiety. There was no significant association between level of anxiety & demographic variables.

Keywords: assess level, anxiety, cancer, patient

1. Introduction

Anxiety is an unpleasant emotion expressed by words such as worry, apprehension, terror and fear. Studies show that hospitalization and treatment environment are important causes of anxiety². Besides, when patients are hospitalized for diagnosis purpose, the anxiety increases. Following screening test, waiting for test results, receiving a diagnosis of cancer, undergoing cancer treatment, or anticipating a recurrence of cancer one may experience anxiety. To many patients, stunned by the diagnosis, suffering numerous losses and discomforts, moved from one place to another for one procedure after another, the experience is bewildering and frightening¹. It is only recently that oncologists in general have begun to recognize the emotional impact of these ordeals and the fact that emotional states play a role in the tolerably of the treatment, the quality of life perhaps, the outcome of cancer as well²

2. Statement of Problem

“A Study to assess the level of anxiety among cancer patients at Krishna Hospital, Karad.”

3. Objective

- 1.To assess knowledge of level of anxiety among cancer patients.
- 2.To find out the significant association between socio-demographic variables and level of anxiety among cancer patients.

4. Research Methodology

- **Research Methodology:** Methodology of research includes the general pattern of organizing the procedure and gathering valid and reliable data for problem under investigation.
- **Research Approach:** In the view of nature of problem selected for study and the objective to be accomplished, descriptive approach was considered appropriate for the study.
- **Research Design:** The present study non-experimental descriptive design.
- **Research Setting:** The research setting selected for study is Krishna hospital Karad.
- **Population :** The target population for the study are patients at Krishna Hospital, Karad
- **Sample :** For the present study samples are cancer patients admitted at Krishna Hospital, Karad
- **Sample Technique:** Purposive sampling technique is used for the present study.
- **Sample Size :** 50 cancer patients at Krishna Hospital, Karad

5. Method of Data Collection

A Structured questionnaire was applied to collect data.

6. Description of Tool

Considering setting of the research study and characteristic of the subject a structured questionnaire was prepared after an expensive review of literature and observation field.

The final tool was organized in two section

Section A: Socio-demographic variable

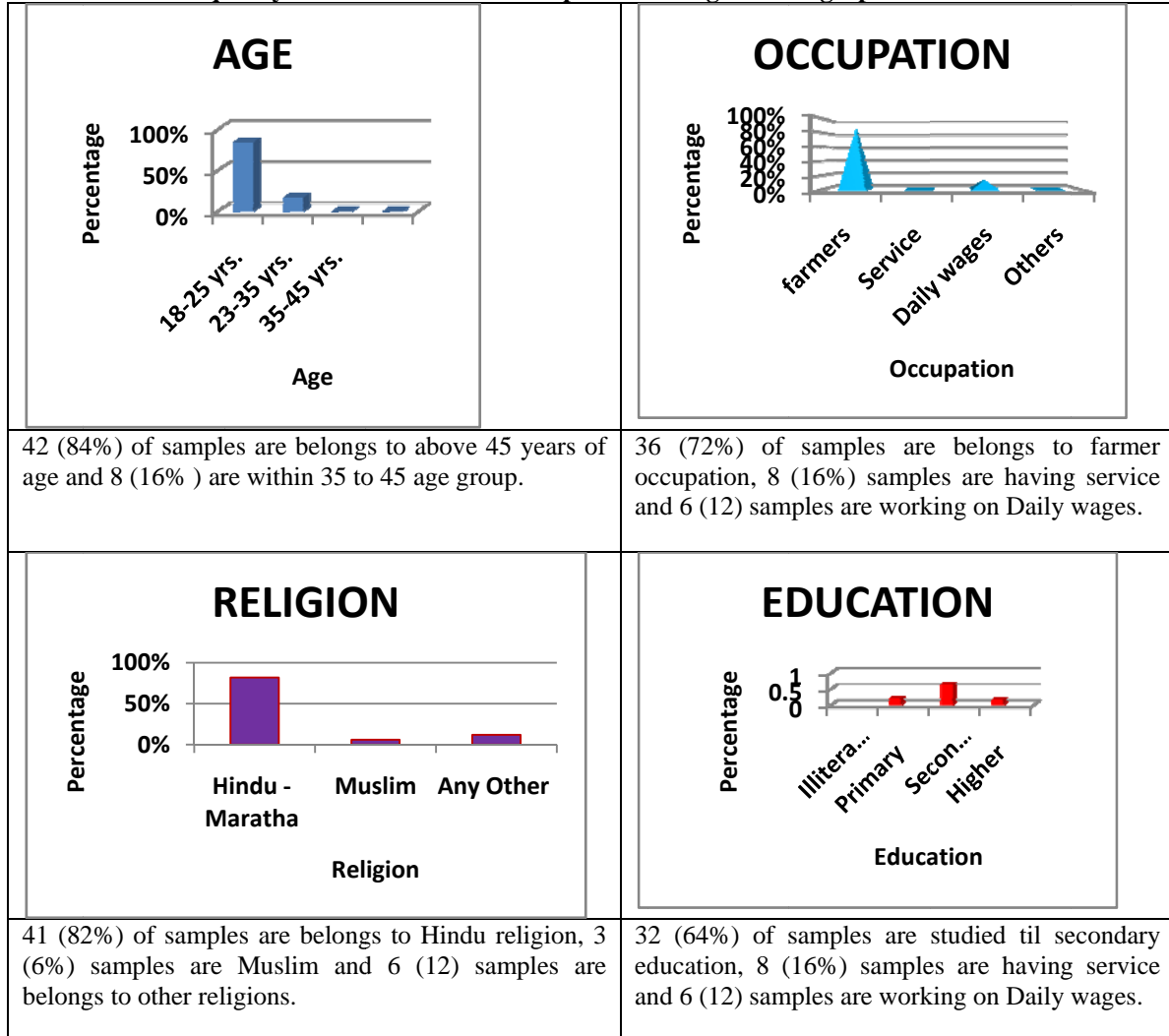
Section B: 30 items questions assessing level of anxiety among cancer patients.

Structures questionnaire prepared by investigator on socio-demographic variable and assessing level of anxiety among cancer patients. and it is distributed to the cancer patients to collect the appropriate response from them.

7. Procedure for the Data Collection

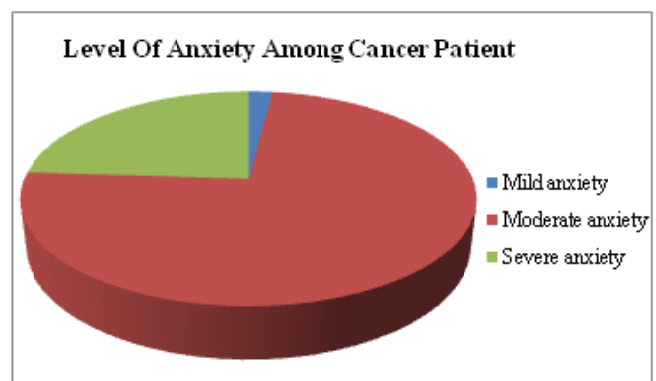
8. Analysis and Interpretation

Frequency and Distribution of Sample According to Demographic Variables



Level of anxiety among cancer patients

Sr. No.	Level of anxiety	Frequency	Percentage (%)
1.	Mild anxiety	1	2 %
2.	Moderate anxiety	37	74 %
3.	Severe anxiety	12	24 %



The above mention graph showing that the 74% cancer patients are having moderate level of anxiety, 24% of patients are having severe level of anxiety.

Association of Anxiety With Demographic Variables.

Sr. No.	Demographic Variables	Level of Anxiety		Chi. Square	DF	Inter-ference
		<Moderate	<Severe			
1	Age in years			0.4192	1	Not Significant
	•Below 25	20	22			
	•Above 25	06	02			
2	Occupation			0.6365	1	Not Significant
	•Farmers	22	22			
	•Others	04	02			
3	Religion			0.2510	1	Not Significant
	•Hindus	22	19			
	•Others	04	05			
4	Education			0.7211	1	Not Significant
	•Upto primary	04	06			
	•Above primary	22	18			

The data presented in table no. 5 reveal that there was no significant association between level of anxiety & demographic variables.

9. Discussion & Conclusion**9.1 Major Finding**

This chapter deals with major findings discussion summary of the study the conclusions drawn & nursing implication of the study on different aspect of nursing like Nursing Administration, Nursing practice, Nursing education, Nursing research it clarifies the limitations of the study & suggests recommendation for further research. The study was undertaken with the purpose to determine the level of anxiety among cancer patients.

9.2 Findings

- 32 (64%) of samples are studied til secondary education, 8 (16%) samples are having service and 6 (12) samples are working on Daily wages.
- 41 (82%) of samples are belongs to hindu religion, 3 (6%) samples are Muslim and 6 (12) samples are belongs to other religions. 36 (72%) of samples are belongs to farmer occupation, 8 (16%) samples are having service and 6 (12) samples are working on Daily wages.
- 42 (84%) of samples are belongs to above 45 years of age and 8 (16%) are within 35 to 45 age group.
- 74% cancer patients are having moderate level of anxiety, 24% of patients are having severe level of anxiety.
- there was no significant association between level of anxiety & demographic variables.

9.3 Discussion

Chen. A. M. et al conducted a study in Sacramento about psychosocial distress among 40 patients (25 women and 15 men) patients undergoing radiation therapy for head and neck cancer. All the patients completed the Hospital Anxiety and Depression Scale (HADS) and Beck Depression Inventory -II (BDI-II) instrument before radiation therapy, during the last day of radiation therapy, and at the follow-up visit. They found that the variables like employment status (working at enrollment), younger age (<55 years), single

marital status and living alone were playing a major role in the level of anxiety.¹³

Tian. J., Chen. Z. C., Hang. L. F. conducted a study in China about the effects of nutritional and psychological status in gastro intestinal cancer patients on the tolerance of treatment. They conducted among 182 cancer patients for the period of 14 months. Food frequency survey method, state-trait anxiety inventory (STAI) and depression status inventory (DSI) were used to obtain information about psychological status. The adjusted relative risk (RR) for Albumin, protein intake and anxiety was 3.30(95% CI: 1.08, 10.10, P=0.03), 3.25 (95% CI: 1.06, 9.90, P= 0.04) and 1.48 (95% CI: 1.29, 1.70, P < 0.0001), respectively. So, they confirmed that both poor nutritional status and psychological status were the independent risk factors for severe side effects of cancer treatment (chemo therapy and radiation therapy), and have an impact on the recovery of physical performance status in patients after the treatment.¹⁴

Lee. P. W. et al conducted a study in Hong Kong about the impact of naso-pharyngeal cancer and radiation therapy on the psychosocial condition among 70 Chinese patients (46 men and 24 women). Physical and psychological adjustments were measured by Rotterdam symptom checklist, Beck Anxiety Inventory, Perceived stress scale and the 36-Item short form health survey (Survey-36). The percentage of fear of dying and anxiety were reduced from 28% from pre radiotherapy to 2% at one year. So they proved that the period from the diagnosis to two months of post radiation therapy was a high risk period both physically and emotionally.¹⁵

Korfage. I. J. et al conducted a study in Netherlands about anxiety and depression among prostate cancer patients. They conducted this study among 299 patients and follow-up was done for five years. Respondents completed four assessments (pretreatment, at 6 and 12 months, and at 5-year follow-up). Among men treated by radiation therapy, 27% reported clinically significant levels of anxiety while 20% was expected in a general population. So they predicted that the anxiety levels were high in pre-radiation therapy patients and were gradually decreased according to the duration of treatment.¹⁶ Comparing with above results our study has showed that 74% cancer patients are having moderate level of anxiety, 24% of patients are having severe level of anxiety and there was no significant association between level of anxiety & demographic variables.

10. Conclusion

Recent research has reiterated the prevalence of anxiety in cancer patients and identified subpopulations who warrant closer scrutiny. Further research is essential, as well as the education of oncology healthcare professionals and family practitioners with regard to at-risk patients, and the importance of a psychological well being of cancer clients. Communication with the patient remains the main diagnostic approach to assessing anxiety. A discussion on the reasons for the patient's anxiety can lead to an understanding of how the patient perceives the disease, how she is coping and to identify symptoms for diagnosis.

11. Nursing Implication

The findings of the study have varied nursing implications in different areas of Nursing Administration, Nursing education and research.

1) Nursing Administration :

- The present study would help the nurse to develop an understanding about the knowledge about the anxiety among cancer patients.
- The nurses working in the oncology unit in Krishna Hospital, Karad are identify the factors affecting the anxiety of cancer patients.

2) Nursing Education :

- On going in service training help to promote and enhance practical skill to improve the knowledge of the anxiety among cancer patients and providing comprehensive care to the patients

3) Implication to the Nursing Research :

- The nurse researches can further plan implement evaluate a planned interventional program among cancer patients about reducing anxiety.

12. Limitation

1. In this study the cancer patients who are having multigravida as well as having primi para restricted.
2. The present study is having above mentioned limitation.

13. Recommendation

The following recommendations are affect for further research.

1. A similar study with large sample can be use to make a broad generalization.
2. A study can be conducted to find out the causes of anxiety.
3. A study can be conducted to find out the factors affecting poor quality of life due to anxiety.
4. A study can be conducted to find out the relation between socio-demographic variables and level of anxiety
5. A study can be replicated among different areas.

References

- [1] Roose SP. Depression, anxiety, and the cardiovascular system: the psychiatrist's perspective. *J Clin Psychiatry*.2001;62(Suppl 8):19–22
- [2] Salsali M. 2nd ed. Tehran: Azad Publication; 1996. CCU nursing and coronary heart disorders and cardiac intensive cares principles.
- [3] Ignatavicius, Donna D Workman, Linda M. "Medical Surgical Nursing", (2002) 2nd ed ; Saunders publications; Philadelphia 187-192.
- [4] Suddarth's and Brunner, "Medical Surgical Nursing", 9th ed; Lippincott publications; Philadelphia 868-873.
- [5] Han B, William E, Haley. Family care giving for parents with stroke, prevalence of caregiver depression. *Stroke* 1999;30:1478-85.
- [6] Pochard F, Darmon M. Symptoms of anxiety and depression in family member of ICU. *J Crit Care* 2005 Mar;20(1):90-6.

- [7] Steven H, Schulz R. Prevalence and outcomes of caregivers after prolonged mechanical ventilation in ICU. *Chest* 2011 Dec;140(6).
- [8] Johansson I, Frinlund B, Hildergn C. Coping strategies of relatives. *Intensive and Critical Care Nursing* 2004;24:281-91.
- [9] Lariara S. Principles and practice of psychiatric nursing. 8th ed. New Delhi: Elsevier; 2005.
- [10] Benzur H, Zeinder M. Coping patterns and affective reaction under community crisis. *Anxiety, stress and Coping* 1995;8(3):185-201.
- [11] Kulkarni HS, Mallampalli A, Parker SR, Kainad DR, Guntapalli K. Psychological impact of an ICU admission on relatives of patients in American and Indian hospital. *Indian Journal of Critical Care Medicine* 2011;15(3):147-56.
- [12] Nazario. Why do women cope with stress better than man, 2006. [online].
- [13] Vidhubala et al. (2006). Coping preferences of Head and Neck cancer Patients. Departments of psycho-oncology, cancer Institute (WIA). Adyar. Chennai., 6-11pp
- [14] Chen. A. M. et al. (2009). Prospective study of psychosocial distress among patients undergoing radiotherapy for head and neck cancer. Department of Radiation Oncology, University of California, Sacramento, USA. 187 – 93 PP.
- [15] Tian. J. Chen. Z. C. Hang. L. F. (2007). Effects of nutritional and psychological status in gastrointestinal cancer patients on tolerance of treatment. Department of Epidemiology and Health Statistics, Fujian Medical University, China. 4136 – 40 PP.