

QUALITY OF LIFE IN PATIENTS WITH CARCINOMA OF THE MAMMARY GLAND



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According to statistics, oncological patients are over 400 thousand. According to Prof. Avramov, along with the families affected by their severe illness, this makes about 1.5 million Bulgarians. /BAS, Feb. 2017/

The number of cancer patients in Bulgaria is growing twice as fast as compared to Europe. Patients with oncological diseases in our country have increased by 60% in 14 years

/ October 2016/

In Bulgaria there is a dramatic increase in the number of new cases of oncological diseases. This was said by Dr. Nils Wilking of the Carolinian Institute in Stockholm, who presented a comparative report on patient access to oncology drugs in Europe at a round table.

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Mammary gland cancer comprises 25% of all malignant diseases and ranks second for the reasons of oncologic diseases' mortality. In the last years, the mortality of this cancer type decreases; the reported decrease is more than 30%.

This decrease is a result of the improved diagnostic and therapeutic mechanisms and of the diagnostic tumor detection in an earlier stage. Life quality is linked to health and focuses the diagnosis impact on patients.

I. The target of this survey is to determine the morbid process impact on life quality of women with mammary gland cancer.

II. Materials and methods. Questionnaire about the life quality EORTC QLQ-C30 (Life Quality Questionnaire-Core 30 by European Organization for Research and Treatment of Cancer / EORTC/ QLQ-C30). EORTC QLQ-C30 is used to assess the life quality in cancer patients.

Breast cancer module: QLQ-BR23 is applied to the first part. The results were statistically processed by StatGraf.

The questionnaire was applied to 37 patients with mammary gland cancer complying with the voluntary and anonymous principles. Average age is 53.9 years.

II. Results. 24 (65%) of women have small impediments while executing their daily physical tasks. 7 (19%) of women face frequent impediments and 3 (8%) of women have pronounced impediments. Considerable part of the women with oncologic disease define themselves as a "high-spirited person".

They try to maintain activities of behavioral patterns, that comprise some automatisms and that were used before the disease. Similar result is being noticed also for "role function" index. The pain as a result of the disease or the accompanying therapy does not pose a serious problem with most women, who endure it. Significant changes in the cognitive functions are not monitored. 13(37%) of women have disturbances in the family relations as they have been changed due to the disease.

Answers to the questions of global healthcare status show that in bigger percent of women (25/69%) it is not pulled down and they have life quality identical with the one before their disease.

Four questions from the questionnaire of life quality of women pay attention to "body image" of women. 30(81%) of them reply that they feel discontent, they do not feel attractive and complete as women; they have difficulties to look at themselves when undressed. They develop inferiority complex and lack of femininity.

20(54%) of the questioned women are strongly worried of their future health. Others 16(43%) are worried, but to a lesser degree and only 1 patient (3%) does not worry.

Bigger parts of the questioned women (24/65%) are not sexually active, i.e. there are problems in the sexual function. More than 2/3 of the questioned painfully endure the side effects of chemotherapy.

A positive statistic relation was stated between pain syndrome and role dysfunction $r=0.50$, $p=0.01$; when pain syndrome is more distinctively expressed then the disturbances in execution of habitual daily activities are stronger.

Between the disease history and chemotherapy side effects is a found positive dependence ($r=0.34$, $p=0.05$).

The stronger the chemotherapy side effects are expressed, the more dissatisfied with their bodies are the questioned women ($r=0.93$, $p=0.00$).

Strong significant relation is being proved between body image and symptoms on behalf of the hand ($r=0.84$, $p=0.00$).

IV. Conclusion. Presence of high levels of health worries in the present moment and in future, the marked dissatisfaction with body image, and the low, or missing sexual life do effect seriously the life quality satisfaction on daily level.

These conclusions persuasively support the holistic approach to cancer patients that includes provision of psychological, emotional and spiritual support alongside with the anti-tumor treatment. This support is necessary for the cancer patients, for their families and relatives, and it improves life quality and resocialization process.

