



Prevalence of Anxiety and Depression among Cancer Patients

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Abstract

Background: Depression and anxiety have negative effects on the quality of life of cancer patients, thus hospital anxiety and depression scale (HADS) is a useful instrument for screening these problems. This research was performed to assess the prevalence of anxiety and depression among cancer patients.

Methods: One hundred twenty patients with the diagnosis of different cancers in IGIMS, Patna were assessed. Purposive sampling was done to collect the data. Hospital Anxiety and Depression Scale (HADS) was used to assess the anxiety and depression respectively.

Results: Result shows that 56.7% and 64.2% patients were suffering from anxiety and depression respectively. 54(45.0%) & 14 (11.7%) patients had mild and severe anxiety respectively. 29 (24.2%), 39 (32.5%) and 2 (1.7%) patients had mild, moderate and severe depression respectively. There were significant relationships in relation to family history, past history and socio economic history with anxiety and depression.

Conclusion: There is a need to develop an evidence base practice to introduce interventions as untreated anxiety and depression can lead to significant morbidity. The results show that patients with cancer had the prevalence of anxiety and depression among all type of cancer patients. Therefore, continuous screening for anxiety and depression is recommended as a necessary approach for good cancer care.

Keywords: Cancer, Anxiety & Depression.

Introduction

Depression and anxiety are not uncommon among people diagnosed with cancer. Stress is often a trigger for depression and anxiety, and cancer is one of the most stressful events that a person may experience. These conditions may interfere with cancer treatment. For example, the patients with

untreated depression or anxiety may be less likely to take his cancer treatment medication and continue good health habits because of fatigue or lack of motivation. They may also withdraw from family or other social support systems, which means they will not ask for the needed emotional and financial support to cope with cancer. This in

turn may result in increasing stress and feelings of despair¹. Routine screening for distress is internationally recommended as a necessary standard for good cancer care². Hospital anxiety and depression scale (HADS) is a useful instrument for screening depression and anxiety in clinical settings. It was developed by Zigmond and Snaith in 1983. Its purpose is to provide clinicians with an acceptable, reliable, valid and easy to use practical tool for identifying and quantifying depression and anxiety³.

Material & Methods

The study consisted of 120 cancer patients attending to OPD department at IGIMS, Patna, Bihar during study period July- September 2015.

Research Approach and Design: Quantitative approach and non-experimental research design was used to conduct the study.

Assumption: Psychiatric morbidity symptoms are common in chronic medical disorder.

Selection of the field for study: Study was conducted in OPD, Dept. of Regional Cancer Centre, IGIMS, Patna, Bihar.

Population: Target population of the study was Cancer patients.

Sample and Sampling Technique: Sample size was 120 patients. Purposive sampling was be used for data collection.

Inclusion Criteria

- Patients suffering with cancer and are willing to undergo study.

Exclusion Criteria

- Patients having treatment history of psychiatric illness.
- Patients who were no willing to participate in the study.

Tools

- Demographic Bio-Data
- Hospital Anxiety and Depression Scale (HADS)

Results

Out of 120 patients as regard to gender 48.3 % were male and rest 51.7% were female. As regard to habitat 56.7% from rural and 43.3% from urban. There were statistical significant relation ($p=0.005$ & $.000$), ($p=0.000$ & $.000$) & ($p=0.030$ & $.000$) was found with Family History, Past History & Socio Economic Status with depression and anxiety respectively among cancer patients. Gender & Duration of Illness was found statistically significant ($p=0.017$) & ($p=0.042$) with depression and anxiety respectively among cancer patients.

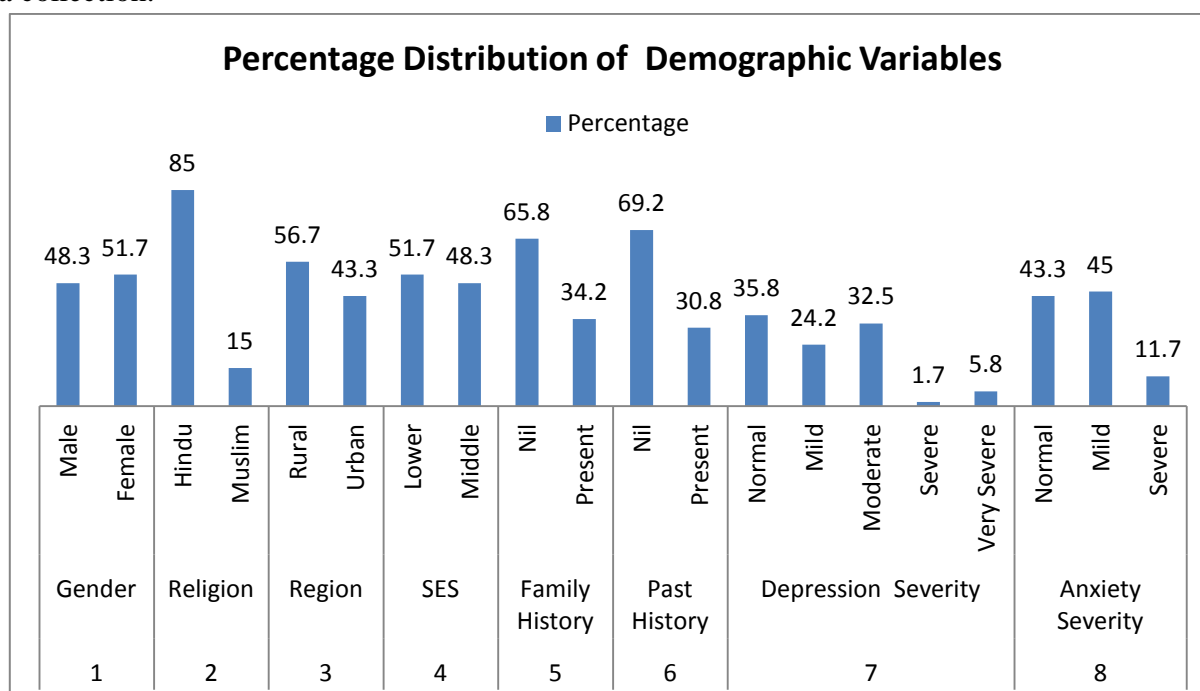


Table: 01 Mean Anxiety and Depression Score Among Cancer Patients According To Gender
N=120

Gender	n	Anxiety Score		Depression Score		Df
		Mean	SD	Mean	SD	
Male	58	18.72	7.85	10.05	3.92	118
Female	62	17.41	6.70	12.58	6.98	
		't'= .329		't'= .017		

Table: 02 Percentage Distribution and Rank Order of Depression Among Cancer Patients According To Levels of Depression
N=120

Levels	Scores	Cancer Patients		Rank
		n	%	
Normal	0 - 7	43	35.8	1
Mild	8 -13	29	24.2	3
Moderate	14- 18	39	32.5	2
Severe	19-22	2	1.7	5
Very Severe	≥23	7	5.8	4

Maximum Score =53

Minimum Score = 0

Discussion

Present Study result shows that 56.7% and 64.2% cancer patients were suffering from anxiety and depression respectively.

Study conducted by Hassan et al⁴ found that the prevalence of anxiety and depression was 31.7% and 22.0% respectively. Study conducted by Vahdaninia et al⁵ found that 38.4% of the patients experienced severe anxiety and 22.2% had severe depression. One study on a large sample of cancer patients reported that the prevalence of depression among breast cancer survivors was about 32.8%⁶. Prevalence of anxiety and depression among the breast cancer patients was 37.0% (n=74) and 28.0% (n=56) respectively⁷. Further it is supported by study results that prevalence of depression and anxiety was 52.2% and 65.6% in cervical cancer patients⁸. Hong reported that depression prevalence rates were 66.72 % among cancer patients⁹.

Further present study revealed that 54 (45.0%) & 14 (11.7%) patients had mild and severe anxiety respectively. 29 (24.2%), 39 (32.5%) and 2

(1.7%) patients had mild, moderate and severely depressive symptoms respectively.

Study result reported that Forty-four (29.3%) patients had mild anxiety, 25 (16.7%) symptomatic anxiety but mild and symptomatic depression were seen in 40 (26.7%) and 32 (21.3%) patients, respectively¹⁰. Other study stated that out of 20 cancer patients with anxiety, 14 (28.0%) had mild anxiety and 6 (12.0%) had moderate anxiety & 4 (8.0%) had mild depression, 8 (16.0%) had moderate depression & 2 (4.0%) had severe depression¹¹.

Further present study result shows that there were statistical significant relation ($p=0.005$ & $.000$), ($p=0.000$ & $.000$) & ($p=0.030$ & $.000$) was found with Family History, Past History & Socio Economic Status with depression and anxiety respectively among cancer patients.

Study results revealed strong & significantly association of anxiety & depression with monthly income ($p=0.001$) & ($p=0.017$), and financial support ($p=0.041$) & ($p=0.002$) among cancer patients respectively⁷. In a study conducted by

Hassan et al⁴ found monthly income was associated with anxiety; whereas financial support was associated with depression.

Furthermore present study result revealed that Gender & Duration of Illness was found statistically significant ($p=0.017$) & ($p=0.042$) with depression and anxiety respectively among cancer patients.

This result is supported by study result that females were more depressed ($P=0.008$) but less anxious than males ($p=0.020$)⁹. However, it is contraindicated by study result that there was no significant relationships between anxiety and depression with sex of the patients ($p>0.05$)¹⁰.

Financial support and sponsorship: Nil

Conflicts of interest: Nil

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