

Social Activities of Patients with Oncological Diseases

Milena Karcheva^{1§} and Silvia Tcvetkova²

¹Associate Professor, Department of Epidemiology, Medical University-Pleven, Bulgaria

²Associate Professor Section of Pedagogy and Psychology, Medical University-Pleven, Bulgaria

Abstract— *Aim of the research is to determine the specific character of the social-behavioral functioning of patients with oncological diseases by focusing and analyzing the results of patients with carcinoma of the cervix.*

Methods: *A sociological survey among 150 patients with malignant neoplasms has been done, in which the principles of confidentiality and informed consent were strictly followed. In accordance with the topic, the results of 41 women with carcinoma of the cervix have been commented.*

Results: *According to the limitation of the diagnosis most of the women are registered with a disease up to 6 months (19/46%) and up to 1 year (14/34%). 23 (56%) are not working at the moment of the survey, 18 (4%) – are working. There is a positive correlation between the active contacts of the patients with their families (59% of the surveyed mentioned this) and the statement that the communication with the others is meaningful when it enriches them ($S=0.25$, $p=0.01$) and a negative one with the statement that the number of people is important in the communication ($S=-0.55$, $p=0.001$). Age has a significant relation to the presence of a preferred activity/hobby, connected with movement and physical efforts ($S=0.38$, $p=0.03$). Patients who are in close contact with their relatives are certain that it is absolutely important to be active today and tomorrow ($S=0.73$, $p=0.000$).*

Conclusions: *Psycho-therapeutic interventions must be addressed to those topics which can improve the quality of life, decrease the distress level and lengthen the patient's life.*

Key words: *Oncological Diseases, Social Activities*

I. INTRODUCTION

Worldwide tendency of increase of the cancer rate is alarming. The analysis of the statistics is being done on the background of a low population growth rates and the population's advanced age.¹ The prognosis in the absence of timely preventive action for cancer is that by 2030, 21 million new cases will be registered worldwide, 13 million of them with a lethal outcome. The increase of the cancer and mortality rate is indisputable.²

World Health Organization, reporting each year the considerable increase of the cancer rate getting seriously concerned about the interdisciplinary therapeutic measures for prophylactics, early diagnostics and treatment³. In 2014 in Bulgaria a total of 18110 people died of malignant neoplasms, the number increasing progressively after the age of 45, and in the case of carcinoma cervix – after the age of 40.⁴

Concept of having an interdisciplinary team participating in the diagnostics and the treatment of the patients is still new in Bulgaria.⁵ The social support and the social activity of patients diagnosed with a malignant disease stimulate the psychological resources to overcome the distress;⁶ they mobilize the cognitive and practical skills, which strengthen the external and internal mechanisms for motivation and personal fulfillment.⁷

Aim of this research is to determine the specific character of the social-behavioral functioning of patients suffering oncological diseases by focusing and analyzing patients with carcinoma of the cervix.

II. METHODOLOGY

A cross-sectional sociological survey was conducted of 150 patients with malignant neoplasma cases in year 2011 i.e. 1st Jan 2011 to 31st Dec 2011 in Bulgaria. Confidentiality of patients were maintained and duly written inform consent was taken from patients to be included in this study.

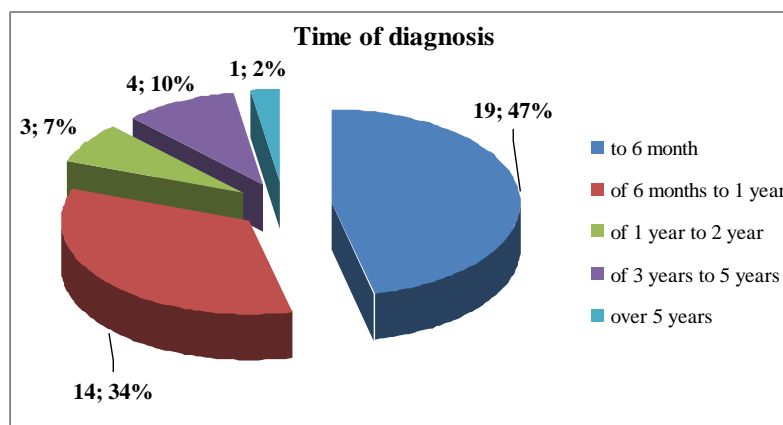
In accordance with aims and objectives of the research, our of these 150 malignant neoplasma cases, 41 women with carcinoma of the cervix have been reported. These 41 cases of carcinoma cervix were further evaluated as per aims and objectives of the study.

Statistical analysis: Data obtained was entered into Microsoft Excel worksheet 2007 as master chart and analyzed using a Stat Graf statistical program. Frequencies were obtained using descriptive statistics.

III. RESULTS

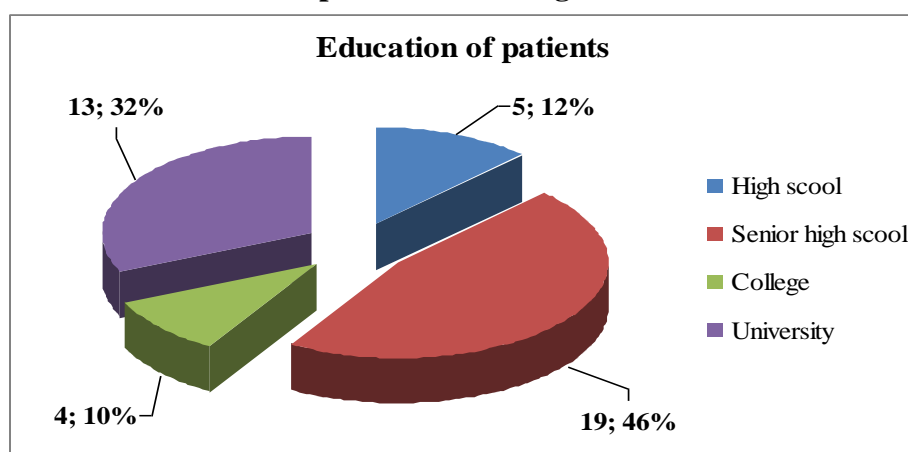
Biosocio-demographic data of this study shows that 26 (63%) of them lack concurrent and registered diseases. According to the timing of the diagnosis the patients with a registered disease up to 6 months (19/46%) and up to 1 year (14/34%) is higher (Fig.1).

Figure 1
Distribution of patients according to the timing of diagnosis



It was also observed that 23 (56%) people weren't employed at the time of the study, 18 (44%) were employed. (Fig 2)

Figure 2
Distribution of patients according to their education



As seen in Table 1, 24 (56%) of the survey participants have explicitly confirmed that they share in with their family and have good friends. The distribution of the answers to the second statement shows that there is no change in the communication skills before and after the disease in 23 (56%) of the surveyed participants, while in 18 (44%) participants this change is a fact. Seeking social support is a reason to conduct an in-depth analysis in regards to whether this need is met by the circle of family and friends.

Table 1
Distribution of patients according to the answers to the three statements

<i>Scale</i>	<i>Share with their relatives</i>		<i>Lately, she has been more social than before</i>		<i>She has good friends</i>	
	<i>Number</i>	<i>%</i>	<i>Number</i>	<i>%</i>	<i>Number</i>	<i>%</i>
Completely incorrect	4	10	9	22	1	2
Rather incorrect	7	17	14	34	1	2
Rather correct	6	15	7	17	15	37
Completely correct	24	59	11	27	24	59

IV. DISCUSSION

This study shows that 63% of these patients lack concurrent and registered diseases. According to the timing of the diagnosis the patients with a registered disease up to 6 months (46%) and up to 1 year (34%) is higher. 56% people weren't employed at the time of the study.

It was also observed in this study that participants have explicitly confirmed that they share in with their family and have good friends. The distribution of the answers to the second statement shows that there is no change in the communication skills before and after the disease in 56% of the surveyed participants, while in 44% participants this change is a fact. Seeking social support is a reason to conduct an in-depth analysis in regards to whether this need is met by the circle of family and friends.

The experience shows that the patients with a malignant neoplasm could demonstrate a socially oriented behavior in the cases where the strong Self is combined with an over control of the reactions and the behavior. These types of patients keep their ability to activate quickly their psychological defenses and the ability to protect the people around.⁸

There exist a positive correlative dependency between the active relationships of the patients with their relatives (59% are sharing in) and the statement that the relationship with others is meaningful when it is fulfilling ($S=0.25$, $p=0.01$) and a negative correlation with the statement that the number of people matters in the relationship. ($S=-0.55$, $p=0.001$). The connections that have been identified show that the survey participants have the need to maintain relationships with people who have proven in time to be trustworthy and compassionate. The age is of significance in regards to practicing a preferred activity/hobby involving sports and physical efforts ($S=0.38$, $p=0.03$). The patients who are in a close relationship with their relatives are convinced that it is very important to stay active today and tomorrow. ($S=0.73$, $p=0.000$). The statistic correlation reveals that if there is an active relationship with the relatives, the patients with carcinoma cervix believe in the necessity to remain socially and physically active despite the stage of their disease.

CONCLUSION

This study, even though it concerns a small group of patients with malignant neoplasm of the cervix, shows that there is a connection between the self-value, the perspective and the coping strategies to deal with the distress with the building of trustworthy relationships, the family activities, the presence of hobbies and a circle of friends. Taking into consideration the specific psychological condition when the diagnosis has been communicated and the life with the diagnosis, we explicitly support the idea of timely psychological help and support in cooperation with physicians and relatives of the patient. Psycho-therapeutic interventions should be directed towards topics that could improve the quality of life, decrease the distress levels and to prolong the life of the patients.

CONFLICT OF INTEREST

None declared till now.

REFERENCES

1. http://www.iarc.fr/en/media-centre/pr/2013/pdfs/pr223_E.pdf. Latest world cancer statistics Global cancer burden rises to 14.1 million new cases in 2012: Marked increase in breast cancers must be addressed, International Agency for Research on Cancer (IARC)
2. www.WHO.int/mediacentre/factsheets/fs297/en/
3. National cancer control planning: a toolkit for Civil Society Organisations (CSOs), Geneva, 2012
4. <http://www.nsi.bg>
5. S. Tsvetkova, D. Yulieva and I. Petkova, "Need psychological counseling in the treatment of patients with cancer", XIII International Conference "Applied Psychology and Social Practice" VSU, pp. 569-579, 2014.
6. S. Tsvetkova and D. Yulieva, "Factors that influence the psycho-social functioning in patients with malignant new-formations", JBCR, Vol.7, 1, p. 98, 2014.
7. Tsvetkova S. Social problems in patients with malignant new formations serving as additional distress sources. International Journal Scientific and Applicative Papers. 2015; 199-204
8. Tsvetkova S, Gatsev O. Instruments of transaction analysis at psychological counseling of oncologic patients. A Current Perspective on Health Sciences. Trakya University. Edirne. Turkey. 2014; 11