

EFFECTIVENESS OF PSYCHO EDUCATIVE INTERVENTION ON DEPRESSION AMONG CANCER PATIENTS”



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Abstract

Cancer care today often provides state-of-the-science biomedical treatment, but fails to address the psychological and psychosocial problems associated with the illness. This failure may compromise the effectiveness of health care and thereby adversely affect the health of cancer patients. Psychological and social problems created/exacerbated by cancer (including depression and other emotional problems) cause additional suffering, weaken adherence to treatments and threaten patients' return to health, hence the study was undertaken to assess the effectiveness of psycho educative intervention on depression among cancer patients. A quasi experimental study, pre test posttest design without control group approach was used. 50 cancer patients were selected with purposive sampling techniques who were admitted in oncology ward of Pravara Rural Hospital, Loni (Bk). The Zung self-rating depression scale was used to collect the data and the psycho educative intervention was used as independent variable. The results showed that the common problems experienced were problems with Activity of Daily Living, finance, health problems, social adjustment and family problems. The effectiveness of psycho educative intervention showed that, the overall mean depression score was (49.8 ± 4.69) and the post test mean score was (45.5 ± 3.8) , there was statistically significant reduction ($t_{49}=7.77, p \leq 0.05$). Significant association was also found between depression and demographic variables like age and type of cancer ($p \leq 0.05$). The study revealed that the psycho educative intervention was effective in reducing the level of depression among the cancer patients.

Keywords: Psycho educative intervention, Depression, Cancer patients, Activity of Daily Living

Background

Cancer affects everyone and represents a tremendous burden on patients, families and societies. Its impact is likely to increase substantially, causing a lot of pain and suffering, if not treated properly in time, results in death (Chatterjee P and Anjali R, 2003)³

Cancer is a leading cause of death worldwide, from total of 58 million deaths worldwide in 2005, cancer accounts for 7.6 million (13%) of all deaths. More than 70% all cancer deaths occur in developing and under developed countries. Deaths from cancer in the world are projected to continue rising, with an estimated 9 million people dying from cancer in 2015 and 11.4 million dying in 2030. It is estimated that 1 million new cancer cases per annum will be recorded and at any given time there will be 3 million cancer patients in India. India has the highest number of the oral and throat cancer cases in the world. (WHO, 2005)¹⁰

The common methods of treating cancer (surgery, Chemotherapy, radiation and hormonal therapy) are frequently very effective in tumor suppression, minimizing cancer pain, extending the survival etc. The prevalence of major depression in cancer patients to be 20% to 25%, increasing with higher levels of physical disability, advanced illness and pain; approximately 25% present with depression at initial diagnosis and 75% develop depression subsequently and one in four persons living with cancer had depression. (Sheard T and Maguire P, 1996)⁹

Health professionals can help to substantially reduce the patient and family distress that follows the diagnosis and treatment of cancer. Various evidences suggests that psychosocial therapies improve emotional adjustment and reduce both treatment and disease related distress in cancer patients (Sr.Mempra H, 1994)⁷

Need of the Study

The diagnosis and treatment of cancer is a highly stressful experience for most patients. The experience of having cancer is a threat, not only to life and physical

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