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Research Paper...

PERCEIVED STRESSORS AND COPING STRATEGIES ADOPTED BY WOMEN WITH GYNAECOLOGICAL CANCERS

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Abstract

Gynecological cancer is a cancer that starts in a woman's reproductive organs. Womanhood is very much defined through reproductive organs, not only on a physical & physiological basis but also on emotional basis. Studies have shown that good care and support as well as will power help patients to overcome and cope better in the course of illness and treatment especially when the person is afflicted with cancer. Acceptance of the illness to surviving is a long journey and nursing professionals if trained and educated can be an excellent support system along with other health personnel. Therefore, to identify the perceived stressors and coping strategies adopted by women diagnosed with gynecological cancers and to assess the relationship between these stressors and coping strategies with selected variables, a survey study using a semi structured interview schedule in OPDs of a reputed cancer hospital in Mumbai was done. 200 women diagnosed with breast, ovary and uterine cancer of stage I and II (non probability convenience sampling technique) were selected. In the study we can conclude that physical stressors viz. pain (70%) and physiological stressors viz nausea vomiting (approximately 68%), vaginal bleeding (approximately 73%) were perceived more by women diagnosed with uterine cancer. Also psychological stressors i.e. alteration in body image (86%) were perceived more by samples with breast cancer. Approximately 73 % respondents adopted strategy of praying to God and keeping faith, seeking comfort from others and approximately 70% were worried as they had stress. This study showed that there was a significant difference ($p \leq 0.05$ levels) in perceived stressors and coping strategies adopted among various groups with respect to the most of the selected variables.

Key Words: Perceived stressors, coping strategies, women, gynecological cancers

Background

Data from population-based registries under the National Cancer Registry Program indicated that the leading sites of cancer among women are the cervix, uterus, breast, and oral cavity. In a study by **Sankaranarayanan R et al (2006)**¹ on worldwide burden of gynaecological cancer, it was found that the comprehensive global cancer statistics from the International Agency for Research on Cancer indicated that gynaecological cancers accounted for 19% of the 5.1 million estimated new cancer cases, 2.9 million cancer deaths and 13 million 5-year prevalent cancer cases among women in the world. Uterine body cancer accounted for 199000 new cases and 50000

deaths; ovarian cancer for 204000 new cases and 125000 deaths.

Cancer has become an important public health problem with over 800,000 new cases occurring every year in India. It is estimated that there are nearly 2.5 million cases in the country with nearly 400,000 deaths occurring due to cancer. Cancer of the female reproductive tract and breast has a high incidence amongst Indian women. More than 70,000 new cases of cervical uteri, 3-8% of ovarian, 0.5-4.8% of corpus uteri, 1-3% of vulval and gestational trophoblastic tumors, and over 75,000 of breast cancers are reported in India every year. Cancer registries have also highlighted that more