Psychological Reaction Among Newly Diagnosed Patients with Lung Cancer

Thesis

Submitted for Partial Fulfillment of Master Degree in Psychiatric Mental Health Nursing

By

Medhat Rabee Abdo Taha

(B.Sc.- Ain Shams University)

Faculty of Nursing
Ain Shams University
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Supervised by

Prof. Dr. Sorayia Ramadan

Professor of Psychiatric / Mental Health Nursing Faculty of Nursing - Ain Shams University

Assist. Prof. Mona Hassan

Assistant Professor of Psychiatric / Mental Health Nursing Faculty of Nursing - Ain Shams University

Dr. Fatma Ata

Lecture of Psychiatric / Mental Health Nursing Faculty of Nursing - Ain Shams University

Faculty of Nursing
Ain Shams University
2018



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LIST OF ABBREVIATIONS

Abb.	Meaning
AJCC	: American Joint Commission on Cancer
ALK	: Anaplastic lymphoma kinase
CT	: Computed tomography
DT	: Distress Thermometer
EBUS	: Endobronchial ultrasound-guided sampling
EGFR	: Epidermal growth factor receptor
EUS	: Esophageal ultrasound-guided sampling
LCNS	: Lung Cancer Nurse Specialist
MDT	: Multidisciplinary team
MRI	: Magnetic resonance imaging
NCCN	: National Comprehensive Cancer Network
NLCFN	: National Lung Cancer Forum for Nurses
NSCLC	: Non-small-cell lung cancer
PD-L1	: Death-ligand 1
PET	: Positron emission tomography
RCLCF	: Roy Castle Lung Cancer Foundation
SCC	: Squamous cell carcinoma
SCLC	: Small-cell lung cancer

Psychological Reaction among Newly Diagnosed Patients with Lung Cancer

Abstract

Lung cancer is one of the most common cancers affecting both men and women worldwide. Aim of the study: Assess psychological reaction among the newly diagnosed patients with lung cancer. **Setting:** Oncology center, Ain Shams University hospitals. Sample: 95 newly diagnosed patients with lung cancer. Tools: First tool, Socio-demographic data. Second tool, anxiety reaction, shame reaction, doubt reaction, denial reaction and guilt reaction developed by researcher. **Results**: About half of the studied subjects aged 35 years to >45 years. About two third of studied subjects always feel with anxiety ,two third of the studied subjects always feel with shame , more than three quarter of the studied subjects always have adenial feeling, about three quarter of the studied subjects always feel with doubt, about two third of the studied subject always feel with guilt Conclusion: More than half of the studied subjects suffered from high levels of anxiety, more than one third of them suffered from high levels of shame, the majority suffered fromhigh levels of denial, more than one third suffered from high levels of doubt and slightly less than half suffered from high levels of guilt. **Recommendations:** A psychological health program should be planned to help such group of patients cope effectively to the consequences of disease.

Keywords: Psychological Reaction - Lung Cancer

Introduction

Lung cancer is the uncontrolled growth of abnormal cells that start off in one or both lungs. Lung cancer is one of the most common cancers affecting both men and women worldwide. Most lung cancer patients have regional or distant stage disease at diagnosis, contributing to their high rate of multiple physical and psychological symptoms. Lung cancer is also considered to have a lower five-year survival rate than other leading types of cancer such as breast and prostate cancer (Jemal et al., 2011).

Despite significant advances in oncology, results of the treatment of lung cancer are still unsatisfactory, mainly due to late diagnosis, old age of patients, concomitant diseases, and as a consequence, limited therapeutic options (Leppert, 2010).

In addition to high commonality, mortality rate, and cost of the disease, it has also been found that lung cancer patients may also suffer significantly more distress than patients with other cancer diagnoses (Akechi et al., 2011).

The struggle with such a life threatening diagnosis as in lung cancer, triggers a series of psychological issues, most of them adaptive in nature, regardless of their negative or positive impact upon the individual, this

varying from person to person depending on gender, age, education, personal experience and other factors, these having a big impact on the patient's medical pursuit (**Dumitrascu et al., 2015**).

Lung cancer patients face a barrage of difficulties related to their diagnosis causing emotional strain. For example, severe physical symptoms (pain, dyspnea, fatigue and cough), intrusive treatments (surgery, chemotherapy, and radiotherapy), and poor prognosis can lead to high levels of psychological distress (Shellekens et al., 2016).

Also they added that (**Shellekens et al., 2016**) lung cancer patients undergo so much physical and emotional distress, they often experience decreased quality of life, high rates of medical care attrition, prolonged hospital stays, and lower rates of survival. However (**Cho, Park, & Blank, 2013**) this all adds to the total symptom burden that is experienced by patients and can lead to distressing emotional and behavioral issues such as fear of recurrence, fatigue, sleep difficulties, and perceived vulnerability.

Care of patient with lung cancer is done by multidisciplinary team which includes respiratory physicians, thoracic surgeons, nurses' specialists, radiation oncologists, oncologists, palliative care, physiotherapists, social workers, clerical and management staff. The effective function of this team requires collaboration between all members and with those they care for (**Trewin**, **2014**).

Significance of the study:

The distress associated with symptoms arising from lung cancer has been reported as the most intense, when compared to other types of cancer. Lung cancer also cause profound distress such as anxiety, depression, hopelessness and desire for hastened death at the time of diagnosis as the disease progresses so this study will discuss Psychological reaction among newly patients with lung cancer (Gould, 2012).

Researcher shows that patients having lung cancer are suffering from psychological problems as anxiety, depression, hopelessness and desire for hastened death at the time of diagnosis as the disease progresses, it's confirmed by **Gould at 2012.**

In Egypt, According to Egyptian cancer institute data published in 2014, most lung cancer patients are smoking about 80% .lung cancer is the fetal cancer about 8.2% suffering from lung cancer from total rate of other cancers (Mustafa serify, 2014).

Aim of the Study

The aim of this study is to assess psychological reaction among the newly diagnosed patients with lung cancer.

Research Question:

What is psychological reaction among newly patients with lung cancer?.

Review of Literature

Lung cancers typically start in the cells that line the bronchi and parts of the lung such as the bronchioles or alveoli. There are two main types of primary lung cancer: Small-cell lung cancer (SCLC): This type gets its name from the small size of the cells that it is composed of when viewed under a microscope. Non-small-cell lung cancer (NSCLC): This is the more common type of lung cancer, and accounts for 85-90% of all lung cancers (Novello et al., 2016).

The incidence of advanced lung cancer has increased in most race/ethnic groups; the greatest increase has been seen within African Americans. The National Institutes of Health reported that lung cancer is the deadliest form of cancer for both men and women. Lung cancer is rare in individuals under the age of 45 years old and is more common in individuals over the age of 45 years old (**Ward et al., 2014**).

Lung cancer represents the fourth most common cancer in Europe In 2012, there were more than 410,000 new cases of lung cancer diagnosed in Europe (12% of the total number of new cancer cases) 291,000 new cases in men. 119,000 new cases in women , Lung cancer is the second most common cancer in men (after prostate cancer)

Review of Literature

and the third most common in women (after breast and colorectal cancer) (Ferlay et al., 2013).

Incidence rates of lung cancer are higher in more developed countries than in less developed countries; these variations largely reflect the differences in the stage and degree of the tobacco epidemic. The majority of cases of lung cancer are diagnosed in patients aged 65 years and over, and the median age at diagnosis is 70 years. NSCLC is the most common type of lung cancer, representing 85-90% of all lung cancers Estimated lung cancer incidence rates by sex and world area in 2012 (**Torre et al., 2015**).

In Europe, there has been a decrease in lung cancer mortality among men, while it is increasing in women – this reflects the difference in smoking prevalence trends between the sexes (Malvezzi et al., 2016& Novello et al., 2016).

The most common symptoms of lung cancer, including NSCLC, are Persistent cough, Coughing blood, Chest infection that won't go away or keeps coming back, Chest or shoulder pain that won't go away, Difficulty breathing/breathlessness, Hoarseness or lowering of the voice, wheezing. Other, non-specific symptoms may include: Fever, Loss of appetite, unexplained weight loss, Feeling extremely tired. Patient should see doctor if