



DEPRESSION AMONG BREAST CANCER PATIENTS - PREVALANCE, ALLIED FACTORS AND IMPACT ON QUALITY OF LIFE- A RCC EXPERIENCE

Oncology

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KEYWORDS

BACKGROUND OF STUDY

Though monumental achievements have been achieved in the field of breast cancer care with relation to detection and survival, many core issues related to disease stays grossly unaddressed. Depression is one such key issue especially in breast cancer because of its allied female predominance, disease characteristics and associated psychosexual issues. High incidence of breast cancer in India along with high prevalence of depression in Indian female population creates an area of interest when the morbidity of the two conditions existing together is ascertained

OBJECTIVES

The study aimed at assessing the prevalence of depression among breast cancer patients during different phases of treatment. The impact of depression on these patients with respect to the quality of life and its various domains. To assess its association with various factors like marital status, age, economic status and the phase of treatment.

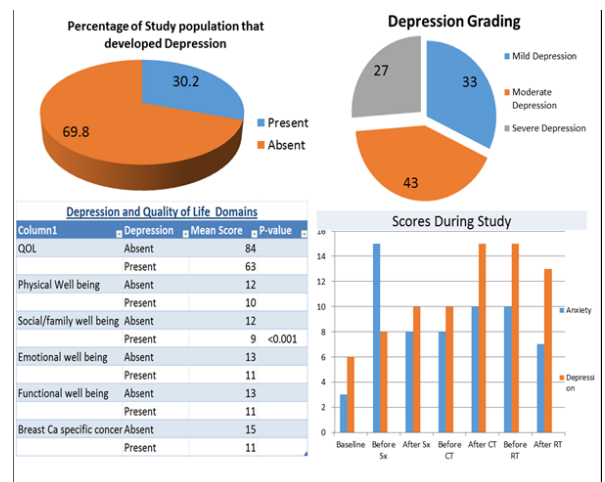
MATERIALS AND METHODS

A prospective study performed in the oncology outpatient setting of Acharya Tulsi Regional Cancer Centre among Locally Advanced Breast cancer patients. Data was collected using questionnaires pertaining to socio demographic profile, Beck's Depression inventory based questionnaire and FACT-B inventory based questionnaire by interview method. Patients meeting the inclusion criterion were randomized to three groups and The BDI was administered at baseline, after surgery, after chemotherapy and after radiotherapy. Fact-B Quality of Life assessment was administered simultaneously. Statistical analysis was done to obtain the association between various factors and depression using Chi-square test. To obtain the mean comparison of different domain scores with depression, independent two-sample t-test.

RESULTS

Depression of varying intensity was observed across the study population. Of the study sample of 100 patients 30.2% had depression of varying intensity at some point in the study. Of the patients with depression, 33 % had mild depression, 40% had moderate depression, 27% had moderately severe to severe depression. Frequency of depression was variable among the treatment modalities with the findings of chemotherapy being the most depressive and radiotherapy the least. There was a statistically significant correlation between quality of life and depression ($P < 0.01$). There was an association between depression and all domains of QOL. Patients with depression had lower scores in all domains when compared to those without depression. Change in Depression was higher among the post chemotherapy group compared to post surgery group and least post radiotherapy group. Other factors analysed were age, with depression being highest among the 20-30 age group and least among the 50-60

age slab, in socioeconomic status, high Socioeconomic status seemed to have the highest incidence though statistically not significant.



CONCLUSION

Based upon the findings of the study it may be inferred that Depression is a real issue among Breast cancer patients with significant impact on their Quality of Life, and perhaps should be addressed with the same gravity as the disease itself. Development of better screening guidelines for Depression in cancer patients is the need of the hour. Initiatives to develop simple oncologist administrable interventions as a preventive approach could take away the stigma tagged to it and significantly reduce the incidence.