

Prevalence of Pattern of Psychiatric Disorders Among Cancer Patients: A Prospective Study

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ABSTRACT

Background: Cancer is a leading cause of death. Psychiatric morbidity post-cancer onset increases in direct association with the level of disability, advanced illness and pain. Hence; we planned the present study to assess pattern of psychiatric disorders in cancer patients.

Materials & Methods: The present study included evaluation of psychiatric disorders in cancer patients. A total of 50 cancer patients were included in the present study. A questionnaire was prepared to obtain the psychiatric illness among the patients. All the results were recorded on the excel sheet. Analysis of the result was done by SPSS software.

Results: Psychiatric illness was present in 60 percent of the study population. Anxiety and depression were the most common type of psychiatric disorders encountered.

Conclusion: Psychiatric illness is present in significant

proportion in cancer patients.

Key words: Cancer, Morbidity, Psychiatric.

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INTRODUCTION

Cancer is a leading cause of death. The prevalence of single or multiple psychiatric disorders in advanced cancer patients are still poorly understood.^{1,2} Estimates for depression range from 3-38%. Early studies using rigorous methods reported lower rates of psychiatric disorders in early-stage cancer compared to subsequent studies that were conducted using less sophisticated methods or smaller sample sizes.³

Psychiatric morbidity post-cancer onset increases in direct association with the level of disability, advanced illness and pain, following, e.g., the biological effects of the malignancy, side effects of certain chemotherapeutic drugs, grief about current and anticipated losses, mutilation, and fear of death.⁴⁻⁶ Accordingly, timely and accurate diagnosis and appropriate treatment of comorbid mental disorders is required in an effort not only to increase quality of life but also to reduce adverse effects on cancer course, length of hospital stay, treatment adherence and efficacy, and possibly prognosis and survival.⁷⁻¹⁰ Hence; we planned the present study to assess pattern of psychiatric disorders in cancer patients.

MATERIALS & METHODS

The present study was planned in the department of psychiatry of Government S.K. Hospital, Sikar, Rajasthan and included evaluation of psychiatric disorders in cancer patients.

A total of 50 cancer patients were included in the present study. Complete clinical and demographic details were included in the present study.

Exclusion criteria

- Patients with past history of psychiatric illness,
- Patients with family history of psychiatric illness,
- Patients with any known drug allergy,

A questionnaire was prepared to obtain the psychiatric illness among the patients. Criteria as described previously in the literature were used for assessing the psychiatric disorders among cancer patients.¹⁰

All the results were recorded on the excel sheet. Analysis of the result was done by SPSS software. Univariate regression curve was used for assessment of level of significance.

RESULTS

A total of 50 patients were included in the present study with mean age of 58.1 years. Out of 50, 35 were males and remaining 15 were females. Lung cancer and head and neck cancer were the most common type of cancer encountered in the present study. Psychiatric illness was present in 60 percent of the study population. Anxiety and depression were the most common type of psychiatric disorders encountered.

Table 1: Demographic details of the patients

Parameter	Value	
Mean age (years)	58.1	
Gender	Males	35
	Females	15
Marital status	Married	15
	Unmarried	20
	Widowed	15

Table 2: Cancer status of the patients

Parameter	No. of patients	
Cancer site	Lungs	12
	Head and neck	10
	Breast	5
	Stomach	3
	Lymphoma	3
	Pancreases	5
	Liver	4
	Others	8
Stage of cancer	Recurrence	15
	Metastatic	20
	Others	15

Table 3: Prevalence of psychiatric disorders in cancer patients

Type of psychiatric illness	No. of patients
Anxiety	12
Depression	8
Delirium	7
Others	3
Total	30

DISCUSSION

In the present study, we observed that psychiatric morbidity was present in 60 percent of the cancer patients with anxiety and depression being the most common psychiatric illness encountered. Gopalan MR et al assessed the prevalence of Psychiatric disorders in cancer patients and to find out the factors associated with Psychiatric disorders in Cancer Patients. Adult patients (18 years of age and above), having a diagnosis of carcinoma were selected by consecutive sampling method. A questionnaire which included back ground data, socio economic variables, treatment variables like type of malignancy, exposure to radiation & chemotherapy prior to the evaluation and current treatment, co-occurring medical illness & treatment and past & family history of psychiatric illness was used to collect data. Delirium rating scale and MINI International neuropsychiatric interview were used to assess Psychiatric disorders and delirium. Of the 384 assessed, 160 (41.7%) had psychiatric disorders. Adjustment disorders were seen in 22.6%. 10.9% of subjects had major depressive disorder. Thus a total of 33.5% of patients had a diagnosis of either anxiety or depressive disorder. Proportion of patients having delirium was 6.5%. Hypomania was seen in small (1.6%) of patients. Multivariate analysis for various parameters for

psychiatric disorders showed that age, past history of chemotherapy, past history of radiotherapy, & surgical treatment of carcinomas are significant predictors of psychiatric disorders. Psychiatric disorders are seen in a significant proportion of Psychiatric patients.¹¹

Harrison J et al explored those factors associated with poor psychological adjustment to cancer. These are described under four heading: characteristics of the patient; disease and treatment variables; the interaction between patient and illness; and environmental factors. A number of risk factors for psychiatric morbidity can be identified from each of the four areas. Methodological limitations are highlighted, in particular the preponderance of cross-sectional study designs. Increased awareness of the risk factors for psychiatric morbidity should lead to earlier detection and more appropriate treatment. Future research should focus on those risk factors which are potentially modifiable.¹²

Atesci FC et al investigated the prevalence of psychiatric morbidity and the relationship between the clinical or personal factors, especially psychiatric morbidity, and awareness of cancer diagnosis among a group of Turkish cancer patients. A total of 117 cancer patients were assessed using the Structured Clinical Interview for DSM-IV (SCID), the Hospital and Anxiety Depression Scale (HADS) and the General Health Questionnaire (GHQ). Of these patients, 30% had a psychiatric diagnosis. Adjustment disorders comprised most of the psychiatric diagnoses. Awareness of the diagnosis of cancer, history of previous psychiatric disorders, pain and stress factors were correlated with psychiatric morbidity. Of the 117 patients, 64 (54.7%) were unaware of the diagnosis of cancer. Most of the patients (67.9%) who were considered to be aware of the cancer diagnosis stated that they had guessed their illness from the treatment process or drug adverse effects. Psychiatric morbidity was significantly higher in the patients who knew that they had a cancer diagnosis (P=0.03). These findings suggest that the awareness of cancer diagnosis is related to the presence of psychiatric morbidity. In particular, the understanding of the diagnosis indirectly may be stressful to the patient because it arouses suspicion about the cancer and treatment, and consequently can lead to psychiatric disturbance.¹³

CONCLUSION

From the above results, the authors concluded that psychiatric illness is present in significant proportion in cancer patients. However; future studies are recommended.

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