SUPPORTIVE CARE NEEDS AND THEIR ASSOCIATIONS WITH PSYCHOLOGICAL WELL-BEING, ILLNESS BELIEFS AND QUALITY OF LIFE AMONG CANCER PATIENTS IN INDIA

Mahati Chittem, PhD¹; Christine Rowland, PhD²; Swati Jakkula, BTech¹, Ravali Tanikella, MSc¹

¹Indian Institute of Technology Hyderabad, India. (mahati@iith.ac.in)
²University of Manchester, United Kingdom.

INTRODUCTION

Needs assessment provides a quick and clear measure of patients’ support preferences, assist in identifying gaps in present services, and improve resource distribution (Zigmond & Snaith, 1983).

Psychological and health information needs are frequently identified as the most commonly reported unmet need by cancer patients (e.g., Razavi et al., 1990; Chie et al., 2004; Broadbent et al., 2006).

AIMS

To examine patients’ supportive care needs and associations between these and psychological distress, symptom experience, illness perceptions and quality of life (QoL) among cancer patients in India.

METHODS

Five hundred and twenty-two patients were recruited from cancer hospitals in Hyderabad, India.

Patients with a terminal illness were excluded.

Scales included:

- Supportive Care Needs Survey SF 34 (SNCS SF 34; Boyes, Girgis, & Lecathelinais, 2009)
- Hospital Anxiety and Depression Scale (HADS; Zigmond & Snaith, 1983)
- Condensed Memorial Symptom Assessment Scale (CMSAS; Chang et al. 2004) Brief illness perception questionnaire (BIPQ; Broadbent et al. 2005)
- European Organization for Research and Treatment of Cancer Quality of Life Questionnaire (EORTC QLQ-C30; Aronson et al. 1993)

RESULTS

The three most prevalent unmet needs for those on active treatments were:

- ✓ Most participants had unmet needs (80.3%) with only 1.9% reporting no needs and this did not differ by diagnosis or treatment status.
- ✓ Those with unmet needs were significantly younger (mean: 51.5 years (SD 12.74) V’s 56.8(SD 12.82)) and had fewer children (2.4 (1.36) V’s 2.8 (1.77)) than those with satisfied needs (p’s <0.05).
- ✓ Patients with unmet needs had greater physical (1.18 (0.69) Vs 0.74 (0.61)) and psychological symptoms (1.34 (1.24) Vs 0.52 (0.77)) (p’s<.001) and a more negative perception of their illness (38.7 (14.29) Vs 23.72 (11.22)) (p<.001).
- ✓ Patients with unmet needs were significantly more anxious (p=.02) and depressed (p<.001) than those who were satisfied. (Table 1)
- ✓ Overall QoL (p<.01) and QoL across all domains (p’s<.001) was significantly lower for patients with unmet needs. (Table 2)
- ✓ Logistic regression analysis is underway to explore these associations further.

CONCLUSIONS

Patients with unmet needs had:

- ✓ higher levels of psychological distress
- ✓ more physical and psychological symptoms
- ✓ negative illness beliefs
- ✓ lower QoL

IMPLICATIONS

Patients may benefit from psycho-oncology services.

Further, future research can examine the impact of these psycho-oncological services on patients' well-being.

CONTACT

Dr. Mahati Chittem
Department of Liberal Arts, IIT Hyderabad, Hyderabad, India
Email: mahati@iith.ac.in
Website: <https://tinyurl.com/y8gqj2yr>