



PERCEIVED STRESS AMONG CAREGIVERS OF CANCER PATIENTS IN A TERTIARY CARE CENTRE

Community Medicine

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ABSTRACT

Introduction: Caregivers play a vital role in supporting cancer patients. High levels of emotional distress, anxiety, and depression are often reported among caregivers due to the demanding nature of caregiving responsibilities. Caregivers often face barriers to accessing support services and may hesitate to prioritize their own needs over those of the cancer patient. The assessment of stress among caregivers helps to know the affected group and helps in providing new strategies to manage stress, including seeking social support & utilizing problem-solving skills. **Objective:** The study was done to assess the perceived stress among caregivers of cancer patients. **Methods:** A cross-sectional study was conducted among the caregivers of cancer patients in a tertiary care centre, in Tamil Nadu. Data was collected from 30 participants who were involved in the care of the patient throughout the treatment and accompanying them for treatment in the Oncology department using a semi-structured questionnaire which includes perceived stress scale (PSS)-10. **Results:** Out of 30 study participants, 33.3% were males and 66.7% were females. The mean age of participants was 44.3 ± 14.2 yrs. Around 10% of people perceived high stress and 70 % with moderate stress. The study participants had a mean stress score of 18.4 ± 5.6 in males and 17.4 ± 6.5 in females. Due to stress, 50% of participants had disturbed sleep, 20% of them with weight loss and fatigue, and 10% with others like drowsiness, and anxiety. **Conclusion:** In our study, a high proportion of caregivers of cancer patients have moderate levels of stress in their lives and it manifests as disturbed sleep, weight loss fatigue, drowsiness, and anxiety. Most of them experienced stress due to financial burdens and lack of social support. Care givers need supportive care, psychoeducation, and mindfulness-based interventions to reduce the stress.

KEYWORDS

Cancer, Caregivers, Perceived stress, Perceived stress scale

INTRODUCTION

Cancer is a disease that not only affects the individual's mental and physical integrity but also affects the functionality of the family system. Caregivers play a crucial role in supporting cancer patients emotionally, physically, and mentally. They provide practical assistance with daily tasks, accompany patients to appointments, communicate with healthcare providers, and ensure continuity of care(1). caregivers are often faced with multiple concurrent stressful events and extended, unrelenting stress, they may experience negative health effects, mediated in part by immune and autonomic dysregulation. Caregiver stress may be due to exhaustion, anger, rage, or guilt ensuing from unmitigated caring for an inveterately sick patient. (2)

Caregivers experience stress when patients cannot cope with the symptoms they are experiencing. This experience is commonly perceived as a chronic stressor, and caregivers often experience negative psychological, behavioural, and physiological effects on their daily lives and health. (3) Several symptoms can indicate caregiver burden and stress including depression and anxiety, difficulty concentrating, irritability, exhaustion, easy annoyance, sleep disturbances, health problems, substance abuse, lack of interest in social or fun activities, and withdrawal from responsibilities or obligations. (4) Chronic stress can lead to medical issues, including high blood pressure, diabetes, and a compromised immune system. This may reduce the caregiver's life expectancy. (5) As a caregiver they provide support to their loved one's fear, depression, and anxiety at the same time, they also experience the same emotions and all these emotions add up and lead to major stress. This study has been done to assess the perceived stress among caregivers of cancer patients. Assessing the physical and psychological condition of the caregivers is most important to improve their quality of life and positive attitude which in turn will help the patients to cope with their illness.

METHODOLOGY

A Cross-sectional study was done in Sree Mookambika Cancer centre (SMCC), Kulasekharam, Tamil Nadu from March – April 2023. The pilot study includes the primary caregivers of cancer patients above the age of 20 years who were confirmed as the main caregiver by the patient as who were involved in the care of the patient throughout the treatment and accompanying them for treatment in the oncology

department. Thirty participants were recruited using convenience sampling after excluding the temporary caregivers/home nurses and family members and neighbours, who are not involved in caregiving. Data was collected using a semi-structured questionnaire contains sociodemographic details and stress assessment using the a and Perceived stress scale (PSS). PSS consists of 10 self-rated questions with a possible score of 0–4 each, making the possible total range of scores from 0 to 40. Participants with a total score of 0-13 are considered to have low stress, from 14-26 are considered to have moderate stress, and from 27-40 are considered to have high perceived stress. The collected data were entered in Microsoft Excel and analyzed using SPSS version 20. The quantitative variables expressed in terms of mean, standard deviation, and categorical variables were in percentage. To look for association Chi-square test was used. A p-value of less than 0.05 was considered to have statistical significance.

RESULTS

The study was conducted among 30 caregivers in the oncology ward of SMIMS hospital. The mean age of study participants was 44.3 ± 14.2 yrs. Among the study participants, 33.3% were males and 66.7% were females. The majority of the study participants belong to the Hindu religion. (Table.1)

Table 1. Distribution of Study Participants Based on Socio-demographic Variables

Sociodemographic variables	Frequency (n)	Percentage (%)
Religion		
Hindu	21	70
Muslim	3	10
Christian	6	20
Marital status		
Unmarried	6	20
Married	24	80
Education		
Illiterate	2	6.7
Primary school(upto 4th std)	4	13.3
Middle school(5th to 7th)	12	40
High school & Higher Secondary(8th to 12th)	7	23.3
Graduate	5	16.7

Occupation		
Unemployed	15	50
Plant & machine operators & assemblers	2	6.7
Skilled agriculture & and fishery workers	10	33.3
Semi-professional	2	6.7
Professionals	1	3.3

Stress Among Study Participants

Most of the participants (96.7%) were not taking any medication for stress. About 16.7 % of participants were on medication for chronic diseases like diabetes, hypertension, etc. None of them had a history of mental condition in the family. Due to stress, 50% of participants had disturbed sleep, 20 % of them with weight loss and fatigue, and 10% with others like drowsiness, and anxiety. In our study, 16.7 % were perceived episodes of panic attacks due to stress. Out of 30 participants, 12 (40%) had perceived stress due to financial burden. Lack of social support contributes to stress in 43.3% of the study participants. The majority of the participants (96.7%) had not started any addiction to cope with stress. For relieving stress 10 % of them need social gatherings & 70% of them do other activities like watching TV, listening to songs, and traveling, etc. Around 10 % of them were not doing anything to relieve stress.

According to the Perceived Stress Scale (PSS) out of 30 study participants 10% of them perceived high stress and 70 % with moderate stress. Among the study participants, the mean stress score of 18.4±5.6 in males and 17.4±6.5 females was found. There was no statistical association for Gender, education, socioeconomic status, occurrence of panic attacks, financial burden, lack of social support with perceived stress among study participants (p>0.05). (Table.2)

Table 2. Categorical Variables Related to Perceived Stress Among Study Participants

Categorical variables	PSS-10 Stress scale			χ^2 , p-value
	Mild (n)	Moderate (n)	High (n)	
Gender				0.96,
Male	1	8	1	0.61
Female	5	13	2	
Marital status				0.38,
Unmarried	1	4	1	0.82
Married	5	17	2	
Education				0.91,
Illiterate	0	2	0	0.63
Upto Higher Secondary & Graduate	6	19	3	
Socioeconomic status				3.51,
Upper class	3	4	0	0.17
Lower class	3	17	3	
Whether panic attacks occurred				6.68,
Yes	0	3	2	0.065
No	6	18	1	
Whether financial burden is causing stress				1.03,
Yes	2	8	2	0.59
No	4	13	1	
Any lack of social support				0.52,
Yes	2	10	1	0.77
No	4	11	2	

CONCLUSION

The present study reveals high proportion (70%) of caregivers of cancer patients having moderate level of stress which manifest as disturbed sleep, weight loss fatigue, drowsiness & anxiety. Most of them experienced stress due to financial burden and lack of social support. The study recommends supportive care for cancer patients' care givers through psychoeducation, and mindfulness-based interventions so that the stress can be reduced. Perceived stress of caregiving may affect their quality of life and struggle to maintain a balance between their caregiving responsibilities and personal needs, leading to feelings of guilt and resentment. Studies are needed in the future which were focused on developing interventions to alleviate caregiver stress and enhance coping mechanisms.

REFERENCES

1. Karabulutlu EY. Coping with the stress of family caregivers of cancer patients in Turkey. Asia-Pac J Oncol Nurs. 2014;1(1):55–60.

2. Priya SS, Shavi GR, Sanga R, Shankar S, Lalithambigai G, Rahila C, et al. Assessment of the perceived stress and burden of family caregivers of the head-and-neck cancer patients at a tertiary care cancer center: A cross-sectional study. J Cancer Res Ther. 2021

Sep;17(4):1039.

3. Bevens M, Sternberg EM. Caregiving Burden, Stress, and Health Effects Among Family Caregivers of Adult Cancer Patients. JAMA. 2012 Jan 25;307(4):398–403.

4. R. R. Shetty S, Bhandary R, Kulkarni V. Assessment of psychological stress among family care takers of cancer subjects in India- A cross-sectional study. Biomedicine. 2022 Nov 14;42:1044–50.

5. Hsu T, Loscalzo M, Ramani R, Forman S, Popplewell L, Clark K, et al. Factors associated with high burden in caregivers of older adults with cancer. Cancer. 2014;120(18):2927–35.

6. Sathishkumar K, Chaturvedi M, Das P, Stephen S, Mathur P. Cancer incidence estimates for 2022 & projection for 2025: Result from National Cancer Registry Programme, India. Indian J Med Res. 2022;156(4–5):598–607.

7. Akturan S, Yılmaz CT, Çiğtaş NY, Kumlu G. Perceived Stress Levels and Influencing Factors of Stress in Family Caregivers: A Cross-Sectional Study.

8. Rasouli-Ghahfarkhi SM, Molahosseini S. Stress and its related factors in families of patients with cancer.

9. LeSeure P, Chongkham-ang S. The Experience of Caregivers Living with Cancer Patients: A Systematic Review and Meta-Synthesis. J Pers Med. 2015 Dec;5(4):406–39.

10. Safaeian Z, Hejazi SS, Delavar E, Hoseini Azizi T, Haresabadi M. The Relationship between Caregiver Burden, and Depression, Anxiety and Stress in Family Caregivers of Cancer Patients Referred to Imam Reza Hospital in Bojnurd City. Iran J Psychiatr Nurs. 2017 Aug 10;5(3):7–14.

11. Hiremath P, Mohite V, Naregal P, Chendake M. Family burden and stress among caregiver of oral cancer patients at krishna hospital Karad. Asian J Pharm Clin Res. 2017 Mar 1;10:201–6.

12. IJERPH | Free Full-Text | Quality of Life in Caregivers of Cancer Patients: A Literature Review [Internet]. [cited 2024 Feb 11]. Available from: <https://www.mdpi.com/1660-4601/20/2/1570>