

Information Booklet on Self-Care Management of Chemotherapy among gynecological Cancer Survivors at Selected Hospital, Mangalore, Karnataka

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Abstract

Background of the study: Cancers of the female reproductive tract and breast has a high incidence amongst Indian women. Cancer registries have also highlighted that more than 70% of cancers in females occur in the age group of 35-64, and that these cancers exercise an adverse influence on the productive role of women in our society. Chemotherapy is a type of cancer treatment that uses one or more anti-cancer drugs that can have severe adverse effects on the patient both during the therapy and for some time after.

Title of the study: Information Booklet on Self-Care Management of Chemotherapy among gynecological Cancer Survivors at Selected Hospital.

Objectives

- 1) To assess the knowledge on self-care management of chemotherapy among Gynecological cancer survivors
- 2) To determine the effectiveness of information booklet on self-care management of chemotherapy among Gynecological cancer survivors

Hypothesis: H1: The mean posttest knowledge level will be significantly higher than mean pretest knowledge level on self-care management of chemotherapy among Gynecological cancer survivors.

Methodology: Quantitative research approach and the design adopted was pre experimental in this study. The investigator selected total of 60 gynaecologic cancer survivors receiving chemotherapy through purposive sampling technique. The researcher collected the data from the participants with the help of validated knowledge questionnaire and demographic information before administering self care management information booklet. The information booklet was comprised of side effects and management of chemotherapy with pictorial depiction. The posttest was conducted at the immediate subsequent cycle of chemotherapy. The obtained data were analyzed by using descriptive & inferential statistics.

Results: The result of the present study showed that the mean post-test knowledge score (11.63) of gynecologic cancer survivors were significantly higher than their mean pre-test knowledge score (7.90). The calculated 't' value was (15.562) and 'p' value is less than 0.05. Hence the research hypothesis was accepted at 5% level significance.

Key Words: Chemotherapy, information booklet, gynecological cancer survivors.

Introduction

Cancer is a group of diseases involving abnormal cell growth with the potential to invade or spread

to other parts of the body. Gynecological cancer induces a major break in every-day life and a threat to existence for both the patients and their families. Many gynecological cancer patients experience physical,

psychological, social, practical and economic challenges during treatment. Gynecological cancer requires multi-disciplinary management. Chemotherapy may be used as adjuvant therapy or for management of locally advanced or recurrent tumors¹.

Chemotherapy affects healthy body cells as well as cancer cells and its side effects mainly depend on the dose of chemotherapy drug what is administered to the patients. However, most women will suffer some short-term side effects with chemotherapy and different people's bodies can also react differently to the same type and dose of drugs. While receiving treatment, the patient would suffer from uncomfortable feelings which include fatigue, hair fall, anorexia, nausea, vomiting, constipation, diarrhea, mouth sores and low white blood cell, anemia and thrombocytopenia³. Low platelets can cause abnormal bleeding. Health personals are responsible for encouraging and promoting proper self-care of the patients being treated with chemotherapy.

Although some side effects of chemotherapy drugs such as nausea can occur within minutes to days after the drugs are given, a potentially life-threatening side effect such as myelosuppression can occur from one to four weeks. Patients and families need to become more familiar with their disease, treatment regimens, and side effects³.

The nurse's responsibility is to assess these patients and determine their educational needs regarding drugs, potential side effects, and appropriate self-care measures. Once patients gain adequate knowledge about their drugs and self-care measures, they should be able to distinguish when they can manage their side effects at home or when they should seek medical attention².

The present study focuses on self-care management of cancer patients treated with chemotherapy, in order to promote appropriate self-care behaviors. Empowering patients toward effective self-care can be done by providing knowledge and understanding.

Materials & Method

The investigator selected total of 60 gynecological cancer survivors receiving chemotherapy through purposive sampling technique. The research instrument was validated by the experts. The researcher obtained the

internal consistency of the instrument through split half method and the Karl Pearson correlation coefficient 'r' value was (0.76) and the instrument was found reliable.

Ethical consideration: The investigator obtained ethical clearance from the ethics committee of the institution. The investigator met the subjects and explained the purpose, procedure, benefits, duration of the research, and their role in the study. Investigator obtained informed consent and assured confidentiality of the information.

Data collection procedure: The researcher took permission from the concerned authority before starting data collection. The investigator administered the demographic Performa and structured knowledge questionnaire to the subjects before administering the information booklet on self care management of chemotherapy. The demographic Performa comprised of 15 items which include age in years, religion, educational status, occupation, marital status, type of family, monthly income, family history of cancer, previous history of cancer, age of menarche, age of menopause, whether menopause was chemotherapy induced, have you used contraceptives in past, parity, history of breastfeeding. The knowledge questionnaire comprised of 20 items. The researcher distributed the information booklet to all participants and post test was conducted at the immediate subsequent cycle of chemotherapy. The components of information booklet included the side effects of chemotherapy and its management. The investigator translated the tools to Kannada and then back to English. The participants took nearly 15 minutes to complete the self reported questionnaire

Results

Demographic findings: Distribution of subjects according to the age showed that majority (40%) belongs to more than 60 years. Majority (91.7%) of clients belongs to Hindu religion. 16.7% of the subjects had family history of cancer (breast and stomach) while only 1.67% subjects had previous history of cancer. Only 6% of the client used intrauterine contraceptive such as Cu-T and 15% of subjects were nulliparous.. 85% of subjects' breast fed their children. 75% of the subjects attained their menopause at the age of 50-54 years out of which only 2 subjects had chemotherapy induced menopause.

81.7% of the subjects were married and 83.3% belonged to a modern nuclear family.

Table 1:-Level of knowledge on self-care management.

n=60

LEVEL OF KNOWLEDGE	PRE TEST		POST TEST	
	Frequency(f)	Percentage (%)	Frequency (f)	Percentage (%)
Poor (0-6)	14	23.3	0	0
Average (7-13)	46	76.7	43	71.7
Good (14-20)	0	0	17	28.3

TABLE 2: Effectiveness of information booklet on self-care management during chemotherapy

n=60

Group	Mean	SD	Calculated t-value	df	LOS
Pre - test	7.90	2.072	15.562	59	p<0.001 HS
Post - test	11.63	2.577			

Hs-Highly Significant

The data depicted in the table shows, the 'p' value is less than 0.001 and there was a difference in the mean pre-interventional knowledge score and mean post-interventional knowledge score. Hence the research hypothesis was accepted.

Discussion

The findings of the present study are compared with other studies to translate the available data into information. Majority (40%) of the subjects were above 60 years. Majority (91.7%) of clients belongs to Hindu religion. 16.7% of the subjects had family history of cancer (breast and stomach) while only 1.67% subjects had previous history of cancer. Only 6% of the client used intrauterine contraceptive such as Cu-T and 15% of subjects were nulliparous. 85% of subjects' breast fed their children. 75% of the subjects attained their

menopause at the age of 50-54 years out of which only 2 subjects had chemotherapy induced menopause. 81.7% of the subjects were married and 83.3% belonged to a modern nuclear family.

The above findings are contradicted by descriptive study conducted at multispecialty, teaching hospital in Uttarakhand, on Knowledge Regarding ill Effects of Chemotherapy and Its Home Management among Patients Receiving Chemotherapy showed that majority 22 (37%) of cancer patients falls between the ages of 49 to 64 years; 19 (32%) fell between the ages group 33 to 48 years; 10 (17%) fell between the ages group 65 to 82 years and 9 (15%) were found between 17 to 32 years

In the present study the investigator observed that (28.3%) subjects scored good knowledge and (71.7 %) scored average knowledge related to self

care management of chemotherapy caused side effects and there was a difference between the mean preinterventional knowledge score and mean post interventional knowledge score. Hence the research hypothesis was accepted and the information booklet was effective to improve their knowledge.

A descriptive study on Knowledge Regarding ill Effects of Chemotherapy and Its Home Management among Patients Receiving Chemotherapy was conducted at multispecialty, teaching hospital in Uttarakhand and the result showed majority of the cancer patients (63%) had only satisfactory knowledge, 30% patients showed good level of knowledge and only 7% patients had poor level of knowledge⁴.

Another descriptive cross-sectional hospital based study on Knowledge on Management of Chemotherapy Related Side-effects among 70 Cancer Patients conducted at Bhaktapur Cancer Hospital to support the present study. 54.9% of cancer patients knew that drinking too much liquid during the day removes the harmful agents from the body. 28.4% of the respondents ate high fiber foods with adequate fluid to manage constipation, 45.9% respondents perfumed oral care and gargle 3-4 times daily for management of stomatitis and mucositis, 67.6% of respondents took anti-emetic medication before meals for management of nausea and vomiting, 40.5% of respondents drank more fluid than usually with ORS for management of diarrhea, 43.2% respondent put on scarf and cap/wig for management of hair loss. Over all findings showed that (58.1%) of respondents had average knowledge, (39.2%) had poor knowledge, and (2.7%) had good knowledge on management of chemotherapy related side effects.

Conclusion

The diagnosis of cancer and its treatments are one of the most fearful life events which affect the general wellbeing of patients. Patients require knowledge and understanding about the health condition to overcome

the physical and psychosocial distress caused by the cancer diagnosis and chemotherapy to improve their quality of life and, the health care professionals can play a major role to make them aware and equip with them sufficient knowledge on self-care strategies⁵. The investigator found lack of knowledge among cancer survivors regarding self management of chemotherapy from above study findings; hence there is a need for conducting such studies.

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Conflicts of Interest: None

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