




INTEGRATIVE REVIEW: CONTRIBUTIONS OF NURSING IN THE IMPACT OF CANCER DIAGNOSIS IN THE ELDERLY

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ABSTRACT

Introduction: The natural aging process carries numerous challenges, in this sense, having stable mental health makes it easier to deal with these challenges and develop coping strategies, as well as to help after the diagnosis of diseases, such as cancer.

Objective: To identify the main psychological problems in the lives of the elderly after the

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diagnosis of cancer. **Method:** Integrative literature review, using controlled descriptors. The databases were *Medical Literature and Retrieval System onLine* via the National Library of Medicine; Latin American and Caribbean Literature on Health Sciences and Nursing Databases. The search was carried out with original articles in full, published in Portuguese and English, from 1994 onwards. **Results:** Based on the texts, the following psychological impacts on the elderly after cancer diagnosis were identified, namely: anxiety, anguish, aggression, suicidal behavior, depression, chronic stress, fatigue, uncertainty, bad mood, fear, anger, trauma and sadness. They were related and the most prevalent are anxiety and depression. **Final Considerations:** It is concluded that among the psychological impacts that affect the elderly, there are several factors that can intensify, such as: gender, age, race, existing comorbidities, the type of cancer and the type of treatment, thus making them more vulnerable to mental health problems.

Keywords: Elderly. Aging. Mental health. Cancer. Nursing.

INTRODUCTION

According to the Statute of the Elderly, Law No. 10,741, of October 1, 2003, considers the elderly person to be 60 years of age or older. This is the most advanced stage of life, characterized by several physical and psychological changes. In the National Policy for the Elderly (Law No. 8,842 of January 1994), in its Article 3, among the principles, it is stated that the aging process should be the object of knowledge and information for all. Thus, Brazil has an aging rate of 15.6%, with the amount of 32,113,490 of the resident elderly population (IBGE, 2022).

The natural aging process carries numerous challenges, in this sense, having stable mental health makes it easier to deal with these challenges and develop coping strategies, as well as to help after the diagnosis of diseases. In this sense, the various types of cancers stand out especially, which have a significant impact on the lives of the elderly, compromising their emotional well-being, from the impact of the diagnosis of the disease, as well as the process of acceptance and treatment, which can contribute to the development of psychological problems (Alcântara *et al.*, 2024).

The diagnosis of cancer is associated with the uncertainty of cure, death, pain and suffering, causing great emotional problems to the elderly patient, being extremely difficult to deal with, because in addition to other comorbidities and high age, accepting, understanding and adapting to this condition becomes undesirable, since the series of changes caused by aging already causes a serious psychological impact (Resende; Moraes Filho, 2020).

In view of this, the diagnosis of cancer has a great psychological impact on the lives of the elderly, becoming a challenge to be overcome and closely monitored with the support of nursing professionals who work at different levels of complexity. In view of this, nursing plays an essential role in the care of elderly cancer patients, as it provides humane and comprehensive care, in addition to outlining unique care plans, promoting the biological and psychological well-being of the patient, helping them in the process of accepting the diagnosis of cancer, clarifying doubts and providing better treatment (Lima *et al.*, 2021).

Due to the importance of the problem, and the need for information on the psychological impacts on the elderly after the oncological diagnosis, with the help of nursing in the process of adaptation to the disease, the present research had as a guiding question: What are the most present psychological impacts on the lives of the elderly after the diagnosis of cancer?

To answer it, it was necessary to achieve the following objective: To identify the main psychological problems in the lives of the elderly after the diagnosis of cancer. Thus,

seeking to help in the process of understanding this problem, since the need for information and the importance of the theme have been increasing today.

METHODS

This study consisted of an integrative literature review, as it allows the incorporation of evidence into clinical practice, with the purpose of gathering and synthesizing research results on a delimited theme or issue in a systematic and organized way, which contributes to the deepening of knowledge of the theme. It also includes analysis of relevant research that supports decision-making and improvement in clinical practice (Mendes; Scott; Galvão, 2008).

For this review, the assumptions of Mendes, Silveira, Galvão (2008) were used, organized in six stages: elaboration of the research question; establishment of criteria for the inclusion and exclusion of studies; categorization of studies; evaluation of the studies included in the review; interpretation of the results and presentation of the integrative review.

The research question that was sought to be answered was "What are the most present psychological impacts on the elderly after cancer diagnosis?", elaborated through the PICO strategy, a tool from the *National Library of Medicine* database (Santos; Pepper; Nobre, 2007).

For the selection of these articles, the following bibliographic databases were used: *Medical Literature and Retrieval System onLine* (MEDLINE/PubMed) via the National Library of Medicine; Latin American and Caribbean Literature on Health Sciences (LILACS) and Nursing Database (BDENF). The following descriptors were used: elderly/Aged; mental health; cancer/neoplasms and nursing/nursing with the AND connector as a search strategy selected in MESH (Medical Subject Headings) and DeCs (Health Sciences Descriptors).

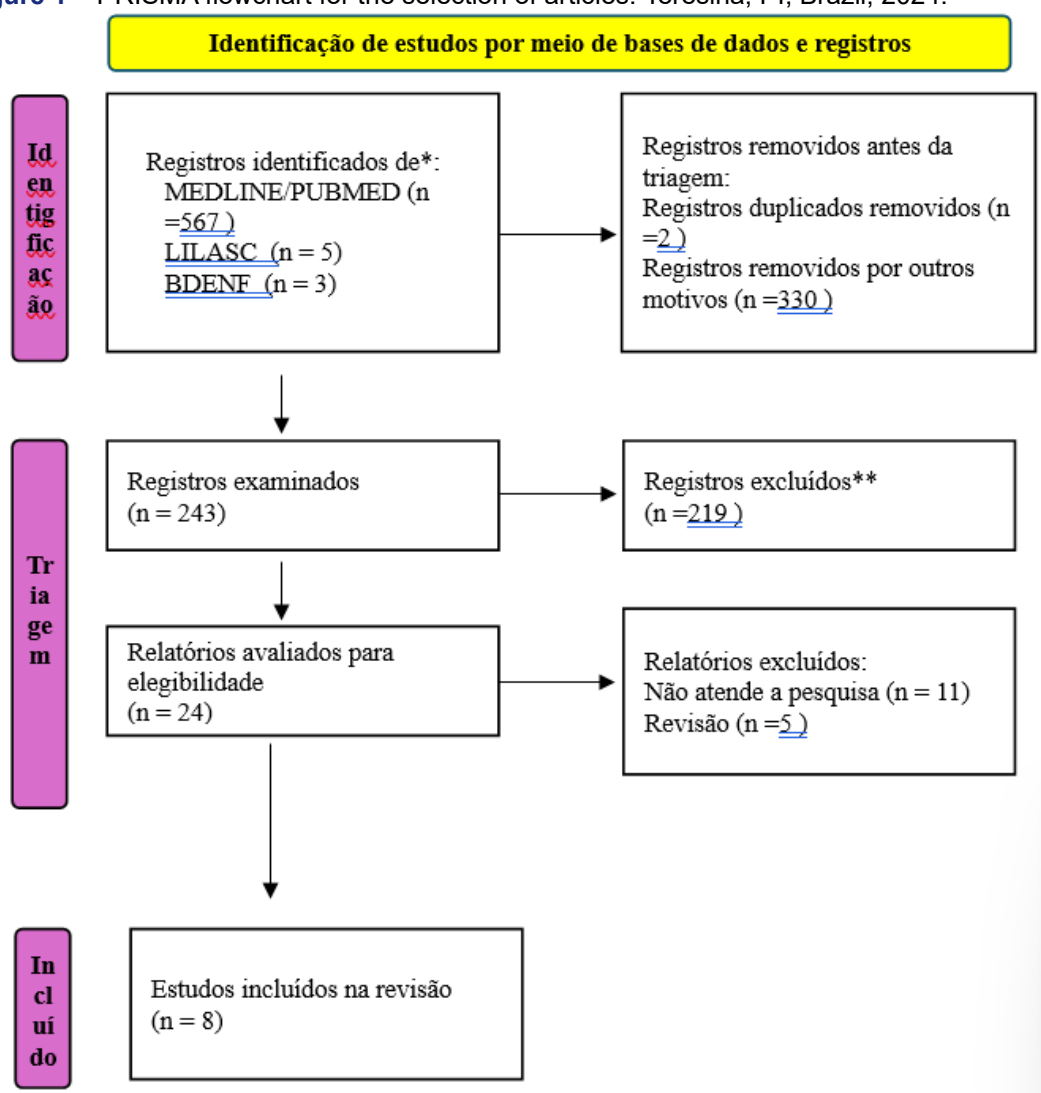
Original articles were included in full, available online and complete in the bibliographic databases chosen and published in Portuguese and English, from 1994 onwards, and the time frame was justified due to the publication of the National Policy for the Elderly in Brazil through Law No. 8,842/1994, until the conclusion of the search in September 2024 (Brazil, 1994). Review articles, theses, course completion papers, dissertations, and articles in which it will not be possible to identify a relationship with the theme through the reading of the title and abstract were excluded.

Data collection took place from August to September 2024. The search and selection of articles were carried out by two reviewers independently to give greater precision to this

procedure. Initially, the selection of studies was carried out by reading the titles and abstracts based on the eligibility criteria.

Articles were considered eligible based on the independent evaluation of peer reviewers, taking into account the relevance, explicit methods of identification, selection, evaluation and synthesis of individual studies. Full-text articles were selected based on pre-established inclusion criteria and any discrepancies were discussed and resolved by the project's researchers. For the screening process of eligible articles, the Preferred *Reporting Items for Systematic Reviews and Meta-Analyses* (PRISMA) flowchart was used, adapted (Page *et al.*, 2022), as shown in figure 1.

Figure 1 – PRISMA flowchart for the selection of articles. Teresina, PI, Brazil, 2024.



Source: Survey data, 2024.

Soon after the applicability of the inclusion and exclusion criteria, an instrument adapted from the literature was used to gather the findings of the articles, highlighting the

following information: author(s), year, database, study design, psychological impacts on the elderly after cancer diagnosis, and conclusions (Ursi; Galvão, 2005).

The articles were analyzed descriptively and the information was organized in the results as shown in chart 01.

RESULTS

The combination of the descriptors, after applying the inclusion and exclusion criteria, resulted in 575 articles. Of these, 567 were found in the MEDLINE/PUBMED database; five found in LILACS and three in the BDENF base. The total number of articles for this review was nine (100%) publications.

Of the publications analyzed, nine (100%) were published in MEDLINE. The year with the highest publication was 2019, with two (22.22%) articles. Regarding the research method, four (44.44 %) were cross-sectional studies. For the analysis and synthesis of the articles that were part of the sample of this study, Chart 1 was used with the synopsis of the results.

Table 1. Characterization of the studies selected in the Integrative Review, Teresina, Piauí, Brazil, 2024 (n=8).

Author(s) / Year / Database	Outline of the study	Psychological impacts	Conclusions
Erim <i>et al.</i> , (2019) MEDLINE	Cohort Study	Depression, trauma, and stress	Depression affects cancer patients up to 5 years after diagnosis. It is evident depending on the type of cancer, race, age, comorbidities, financial situation, recent cancer diagnosis and regret of decision or adherence to treatment.
Choi <i>et al.</i> , (2017) MEDLINE	Sampling method	Suicidal behavior, chronic stress and sadness.	The mental health of cancer patients must be carefully monitored, the need for evaluation and appropriate intervention has been increasing both for patients diagnosed early It gives life as well to long-term cancer survivors.
Solvik <i>et al.</i> , (2020) MEDLINE	Cross-sectional study	Anxiety, depression and fatigue.	The interconnection of physical and mental processes in people with cancer is confirmed by several studies. Physical symptoms and mental health have a strong association, and it is necessary to investigate this relationship between these symptoms.
Verduzco-Aguirre <i>et al.</i> , (2021) MEDLINE	Cross-sectional study	Anxiety, depression, and uncertainty.	The worsening of psychological health and quality of life in elderly people with cancer is directly linked to the uncertainty that arises after the diagnosis with the complexity of the information.
Van Linde <i>et al.</i> , (2020)	Retrospective study	Anxiety, depression, stress,	The clinical evaluation of emotions between patients and physicians/nurses

MEDLINE		moodiness, fear, and sadness.	is a strong point in the course of the treatment of people with cancer.
Rice <i>et al.</i> , (2018) MEDLINE	Convenience Sample	Aggression, depression, anger and suicidal ideation.	The type of cancer and the comorbidities existing in patients are factors that influence the existence of depressive symptoms, as they are more vulnerable.
Wilding <i>et al.</i> , (2019) MEDLINE	Cross-sectional study	Anxiety, depression and fatigue.	All cancer-related symptoms and quality of life are significantly associated with poor mental well-being and psychological distress. Since the type of treatment influences the development of anxiety and fatigue.
Yan <i>et al.</i> , (2024) MEDLINE	Cross-sectional study	Anxiety, anguish, fear and insecurity.	Death anxiety can be converted with interventions that promote acceptance and increase the meaning of life as a defense mechanism.

Source: Author, 2024.

Based on the findings, the article by Erim *et al.*, (2019) is a population-based cohort study of North Carolina prostate cancer survivors who were enrolled from 2004 to 2007 in the North Carolina–Louisiana Prostate Cancer Project (n=1031) and were followed prospectively annually from 2008 to 2011 in the Access to Health Care and Prostate Cancer Treatment study in North Carolina (n = 805).

The study by Choi *et al.*, (2017) highlights a sampling method using data obtained from the Korean National Health and Nutrition Examination Survey (2007–2013), in which it resulted in 1285 cases of elderly people who were diagnosed with cancer and 33,772 participants who were never diagnosed with cancer. The risks of feelings of sadness and suicide attempts among the cancer population and the general population were investigated.

In their cross-sectional study, Solvik *et al.*, (2020) performed descriptive statistics that analyzed the questionnaires answered by 174 elderly people with cancer, living at home. The questionnaire was a Norwegian version of the Edmonton Symptom Assessment System (ESASr), a psychometric instrument tested on the burden of symptoms, including pain, tiredness/fatigue, anxiety and depression.

The article by Verduzco-Aguirre, *et al.*, (2021) is a cross-sectional study of baseline data from a national trial of pooled geriatric assessment. It analyzed patients aged 70 years or older with advanced cancer considering a new line of chemotherapy. Measured uncertainty using the modified nine-item Uncertainty in Mishel Disease Scale. Dependent variables included anxiety (Generalized Anxiety Disorder-7), depression (Generalized Depression Scale-15), distress (distress thermometer), QoL (Functional Assessment of Cancer Therapy and General), and emotional well-being (Functional Assessment of Cancer Therapy and General Subscale).

The study Van Linde *et al.*, (2020) used a consecutive series of patients starting chemotherapy, were recruited during their routine clinical care, in a medical oncology department. Clinical assessment of emotions by oncologists, physicians, and nurses was derived from the patient file. Emotional distress and need for professional mental health care were assessed using the Distress Thermometer and Problem List. This is a retrospective study in a medical oncology department.

Rice *et al.*, (2018) developed in their study a convenience sample of 100 Canadian men with prostate cancer, recruited online and through social media. The Patient Health Questionnaire-9 (PHQ-9) and the Male Depression Risk Scale-22 (MDRS-22) were completed online along with demographic and history variables with a diagnosis of prostate cancer.

Wilding, *et al.*, (2019) used a cross-sectional postal questionnaire that was administered to men from the United Kingdom 18–42 months after diagnosis of PCa. Men completed items on functional outcomes using the Expanded Prostate Cancer Index Composite (EPIC-26), EuroQol-5D (EQ-5D), and the European Organization for Research and Treatment of Cancer (EORTC) fatigue subscale. Psychological outcomes (mental well-being and psychological distress) were assessed.

The author Yan *et al.*, (2024) used a total of 300 cancer patients recruited from a tertiary cancer hospital. A cross-sectional survey was conducted using a demographic and clinical characteristics questionnaire, the Acceptance and Action Questionnaire II, the Meaning in Life Questionnaire, and the Templer Death Anxiety Scale. A total of 315 questionnaires were distributed and 300 valid questionnaires were returned, resulting in a valid response rate of 95.2% correlating with death anxiety, whether positive or negative.

The article by Van Cleave, *et al.*, (2013) is a secondary analysis that used combined subsets of data from 5 nurse-directed interventional clinical trials, targeting patients after surgery at academic cancer centers in the northwestern and northeastern United States.

DISCUSSION

The recognition of the psychological impacts on the elderly after cancer diagnosis shows that it is a major public health problem associated with the mental health of older people. Thus, alternatives for prevention, identification, monitoring and treatment should be sought based on care practices and clinical conducts at the different levels of care of health services for the population.

In this study, this interest of researchers in the international literature is evidenced, as it seeks to guide care and educational practices. Thus, the articles showed several

prevalent psychological impacts in the related studies, as discussed below with greater prominence for the featured authors: (a) suicide: Choi *et al.*, (2017) and Rice *et al.*, (2018), (b) depression: Erim *et al.*, (2019) and Solvik *et al.*, (2020), (c) anxiety: Verduzco-Aguirre, *et al.*, (2021), Wilding, *et al.*, (2019) and Van Cleave, *et al.*, (2013), (d) fear: Van Linde *et al.*, (2020) and Yan *et al.*, (2024).

With the results of the study by Choi *et al.*, (2017), the increased risk of suicide attempts in elderly cancer patients is evident, especially among those who have recently received the diagnosis. Greater support and monitoring is needed for this population.

Also according to the research of Rice *et al.*, (2018) shows that the comorbidities existing in patients are factors that influence the existence of depressive symptoms, as they are more vulnerable, being an increased risk for depression and other emotional changes that lead to suicide.

In the article by Erim *et al.*, (2019) analyzed that the probable depression, present in the lives of cancer survivors in the first 5 years after diagnosis, is justified by the type of cancer, race, age, gender, comorbidities, financial situation, recent cancer diagnosis, and regret of decision or adherence to treatment.

Based on this context, the research by Solvik *et al.*, (2020) also shows that women reported higher anxiety and depression scores than men, associating them with physical symptoms. Thus, it was seen that physical and mental processes are associated, reinforcing the need for care and interventions for the elderly in this situation.

Wilding, *et al.*, (2019) in their study reported that fatigue levels significantly refer to psychological suffering, relating cancer symptoms to quality of life, as well as mental health, showing that anxiety becomes an acquired consequence when receiving the diagnosis, and it is inevitable to have it, but not impossible to treat.

In addition, Van Cleave, *et al.*, (2013) showed that the suffering of symptoms in elderly people with cancer depends on age, existing comorbidities, type of cancer, type of treatment, mental health status, and the way the patient deals with the diagnosis. Associating the psychological impact with numerous factors.

Since the diagnosis of cancer is often accompanied by complexities, causing uncertainty among elderly patients, affecting mental health and quality of life. Being potentiated by existential concerns, the uncertainty caused by the oncological diagnosis is mainly justified by anxiety (Verduzco-Aguirre, *et al.*, 2021).

Overall, most cancer patients experience uncertainties about the effectiveness of treatments, concerns about the subsequent progression of their disease, and fears about

tumor recurrence and metastasis, causing death anxiety, at which time the meaning of life can change, considering cancer as synonymous with death (Yan *et al.*, 2024).

Therefore, Van Linde *et al.*, (2020) emphasizes that clinical evaluation is necessary depending on the mental suffering of each patient, in order to seek effective intervention measures for good treatment, aiming to reduce the fear that is the cause of many psychological disorders.

The review articles give an overview of the problem, but do not explain much of the phenomena described there. Thus, the steps related to the methodology, such as the analysis and selection of articles, following the criteria and the step-by-step review. Thus, through the accurate reading of scientific articles, detailed observation of the parameters used for the production of the research, in addition to the use of evaluation by double checking in pairs of evaluators, aiming at reliability and greater accuracy of the information.

The benefits of the research stand out in relation to the improvement of the nursing process, as well as for promoting the well-being and quality of life of elderly patients diagnosed with cancer. To know the reality about the impact of cancer diagnosis on the lives of the elderly based on what exists in the literature to develop more specific care, focus on the patient's needs and, consequently, train the team for better care.

As well as contributing to the development of more research and bringing knowledge about psychological impacts on the lives of the elderly after the diagnosis of cancer in the context of nursing; as well as an increase in interest in the theme among undergraduate students and nurses.

Therefore, the information obtained from this integrative review shows that there are, especially in the international literature, studies that identify the psychological impacts that affect the elderly after the diagnosis of cancer. In view of the lack of similar studies in Brazil, it is important to analyze the instruments validated in other countries, translate, improve and adapt to the national reality.

FINAL CONSIDERATIONS

According to the studies in this review, the main psychological impacts on the elderly after cancer diagnosis are anxiety, anguish, aggression, suicidal behavior, depression, chronic stress, fatigue, uncertainty, bad mood, fear, anger, trauma, and sadness.

In addition, another important aspect identified among the psychological impacts were the factors that intensify the way each patient is affected. With regard to gender, age, race, existing comorbidities, type of cancer and type of treatment; which leaves them more vulnerable to mental health problems.



Therefore, the studies also bring data that relate the clinical evaluation of emotions between patients and nurses as a strong point in the course of the treatment of people with cancer, requiring more professional training and the advancement of nursing in research and scientific productions that help the work developed by the team.

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