


QUALITY OF LIFE OF CANCER PATIENTS: PSYCHOLOGICAL AND SOCIAL ASPECTS OF CANCER

 <https://doi.org/10.56238/arev6n3-282>

Submitted on: 20/10/2024

Publication date: 20/11/2024

Amanda Duarte de Souza¹, Gabriela de Castro Neves Carmo Maffezoli², Yure Gonçalves Gusmão³, Letícia de Souza Matias⁴, Robert Davis Souza de Oliveira⁵, Talita Cristina de Medeiros Almeida⁶, Larissa Cristina Soares Santos⁷,

¹ Undergraduate student in Nutrition
UNESA

E-mail: amandaduartenuutrii@gmail.com
ORCID: <https://orcid.org/0009-0000-1788-5149>
LATTES: <http://lattes.cnpq.br/0493578812568125>

² Medical Student
Faculty of Medical Sciences of Sandos - FCMS
E-mail: gabrielamaffezoli155@gmail.com
ORCID: <https://orcid.org/0009-0004-5351-3229>

³ Dr. student in Dental Clinic
Federal University of the Jequitinhonha and Mucuri Valleys - UFVJM
Email: yuregusmao@hotmail.com
ORCID: <https://orcid.org/0000-0002-4580-9175>
LATTES: <http://lattes.cnpq.br/3039020087342964>

⁴ Undergraduate student in Nursing
Federal University of the Southern Border
E-mail: leticiadesouzamatias@gmail.com
ORCID: <https://orcid.org/0000-0002-4938-0716>
LATTES: <http://lattes.cnpq.br/7401254330534986>

⁵ Bachelor of Pharmacy Specialization in Oncology and Hospital Pharmacy
Northern University Center
E-mail: robertdavisouza@gmail.com
ORCID: <https://orcid.org/0009-0000-7937-2146>
LATTES: <https://lattes.cnpq.br/1734243445358849>

⁶ Psychiatrist
Doctor João Machado General Hospital - HGJM
Email: talita.almeida.psiq@gmail.com

⁷ Undergraduate student in Nursing
University of the State of Pará - UEPA
E-mail: soares.larissa.lc@gmail.com
ORCID: <https://orcid.org/0009-0001-1221-6373/>
LATTES: <http://lattes.cnpq.br/9475246847761909>

Maria Sandra Ramos Queiroz⁸, Jefferson Adan Cavalcante Lopes⁹ and Élide Lúcia Ferreira Assunção¹⁰

ABSTRACT

Cancer profoundly impacts the lives of patients, requiring approaches that go beyond physical treatment, including psychological, social, and spiritual dimensions. This narrative review explores how these aspects influence the quality of life of cancer patients, highlighting the importance of a multidisciplinary and humanized approach. Studies show that cancer diagnosis and treatment often generate high levels of anxiety and depression, aggravated by bodily changes and stigmas, affecting self-esteem and social life. Social and family support is identified as essential for coping, while spirituality offers comfort and resilience, promoting adaptation and acceptance. The review also emphasizes the need for public policies that ensure access to comprehensive and humanized support, such as home care programs and training of professionals for emotional and spiritual care. It is concluded that comprehensive oncological care is essential for a full quality of life and for the healthy coping with cancer.

Keywords: Cancer. Quality of Life. Psychological Support. Social Support. Spirituality.

⁸ Dr. in Pharmaceutical Sciences
Federal University of Rio de Janeiro – UFRJ
E-mail: msandrarq@yahoo.com.br
ORCID: <https://orcid.org/0009-0000-8449-8392>

⁹ Pharmacist Specialist in Family Health
Federal University of Western Pará
Email: jeffersoncavalcante.stm@gmail.com
ORCID: <https://orcid.org/0000-0002-3197-9448>
LATTES: <https://lattes.cnpq.br/7119576851609311>

¹⁰ Dr. student in Dental Clinics
Federal University of the Jequitinhonha and Mucuri Valleys - UFVJM
Email: elida.assuncao@ufvjm.edu.br
ORCID: <https://orcid.org/0000-0003-4967-6696>
LATTES: <https://lattes.cnpq.br/4739600337013990>

INTRODUCTION

Cancer is one of the main causes of morbidity and mortality in the world, making it one of the chronic conditions with the greatest impact on the lives of patients and their families. Although medical advances have expanded the possibilities of early diagnosis and treatment, this disease remains an experience of great complexity, affecting multiple aspects of the individual's life. The approach to cancer treatment is currently not limited to the control or cure of the disease, but expands to include the promotion of quality of life, recognizing that the experience with cancer also influences the psychological, social and spiritual dimensions of the patient. In this sense, quality of life becomes a relevant metric, influencing adaptation, acceptance, and coping with the challenges imposed by the oncological condition (WHO, 2020).

Although the literature has identified the importance of quality of life for cancer patients, many approaches still focus predominantly on the medical and physical aspects, leaving in the background the emotional, social, and spiritual support necessary to face the disease in a comprehensive way. This gap can result in fragmented approaches, where the exclusive focus on biological treatment does not adequately support the patient's integral well-being. Cancer patients often experience high levels of anxiety, depression, and feelings of isolation, intensified by bodily changes and the stigma of the disease. In many cases, the lack of adequate multidisciplinary support compromises the adaptation and resilience of patients, who face emotional and social difficulties not addressed in traditional treatment (Azevedo et al., 2014).

Given this scenario, it is necessary to investigate and integrate knowledge about the psychological, social, and spiritual aspects that influence the quality of life of cancer patients, considering that a treatment focused on the human being as a whole offers a more complete and effective response. This study is justified by the need to broaden the understanding of interventions that promote not only physical recovery, but also emotional and spiritual support, which are determinant for the adaptation and well-being of patients. An approach that considers all these aspects can contribute to the formulation of more humanized and effective strategies, bringing benefits to cancer treatment and to the health system as a whole (Carrijo et al., 2022).

The quality of life of cancer patients is a field of study that has gained relevance in oncology, especially from a holistic perspective that contemplates beyond the physical effects of the disease. The World Health Organization (WHO) defines quality of life as the

individual's perception of their position in life, in the context of their culture and value system, in relation to their goals, expectations, standards, and concerns (WHO, 2020). In the case of cancer, the impact of the disease is multifaceted and includes physical, emotional, and social changes, as well as a growing need for spiritual and psychological support, which become essential to deal with the treatment process and living with the disease (Mendes, Florio & Oliveira, 2020).

The objective of this study is to analyze the psychological, social, and spiritual aspects that impact the quality of life of cancer patients, seeking to understand how these factors can be integrated into treatment to promote more complete support centered on the patient's well-being. By exploring these dimensions, it is intended to identify best practices and resources that can be applied to improve patient adaptation and resilience, contributing to a multidisciplinary approach in the oncology context.

METHODOLOGY

The method adopted for this study was the narrative review, with the objective of organizing, synthesizing and interpreting the existing literature on the psychological, social and spiritual aspects that influence the quality of life of cancer patients. The narrative review was chosen for its ability to offer a broad and critical view of the theme, being ideal for the exploration of complex and subjective concepts such as emotional coping, social support and the role of spirituality in the oncological context.

To begin the process, a clear delimitation of the theme and objectives of the review was carried out, which focused on identifying and analyzing the psychological, social, and spiritual factors that affect the quality of life of these patients. This definition allowed the establishment of an organized search line and a clear purpose for the survey of sources. Next, academic databases such as PubMed, SciELO, VHL (Virtual Health Library) and Google Scholar were consulted, which offer wide coverage of articles relevant to the health area. To ensure a targeted and complete search, specific keywords were used, such as "quality of life", "cancer patients", "psychological support", "social support", "spirituality" and "coping with cancer". Boolean operators such as "AND" and "OR" were applied to refine the results, ensuring the inclusion of studies relevant to the topic.

RESULTS

The selection of sources followed strict inclusion and exclusion criteria, in order to ensure the relevance and timeliness of the studies analyzed. Among the inclusion criteria, articles published in the last 15 years were selected to reflect current practices and findings, qualitative and quantitative studies that directly addressed psychological, social, and spiritual aspects in cancer patients, and texts in Portuguese, English, and Spanish. As exclusion criteria, articles that did not directly address the quality of life of cancer patients or that did not present information on the specific psychological, social, or spiritual aspects of the theme were discarded.

The analysis and synthesis of the collected data were carried out through a critical and careful reading of the articles, seeking to identify central themes, such as the psychological impact of diagnosis and treatment, the role of support networks and social support, and the relevance of spirituality for the well-being of patients. These themes were organized and described to compose a comprehensive and integrated review, which would serve as a basis for an in-depth understanding of the complexity involved in the quality of life of cancer patients.

DISCUSSION

Cancer is a disease that affects not only the physical health, but also the psychological, social, and spiritual aspects of the patient, imposing challenges that directly impact their quality of life. Mendes, Florio, and Oliveira (2020) point out that spiritual well-being is a factor associated with quality of life in cancer patients, helping them to find meaning in their experience and reducing distress. This spiritual support not only strengthens the coping with the disease, but also provides emotional comfort, an essential aspect for patients who live with such delicate diagnoses.

In addition to spiritual support, palliative care has been shown to be crucial in the quality of life of cancer patients, especially in the advanced stages. Palliative physiotherapy, according to Burgos (2017), plays a fundamental role, relieving symptoms such as pain and limitation of movement. This intervention provides physical and emotional relief, promoting a sense of autonomy and self-esteem to the patient, who often faces difficulties in performing daily activities. This type of care aims to support the patient's global well-being, collaborating to reduce suffering and maintain their dignity.

However, there are significant weaknesses in the care network, especially in regions lacking specialized health resources. Santos et al. (2019) investigated the difficulties and potentialities in the care of patients with oral cancer in Palmas, Tocantins, and identified a precarious infrastructure that compromises comprehensive support for these patients. This limitation directly affects the quality of life of individuals, as it restricts access to treatments and continued care, which are essential for a healthier coping with the disease. In regions where the health system is deficient, the challenges are amplified, leaving the patient more vulnerable and with less support.

The mental health of cancer patients is also a critical aspect, and it is common for anxiety and depression to increase. Bertan and Castro (2010) point out that cancer patients often face high levels of anxiety, which are aggravated by social stigma and the physical changes caused by treatment. Changes in appearance, such as hair loss and weight loss, negatively impact the patient's self-image, contributing to social isolation and lowering their self-esteem. These psychosocial factors increase the need for robust emotional support to help the patient cope with the treatment process and the challenges posed by the disease.

Another relevant aspect is targeted psychological support, which helps the patient to develop healthier coping strategies. Cerezetti (2012) emphasizes the importance of psychological guidance, both for patients and their families, especially in cases of optimization, where the physical changes are even more profound. This emotional support strengthens the resilience of the patient and family, helping them to face difficulties with greater serenity and promoting an environment of mutual understanding and adaptation. The presence of continuous psychological support is essential for the patient and their family to deal with the situation in a more positive and resilient way.

Spirituality and religiosity also emerge as pillars of psychological support. Carrijo et al. (2022) investigated the influence of these elements and concluded that they play a positive role in the quality of life of cancer patients. Spirituality provides a greater meaning for suffering and offers comfort, especially to those who feel helpless. Patients who have a strong spiritual foundation demonstrate lower levels of anxiety, which reflects a more optimistic outlook on the diagnosis and the daily challenges imposed by the disease. Spiritual support is an important resource that helps in emotional coping and promotes a more balanced view of the situation.

Social support is equally important and directly influences the patient's emotional well-being. Fagundes and Soares (2018) highlight that caregivers of cancer patients also

need support, since the emotional and physical burden of care can be exhausting. Caregivers' stress affects both their well-being and that of the patient, as the caregiver often becomes an important emotional support point. Thus, it is essential that caregivers receive psychological support, preventing burnout and promoting a healthier and more balanced care relationship between them and the patient.

The performance of health professionals is a key factor in the quality of life of cancer patients, especially in the identification of emotional and social needs. Azevedo et al. (2014) show that nurses with specific knowledge about the treatment of oncological wounds are better prepared to offer comprehensive support to patients. In addition to treating physical symptoms, these professionals provide emotional support to the patient and family, guiding them and reinforcing the welcoming environment. This comprehensive care, which considers both the physical and psychological aspects, contributes to a more humanized and complete service.

Investment in public policies and programs that ensure universal access to comprehensive cancer care is essential to promote the patient's quality of life. Santos and Fuly (2014) observe that home visits and health education programs significantly improve the quality of life of cancer patients, especially in disadvantaged communities. These programs allow the patient to have access to health care directly at home, reducing travel difficulties and increasing support in the family environment, which contributes to more efficient and humanized care.

Thus, comprehensive care for cancer patients must consider not only the physical and medical dimensions, but also the emotional, social, and spiritual aspects. These factors, according to the studies cited, profoundly influence the patient's well-being, allowing a more balanced and dignified coping with the disease. A robust and multidisciplinary support network, combined with an accessible and efficient health system, is essential for promoting a full quality of life, even in the face of the challenges imposed by cancer.

CONCLUSION

The narrative review points to the importance of a comprehensive and multidisciplinary approach in the treatment of cancer patients, considering psychological, social and spiritual aspects as essential elements for the quality of life of these individuals. Cancer, in addition to affecting physical health, imposes a significant emotional burden and demands specialized support that goes beyond medical treatments. Studies highlight that

the psychological impact, reflected in high levels of anxiety and depression, and changes in self-image require psychotherapeutic interventions that help the patient deal with stress and adapt to the new reality.

In addition, the relevance of social support has been widely discussed in the literature, showing that the support of family, friends, and health professionals promotes greater emotional resilience and contributes to the reduction of feelings of isolation. Support groups and care networks are essential to minimize loneliness and strengthen the patient's sense of belonging. This support should also extend to caregivers, who face an intense emotional burden and need guidance and monitoring to perform their role in a healthy and sustainable way.

Spirituality and religiosity emerge as valuable resources for coping with the disease, offering the patient a source of comfort and a sense of purpose. The literature indicates that patients who maintain religious or spiritual practices tend to deal more positively with the diagnosis and treatment, demonstrating lower levels of anxiety and greater emotional adaptation.

Finally, the implementation of public policies that guarantee access to comprehensive and humanized cancer care is essential to ensure that patients in all regions and socioeconomic contexts receive the necessary support. The development of home care programs and the training of health professionals to deal with the emotional and spiritual needs of patients are fundamental steps in promoting a higher and more dignified quality of life. Thus, the integral understanding of the well-being of cancer patients becomes indispensable for an effective and humanized treatment, which respects the complexity of the experiences lived in the context of oncology.

REFERENCES

1. Almeida, I. F. B. de, Freitas, K. S., Almeida, D. B. de, Lisboa, L. de J., & Oliveira, M. C. (2021). Instrumentos de avaliação da qualidade de vida em indivíduos com distúrbios orais potencialmente malignos: Revisão integrativa da literatura. *Revista da Faculdade de Odontologia da Universidade Federal da Bahia*.
2. Azevedo, I., Costa, R., Holanda, C. S. M. de, Salvetti, M. de G., & Torres, G. de V. (2014). Conhecimento de enfermeiros da estratégia saúde da família sobre avaliação e tratamento de feridas oncológicas. *Revista Brasileira de Cancerologia*, 60(2).
3. Bertan, F. da C., & Castro, E. (2010). Qualidade de vida, indicadores de ansiedade e depressão e satisfação sexual em pacientes adultos com câncer. *Revista Brasileira de Cancerologia*, 1, 76–88.
4. Botelho, A., & Pereira, M. da G. (2015). Qualidade de vida, otimismo, enfrentamento, morbidade psicológica e estresse familiar em pacientes com câncer colorrectal em quimioterapia. *Estudos De Psicologia (Natal)*, 20, 50–60.
5. Burgos, L. (2017). Fisioterapia paliativa aplicada ao paciente oncológico terminal. *Revista FSA*, 21(2), 117–122.
6. Carriço, M. V. N., Souza, G. S. de, Barbosa, A. C., Maier, S. R. de O., & Donadone, J. C. (2022). Espiritualidade, religiosidade e qualidade de vida em pacientes oncológicos: Um estudo transversal. *Revista de Enfermagem da UFJF*, 8.
7. Cerezetti, C. (2012). Orientações psicológicas e capacidade reativa de pessoas ostomizadas e seus familiares. *Revista Brasileira de Cancerologia*, 36(2).
8. Fagundes, A. P. de, & Soares, V. L. (2018). Qualidade de vida de cuidadores de pacientes hospitalizados. *Revista Interinstitucional Brasileira de Terapia Ocupacional - REVISBRATO*.
9. Macêdo, L., Cavalcante, V. M. V., Coelho, M. de M. F., Ramos, S. L. T. C., Correia, D., Menezes, T. A. C., & Rodrigues, A. B. (2020). The perception of ostomized patients with colorectal cancer regarding their quality of life. *Rev Rene*, 21.
10. Mendes, M. do S. S. F., Flório, F. M., & Oliveira, L. Z. A. M. G. (2020). O bem-estar espiritual em pacientes oncológicos: Fatores associados. *Revista FSA*, 17(2).
11. Nucci, N. A. G. (2012). A construção de uma vida e de seu fim. *Revista Brasileira de Cancerologia*, 36(1).
12. Penha, N. S. da, Nascimento, D. E. B. do, Pantoja, A. C. C., Oliveira, A., Maia, C. do S. F., & Vieira, A. C. (2013). Perfil sócio demográfico e possíveis fatores de risco em mulheres com câncer de mama: Um retrato da Amazônia. *Revista de Ciências Farmacêuticas Básica e Aplicada*, 34, 579–584.

13. Ribeiro, J. P., Cardoso, L. S., Pereira, C. M. S., Silva, B. T. da, Bubolz, B. K., & Castro, C. K. (2016). Nursing care in oncology hospitalized patients: Diagnosis and interventions related to psychosocial and psychospiritual needs. *Revista de Pesquisa Cuidado é Fundamental Online*, 8(4), 5136–5142.
14. Santos, M. G. dos, & Fuly, P. dos S. C. (2014). Home visit and health education, promotion of quality of life in oncology patients. *Journal of Nursing Ufpe Online*, 8, 904–909.
15. Santos, R. A. dos, Zambaldi, E., Araújo, R. O. de, Rosa, C. A., & Rosa, A. C. G. (2019). Fragilidades e potencialidades na rede de assistência aos pacientes com câncer de boca em Palmas, Tocantins, Brasil. *Revista de Patologia do Tocantins*, 6(2).