# Available online at <a href="www.ijpcr.com">www.ijpcr.com</a> International Journal of Pharmaceutical and Clinical Research 2016; 8(7): 636-639

ISSN-0975 1556

# Research Article

# A Prospective Study on the Prevalence of Major Depression, Anxiety and Stress among Various Cancer Patients

Mallika S<sup>1</sup>, Ramam Sripada<sup>2\*</sup>, Triveka Pavani P V<sup>1</sup>, Kiran Kumar K<sup>1</sup>, Durga Varalakshmi K<sup>1</sup>, Magharla Dasaratha Dhana Raju<sup>1</sup>

<sup>1</sup>Department of Pharmacy practice, GIET School of Pharmacy, Rajahmundry, Andhra Pradesh, India 533296. <sup>2</sup>Research Scholar, CESCollege of pharmacy, Kurnool, Andhra Pradesh, India, 518218.

Available Online: 15th July, 2016

### **ABSTRACT**

Background: Cancer is one of the major leading causes of morbidity and mortality worldwide. It is one of the most stressful events when a person is diagnosed with it and this stress is often a triggering factor for depression and anxiety. Untreated psychological disorders with any other medical condition may worsen the individuals' quality life. In this study we made an attempt to assess the prevalence of depression, anxiety and stress and their severity among various cancer patients.

Methods: This was a prospective observational study involving different types of cancer patients who were undergoing different treatment procedures for a period of 6 months. Patients of both genders who are above 18 years were included in the study and all types of cancers which are available in the hospital were taken into consideration for assessing depression, anxiety and stress. Patients with past history of psychological disorders were excluded from study. Data was collected by using Depression, Anxiety and Stress Scale (DASS).

Results: During the study period, a sample of 232 cancer patients were interviewed and screened for depression, anxiety and stress. A total of 74 (31.9%) patients were observed with depression/anxiety/stress or in combination. According to age wise categorization, majority of the cancer patients with any kind of disorder (depression/anxiety/stress alone or in combination) were found between the age group of 41 to 50 years (28.4%), followed by the age group of 51 to 60 years (25.7%). Out of the 74 cancer patients with abnormal mental health, 29(39.2%) were observed with depression alone, 16(21.6%) were observed with anxiety alone, 17(23%) were observed with depression associated with stress, 4(5.4%) were observed with anxiety associated with stress and 7(9.4%) were observed with depression associated with both anxiety and stress.

Conclusion: Psychological conditions like depression, anxiety and stress are more prevalent in chronic medical conditions like cancer. In our study 31.9% of the patients were observed with depression alone or anxiety alone or in combination associated with stress. Females are more prone to depression and males are more prone to anxiety. The prevalence of depression alone was observed to be high when compared to the remaining disorders. Our results revealed that patients with breast cancer and gynaecological cancers have the highest prevalence of depression and anxiety (often associated with stress) among all the cancers.

Keywords: Anxiety, Cancer, Depression, Stress

#### INTRODUCTION

Cancer is one of the major leading causes of morbidity and mortality worldwide. It is distressing for both patients and their care takers<sup>1</sup>. Patients have to deal with the emotional impact of their illness and poor prognosis, in addition to their suffering<sup>2</sup>. Cancer is one of the most stressful events when a person is diagnosed with it and this stress is often a triggering factor for depression and anxiety<sup>3</sup>. Fear of death, change in social role& life style and interruption in their life plans are some of the important issues encountered by the cancer patients<sup>4</sup>. Oncologists should play a significant role in recognizing the above psychological conditions and should refer to the psychiatrists for better patient care<sup>5</sup>. Untreated psychological disorders with any other medical condition may worsen the individuals' quality life<sup>6</sup>. Studies from India were very limited in the aspect of depression, anxiety and stress among cancer patients. Hence in this study we made an attempt to assess the prevalence of depression, anxiety and stress and their severity among various cancer patients.

# MATERIALS AND METHODS

This was a prospective observational study involving different types of cancer patients who were undergoing different treatment procedures at Ganni Subba Lakshmi Trust Cancer Hospital and Research Centre, Rajahmundry for a period of 6 months. Patients of both genders who are above 18 years were included in the study and all types of cancers which are available in the

Table 1: DASS Scores For The Assessment Of Depression, Anxiety And Stress

Severity	Depressio n	Anxiety	Stress
Normal	0-9	0-7	0-14
Mild	10-13	8-9	15-18
Moderate	14-20	10-14	19-25
Severe	21-27	15-19	26-33
Very severe	28+	20+	34+

Table 2: Gender wise categorization of the cancer patients included in the study

patients included in the study				
	Patients with any kind			
	of disorder	Total (%)		
Normal	(Depression / Anxiety/			
	Stress Or In			
	combination)			
56	17	73(31.5)		
102	57	159(68.5)		
102	31	139(06.3)		
158(68.	74(31.0%)	232(100)		
1%)	74(31.9%)	232(100)		
	Normal 56 102 158(68.	Patients with any kind of disorder  Normal (Depression / Anxiety/ Stress Or In combination)  56 17  102 57  158(68. 74(31.9%)		

Table 3: Age wise categorization of all the cancer patients with depression/anxiety/stress alone or depression associated with anxiety/stress or stress associated with anxiety and depression associated with both stress and anxiety

Male	Female	Total	Percentage
2	0	2	2.7%
Z	U	2	2.1%
2	0	2	2.7%
Z	U	2	2.1%
2	10	1.4	100/
2	12	14	19%
_	16	21	20.40/
3	10	21	28.4%
4	1.5	10	25.7%
4	13	19	23.1%
2	11	12	17.5%
2	11	13	17.5%
0	2	2	40/
U	3	3	4%
17	57	74	100%
	2 2 2 5 4 2 0	2 0 2 0 2 12 5 16 4 15 2 11 0 3	2 0 2 2 0 2 2 12 14 5 16 21 4 15 19 2 11 13 0 3 3

depression, anxiety and stress. Patients with past history of psychological disorders were excluded from study. Data was collected by using Depression, Anxiety and Stress Scale (DASS). Table 1 represents the severity scores of depression, anxiety and stress according to DASS. *Statistical analysis* 

SPSS 21.0 was used to perform the statistical analysis, odds ratio was done to obtain the interventions and conclusions about the effects of the events (depression/anxiety/stress).

Table 4: Distribution of disorders among cancer patients with depression/anxiety/stress or in combination

Combination			
Disorder	Male	Female	Total (%)
Depression	7	22	20(20.2)
alone	,	22	29(39.2)
Anxiety alone	6	10	16(21.6)
Stress alone	0	0	0
Depression			
associated	1	16	17(23)
with Anxiety			
Stress			
associated	0	1	1/1 4)
with	U	1	1(1.4)
Depression			
Stress			
associated	1	3	4(5.4)
with Anxiety			
Stress			
associated			
with	2	5	7(9.4)
Depression			
and Anxiety			
Total	17	57	74(100)

Table 5: various types of cancers included in our study for screening the depression, anxiety and stress.

S. No	Diagnosis	Total	Percentage
1.	Breast cancer	26	35.2%
2.	Gynaecological cancers	14	19%
3.	GI cancers	11	14.8%
4.	Cancers of Respiratory system	5	6.8%
5.	Male genitourinary tract cancers	3	4%
6.	Head and neck	7	9.4%
8.	Hematological cancers	3	4%
9.	Others	5	6.8%
10.	Total	74	100%

#### **RESULTS**

During the study period, a sample of 232 cancer patients were interviewed and screened for depression, anxiety and stress. Out of these 73 (31.5%) were males and 159 (68.5%) were females. A total of 74 (31.9%) patients were observed with depression/anxiety/stress or in combination. Among them, 57 (77%) were found to be females and 17 (23%) were found to be males. Table 2 represents the gender wise categorization of the cancer patients included in the study. According to age wise categorization, majority of the cancer patients with any kind of disorder (depression/anxiety/stress alone or in combination) were found between the age group of 41 to 50 years (28.4%), followed by the age group of 51 to 60 years (25.7%). Table 3 represents the age wise categorization of all the cancer patients with depression/ anxiety/ stress alone or depression associated with anxiety/stress or stress

Table 6: Gender wise categorization of cancer patients with depression alone

Gender	Males (%)	Females (%)	Total (%)	Odds ratio	p-value
Depression observed	7(3)	22(9.5)	29(12.5)		
Depression not observed	66(28.4)	137(59.1)	203(87.5)	0.66	0.36
Total	73(31.5)	159(68.5)	232(100)		

Table 7: Gender wise categorization of the cancer patients with anxiety alone

Gender	Males (%)	Females (%)	Total (%)	Odds ratio	p-value
Anxiety observed	6(2.6)	10(4.3)	16(6.9)		_
Anxiety not observed	67(28.9)	149(64.2)	216(93.1)	1.33	0.59
Total	73(31.5)	159(68.5)	232(100)		

Table 8: Severity of depression among the cancer patients diagnosed with depression alone

patients dia	patients diagnosed with depression alone					
Severity	Male	Female	Total	Percentage		
Mild	4	17	21	72.4%		
Moderate	3	5	8	27.6%		
Severe	0	0	0	0%		
Very Severe	0	0	0	0%		
Total	7	22	29	100%		

associated with anxiety and depression associated with both stress and anxiety. Out of the 74 cancer patients with abnormal mental health, 29(39.2%) were observed with depression alone, 16(21.6%) were observed with anxiety alone, 17(23%) were observed with depression associated with anxiety, 1(1.4%) was observed with depression associated with stress, 4(5.4%) were observed with anxiety associated with stress and 7(9.4%) were observed with depression associated with both anxiety and stress. Table 4 represents the distribution of disorders among cancer patients depression/anxiety/stress with combination. Table 5 represents the various types of cancers included in our study for screening the depression, anxiety and stress. Majority of the patients were observed with breast cancer followed by gynaecological cancers. Among the 74 cancer patients with abnormal mental health 29(12.5%) were observed with depression alone and 16 (6.9%) were observed with anxiety alone. Table 6 represents the gender wise categorization of cancer

patients with depression alone and table 7 represents the gender wise categorization of cancer patients with anxiety alone. The severity of depression among the cancer patients diagnosed with depression alone and the severity of anxiety among the cancer patients diagnosed with anxiety alone were represented in table 8 and 9 respectively. Out of 29 depressed cancer patients 21(74.2%) were found to be mildly depressed, 8 (27.6%) were found to be moderately depressed and no patient was found to be severely or very severely depressed. And among the 16 cancer patients with anxiety, 6 (37.5%) were found to be with mild anxiety, 8 (50%) were found to be with moderate anxiety, 2 (12.5%) were found to be with extremely severe anxiety and no patients were found to be with severe anxiety. Among the 232 cancer patients, no patients were found to be with stress alone. Stress among the cancer patients was

Table 9: Severity of anxiety among the cancer patients diagnosed with anxiety alone

aragnosta .		ory arong		
Severity	Male	Female	Total	Percentage
Mild	3	3	6	37.5%
Moderate	3	5	8	50%
Severe	0	0	0	0%
Very Severe	0	2	2	12.5%
Total	6	10	16	100%

associated either with depression or with anxiety or with both depression and anxiety.

Type of cancer therapy taking

Out of 74 cancer patients with abnormal mental health 46 (62.2%) were observed to be on chemotherapy, 25 (33.8%) were found to be on radiation and 3 (4%) have completed their treatment and they are coming for follow up. Table 10 represents the Present treatment of the cancer patients with depression/anxiety/stress alone or with depression associated with anxiety/stress or anxiety associated with stress or depression associated with both anxiety and stress.

#### DISCUSSION

In our study 12.5% of the patients with various cancers were suffering from depression alone and 6.9% of the cancer patients were suffering with anxiety alone. Most of the patients were found to be in middle age either suffering with a psychological disorder alone or in combination. Among the psychological disorders in our study depression alone was found to be more prevalent followed by depression associated with anxiety disorder. In our study the severity of depression was found to be mild (72.4%) and the severity of anxiety was found to be moderate (50%). No patients were observed with stress alone. It is associated with either depression or anxiety or with both depression and anxiety. In our study majority of the persons with depression alone or anxiety alone or in combination were observed with breast cancer (35.2%) followed by gynaecological cancers. In case of breast cancer most of the patients were observed with depression associated with anxiety and in case of gynaecological cancers most of the patients observed with depression alone.

Table 10: Present treatment of the cancer patients with depression/anxiety/stress alone or with depression associated with anxiety/stress or anxiety associated with stress or depression associated with both anxiety and stress

Disorder	Chemotherapy	Radiation	Completed	Total (%)
Depression	17	12	0	29(39.2)
Anxiety	11	3	2	16(21.6)
Stress	0	0	0	0
Depression associated with anxiety	11	6	0	17(23)
Depression associated with stress	1	0	0	1(1.3)
Anxiety associated with stress	1	3	0	4(5.4)
Depression associated with both anxiety and stress	5	1	1	7(9.5)
Total(%)	46(62.2)	25(33.8)	3(4)	74(100)

#### **CONCLUSION**

Psychological conditions like depression, anxiety and stress are more prevalent in chronic medical conditions like cancer. In our study 31.9% of the patients were observed with depression alone or anxiety alone or in combination associated with stress. Females are more prone to depression and males are more prone to anxiety. Majority of the middle aged persons were involved with at least one of the above psychological conditions. The prevalence of depression alone was observed to be high when compared to the remaining disorders. Our results revealed that patients with breast cancer and gynaecological cancers have the highest prevalence of depression and anxiety (often associated with stress) among all the cancers. It is the responsibility of all the health care professionals to create awareness regarding the psychological disorders among various chronic medical conditions in order to improve the quality of life.

## **ACKNOWLEDGEMENTS**

Authors wish to acknowledge all the subjects who involved in the study for their kind cooperation.

#### REFERENCES

- 1. Haun M, Sklenarova H, Brechtel A, Herzog W, Hartmann M. Distress in Cancer Patients and Their Caregivers and Association with the Caregivers' Perception of Dyadic Communication. Oncol Res Treat 2014;37:384-388.
- 2. Van der Lee ML, Swarte NB, Van der Bom JG, Van denBout J, Heintz AP. Positive feelings among terminally illcancer patients. Eur J Cancer Care (Engl) 2006;15:51–55.
- 3. Nikbakhsh N, Moudi S, Abbasian S, Khafri S. Prevalence of depression and anxiety among cancer patients. Caspian J Intern Med 2014; 5(3): 167-170.
- 4. Massimo Pasquini, Massimo Biondi. Depression in cancer patients: a critical review. *Clinical Practice and Epidemiology in Mental Health* 2007; 3:2 doi:10.1186/1745-0179-3-2.
- 5. Michael Miovic, Susan Block. Psychiatric Disorders in Advanced Cancer. *WileyInterScience* 2007; 10.1002/cncr.22980
- 6. Annunziata MA, Muzzatti B, Mella S, et al. Fatigue, Quality of Life, and Mood States during Chemotherapy in Italian Cancer Patients. Tumori 2013; 99: e28-33.