

Assessment of depression for cancer patient in the medical wards at Al Diwaniyah Teaching Hospital

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Abstract

A descriptive study is conducted throughout the period of 5/7/2022 to 3/12/2022 in order to determine the level of Depression for Cancer Patient in Diwaniyah Teaching Hospital. A simple random sample of (30) subjects was selected through the use of probability sampling approach. Data is collected through the use of tool. It is comprised of questionnaires socio demographic data and use test Aaron Temkin Beck for Depression. Data is collected through the utilization of constricted questionnaires and the interview technique. Each interview takes approximately (5-10) minutes. The data are analyzed through the application of descriptive and inferential statistical analysis to measurement of study. The findings of the present study indicate more present of the study sample with moderate depression 43% and less than of the study sample with very acute depression 6.6%. The study recommended to put the plan to treated the depression status with cooperated psychiatric department.

Keywords: moderate depression, beck depression inventory (BDI), Al Diwaniyah Teaching Hospital

Introduction

Most often, cancer patients suffer from signs and symptoms of depression, which have a negative impact on the quality of life that a person lives, his use of treatment, his use of medical services (Andersen et al., 2014; Chida et al., 2008)^[1,2]. Cancer patients, who have depression, reported as a prevalent condition, vary according to clinical characteristics, type and perception of depression, and the methods and criteria by which the disease is diagnosed. (Massie, 2004)^[4]. It is within the first five years of its spread when the cancer is diagnosed (Mitchell et al., 2012; Pitman et al., 2018) [5, 7] As the percentage ranges from 4% to 20%, of patients with cancer, depression remains without treatment and without knowledge and diagnosis (Walker et al., 2014) ^[10]. The National Comprehensive Cancer Network (NCCN) recommends the immediate use of detection and evaluation in periodic clinical examination for early detection of whether there is cancer (National Institute for Clinical Excellence et al., 2004)^[6] and too the American Society of Clinical Oncology (ASCO) (Andersen et al., 2014) [1] Published recommendations emphasizing the importance of knowing symptoms of depression and having them regularly assessed through care. These guidelines highlight the application of standardized procedures, agreed upon for tumor carriers, with some of the depression assessment mechanisms being used effectively in this regard. An investigation into the validity of measures of depression used in self-assessment is an important contribution in this regard. When used appropriately, these tools are a costeffective tool for identifying symptoms and signs of depression, and reduce the time and resource consumption of

routine interviews. (Vodermaier *et al.*, 2009; Wakefield *et al.*, 2015) ^[8, 9]. Also, the selection of self-reported actions should be made through the validation tools included for the community of interest (Ziegler *et al.*, 2011) ^[12]. However, ascertaining depression in patients with cancer will be particularly difficult, because many of the signs and symptoms of depression overlap with signs and symptoms of cancer or may be side effects of cancer treatment. In addition, some of the signs and symptoms may actually be the balance of the response when the patient is exposed to a situation that threatens his life or physical safety, difficult treatments, and pain (Ha *et al.*, 2019) ^[3].

Cancer is one of the chronic diseases that is witnessing a large spread in this era among all age groups and in all countries without exception, and studies attribute the rate of its rapid spread to the transformations that take place on food from chemical treatments, whether during the period of its cultivation, canning or preservation, without awareness About the extent of the harm of these chemicals to the health of the individual, however, this disease is not only due to these nutritional developments, but is also linked to the rapid changes that affected the individual's lifestyle from a psychological and social point of view (Ramadan, 2014)^[11].

Aim of this study

Evaluation of the level of anxiety and depression among patients with cancer in Al-Diwaniyah Hospital. To identify the effect of demographic characteristics on the level of anxiety and depression among patients with cancer in Al-Diwaniyah Hospital.

Methodology

Research design

A descriptive cross-sectional research titled (Evaluation of Anxiety and Depression for Patients with Cancer in Al-Diwaniyah Teaching Hospital).

Research sample

To determine the level of anxiety and depression for patients with cancer in Al-Diwaniyah Teaching Hospital, a simple random sample of (30) respondents was selected through the use of potential sampling methods. Place of conducting the research:- The place of conducting the research is Diwaniyah Teaching Hospital.

The questionnaire research tool

After an extensive review of the research literature, the use of the Beck Test and Depression Scale and Test for Depression and Anxiety was conducted by psychiatrist Aaron Temkin Beck, currently a professor at the University of Pennsylvania. The research tool was built for the purpose of the study, and it consists of two parts:

- 1. Personal information, including gender, age, educational attainment, economic level, and social level.
- 2. Using the Beck scale and test for depression.

Data collection and analysis

The process of collecting information started from 4/8/2022 until 6/10/2022 for a sample consisting of 30 patients in Al-Diwaniyah Teaching Hospital.

Depression was measured using the (Beck) scale and test for depression, to obtain statistical data, Excel 2016 and SPSS statistical software version 22 were used.

Results of the study

Table 1: Shows the frequency and the percentage of the age groups
of the study sample in Al-Diwaniyah General Hospital

N	Catagoria	Fre	quency	Percent		
	Categories	Male	Female	Male	Female	
1	Less Than 20	1	0	%3.40	%0	
2	29-20	1	2	%3.40	%6.60	
3	39-30	2	0	%6.60	%0	
4	49-40	1	3	%3.40	%10	
5	59-50	2	5	%6.60	%16.60	
6	اکثر من 60	5	8	%16.60	%26.80	
Total		12	18	%40	%60	
			30	%100		

Table 2: Shows the frequency and the percentage of educational
attainment for the study sample at Al-Diwaniyah General Hospital

Ν	Categories	Frequency	Percent
1	Can neither read or write	12	%40
2	Can read and write	3	%10
3	Primary	7	%23.40
4	Secondary	7	%23.40
5	Diploma/University	1	%3.20
	Total	30	%100

 Table 3: Shows the frequency and percentage of the economic level

 and the social level of the study sample in Al-Diwaniyah General

 Hospital

\mathbf{N}	Economic level	Frequency	Percent
1	Low	15	%50
2	Moderate	13	%43.40
3	High	2	%6.60
	Total	30	%100
Ν	Social Status	Frequency	Percent
1	single	7	%23.40
2	Married	23	%76.60
	Total	30	%100

Table 4	: Shows the	level of	depression	measured by	Beck's	depression	inventory	for the study	sample i	n Al-Diwaniyah	General Hospital
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Evaluation	Normal	Mild depression	Moderate depression	Severe depression	Very severe depression	Total
Score	1-9	10-15	23-16	36-24	37 and more	20
Frequency	3	4	13	8	2	50
Percent	%10	%13.40	%43.40	%26.60	%6.60	%100

Discussion

The results of the study showed that the highest percentage of the sample studied in terms of academic achievement are categories that cannot read or write, and the percentage reached 40%, while the lowest percentage was from the diploma / university category, where the percentage reached 3.2% of the sample studied.

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The results of the study showed that the highest percentage of the surveyed sample in terms of the economic level is the simple level, as the percentage reached 50% of the total sample, and the lowest percentage is the high level, as the percentage reached 6.6% of the total sample, while the lowest percentage in the social status was the percentage of married people amounted to 76.6, thus making up the largest percentage of the total sample.

The results of the study showed that the highest percentage of the study sample suffered from moderate depression, reaching 43.4% of the total sample, while the lowest percentage of the total sample suffered from very severe depression, reaching 6.6%.

Conclusions

- a) The highest percentage of the study sample suffers from moderate depression, reaching 43.4% of the total sample, while the lowest percentage of the total sample suffers from very severe depression, reaching 6.6%.
- b) The largest age group for the sample studied is the category (more than 60) males, where the percentage reached 26.8%, while there are no individuals in the sample who are less than 20% females.

d) The highest percentage of the sample studied in terms of the economic level is the simple level, as the percentage reached 50% of the total sample.

Recommendations

- a) Working on special programs that help patients from the economic side, such as providing free medicines.
- b) Developing a plan to treat depression cases suffered by patients in cooperation with the Department of Psychiatry.
- c) Work on care programs for the elderly, where most of the patients are elderly, in cooperation with the competent authorities.
- d) Doing more studies on assessing the psychological state of cancer patients.

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