Correlates of Functional Status Profile Among Cancer Patients On Chemotherapy

THESIS

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By

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SUMMARY

The purpose of this study was to identify correlates of functional status profile among cancer patients on chemotherapy. The following research questions were formulated: a) What are the common problems related to cancer and chemotherapy as a treatment modality? b) What are the functional status profiles among cancer patients receiving chemotherapy? and c) What are tthe correlates of functional status profile of cancer patients receiving chemotherapy?

A sample of 50 adult patients (15 males and 35 females) undergoing chemotherapy were recruited for this study. Most patients (60 %) aged over 44 years (ranging from 18-65 years).The majority of sample were married, housewives, and illiterate. More than half of patients (52 %) had non-Hodgkin`s lymphoma. Almost two-thirds of patients were living in rural areas.

The following tools were utilized for data collection: a) Inventory of Functional Status Cancer adopted from Tulman et al., (1991) and adapted by the researcher, b) Patient Assessment Monitoring Record (PAMR) designed to record pulse, blood pressure body surface area etc., c) Demographic data and medical information sheet. Semi structured interview and patient observation were utilized to collect data. The study was carried out in the Medical Oncology Departments and Out-patient Clinics of EL-Mansoura University Hospital.

Results of this study were stated to answered the three research questions: *As regards to, the first question*, the most common problems reported by study subjects at the middle and by the end of chemotherapy were as follows: dry

mouth, taste change, nausea, alopecia, poor appetite, vomiting, weakness, mouth sore and bone ache. *In relation to second question:* there were statistically significant differences in functional status dimensions over time, from start of chemotherapy to three months after, demonstrated in personal care, household activities and social activities, as well as over all functional status ($p<0.05$). *As regards to, the third research question,* there was no statistically significant difference in marital status, residence, number of cycles, weight, occupation and comorbidity before and after treatment, while there were statistically significant relation between functional status mean scores and educational level ($p<0.05$), and number of dependent ($p<0.05$) before and after treatment. Age was negatively correlated with functional status mean scores before and after treatment. Beside gender was significantly better among males through functional status ($p<0.05$). However, there were positive relations between hemoglobin, body surface area and functional status. In relation to assessment of side effects, there were significant relations between functional status mean scores and weakness ($p<0.05$), sadness ($p<0.05$) and pain ($p=0.04$), over time of treatment.

The study concluded that patients receiving chemotherapy suffer from a multitude of side effects affecting may manifest not only at a physical or physiological level but can be associated with psychosocial squeal resulting in emotional and social issue. Consequently, regular and comprehensive nursing intervention for follow up of these patients is necessary for life saving. Therefore, cancer patients experience low functional status on the start of chemotherapy and these was slight improvement during, by the end and after three months of treatment.

Results of this study implicated the need for planning and immplementing nursing intervantionfor cancer chemotherapy which are tailored according to their needs with peroidical training of health team in methods of self-care education.

Replication of the this study on a larger probability sample from other geographical areas, to achieve generelizable results.