Dokumenttyp: Zeitschriftenaufsatz


Titel des Beitrags: Coping of Cancer Patients During and After Radiotherapy -- a Follow-Up of 2 Years

Abstract:
Aim: We wanted to understand coping strategies specific to different phases up to two years after radiotherapy, to identify patients who are at higher risk of mood disturbances and to characterise the association between coping strategies and psychosocial adaptation. Patients and Methods: From 1997 to 2001, 2,169 patients with different diagnoses were screened (27.8% refused to participate). Data of 276 patients from the beginning of radiotherapy (t1) and 5 follow-up investigations (t6/2 years) could be analysed. With the FKV (Freiburg Questionnaire Coping with Disease) cancer-specific coping aspects were assessed. The association between coping styles and psychosocial adaptation was evaluated using the Questionnaire on Stress in Cancer Patients (QSC) and the questionnaire on Functional Assessment of Cancer Treatment (FACT-G). Results: ‘Active problem-orientated’ coping and ‘distractions’ are the most important coping strategies. Only ‘active problemorientated’ and ‘depressive’ coping showed a significant decrease. We observed higher means on the scales of the FKV in women. Marital status (single, married, divorced/widowed) had a significant influence on active problem-orientated coping and spirituality. Age, children, education, T/M status and curative/palliative
intention of treatment had no influence on coping styles. Breast cancer patients and lymphoma patients demonstrated the highest use of coping strategies after radiotherapy with a significant decrease of ‘active problem-orientated coping’. Depressive coping and minimizing importance at ti1 were associated with high psychosocial distress and low quality of life (QoL) at ti6. Conclusion: The correlation of coping mechanisms at the beginning of radiotherapy with low QoL and high psychosocial stress at 2 years could help to identify patients at risk for low psychosocial adaptation. Psychooncologically trained teams of physicians would best correspond to this profile of needs and would contribute significantly to an ameliorated adaptation of patients to cancer which could lead to higher life satisfaction.