

# Assessing Supportive Care Needs Among Breast Cancer Survivors: A Cross-Sectional Study

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## Abstract

Breast cancer poses a significant global health challenge and ranks among the primary causes of cancer-related morbidity and mortality worldwide. The objective of this study was to evaluate the supportive care needs of survivors of breast cancer and examine how these needs are related to various background factors. To accomplish this, a cross-sectional study was carried out with 116 breast cancer survivors, selected using a convenient sampling method. Data were gathered using a modified version of the Supportive Care Needs Survey-Short Form, which includes 34 items designed to assess cancer-specific perceived needs across five areas: psychological support, health systems and information, physical and daily living needs, patient care and support, and sexuality. Participants rated their need for assistance over the past month on a scale of 1 to 5, where 1 indicates no need, 2 indicates satisfaction, 3 signifies low need, 4 represents moderate need, and 5 reflects high need. The data analysis utilized both descriptive and inferential statistics. The mean scores and standard deviations for psychological needs were  $29.8 \pm 3.5$ , health systems and information needs were  $32.3 \pm 4.2$ , physical and daily living needs were  $15.2 \pm 2.6$ , patient care and support needs were  $15.06 \pm 2.7$ , and sexuality needs were  $8.7 \pm 2.1$ . Overall, the mean total score for supportive care needs was  $101 \pm 9.87$ . Significant association with the educational level, marital status, employment status, social support, radiation therapy, chemotherapy and hormone therapy were noted  $p < 0.05$ . The study results showed that the highest supportive care needs was the demand for health system and information, and the lowest for sexuality.

**Keywords:** Breast cancer, supportive care needs, survivors, psychological support, physical

## INTRODUCTION

Breast cancer is the most prevalent cancer among women worldwide, representing 25% of all cancers diagnosed in females. In India, it appears to be the most frequent type of cancer, comprising 28.2% of all female cancer cases, with an estimated 216,108 diagnoses expected by 2022. International Agency for Research on Cancer, World Health Organization (2023) addressed that breast cancer deaths in South-East Asia region are expected to increase to 61.7% by 2040 [1]. In recent years, comparable to

the rising prevalence of breast cancer worldwide, the patient's survival rate has increased due to early detection and advancement in medical care. Breast cancer survivors represent the largest segment of cancer survivors, each with specific needs. The term "breast cancer survivors" is defined as individuals who have received a confirmed diagnosis of breast cancer, regardless of the stage of the disease. Supportive care is described as a personalized approach aimed at addressing the informational, emotional, spiritual, social, and physical needs of those affected by cancer throughout the diagnosis, treatment, and follow-up phases [2].

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The need for counseling on stages of cancer and treatment options is vital for cancer patients during as well as post treatment. Breast cancer survivors face a range of challenges resulting from either the disease itself or its treatment. These problems include fatigue, pain, osteoporosis and early menopause; inability to cope with the disease, traumatic stress, distress, depression, fear of recurrence, family worries, sexual problems and infertility [3].

Support services for cancer patients and survivors are crucial for addressing the numerous challenges they encounter throughout their journey, including emotional distress, financial concerns, and transportation issues. These services are vital for fostering optimal care and overall well-being. Research has highlighted several common unmet supportive care needs, including informational, physical, psychological, spiritual, and practical daily living requirements. Factors, such as younger age, advanced disease stage, prolonged cancer treatment experience, and ongoing anticancer therapies have been identified as predictors of these unmet needs. Patients often experience a range of issues, including physical, psychological, emotional, and practical challenges [4].

As the number of survivors continues to rise, their diverse needs pose significant challenges for healthcare providers and policymakers in delivering high-quality care. If these needs are not adequately addressed, it can result in adverse outcomes, such as lower patient satisfaction, poor treatment adherence, diminished quality of life, and heightened anxiety and depression. As the trend in modern medicine is changing from disease-based model to patient-centered model, where patients are the core, their preferences and needs are greatly considered in provision of care [5].

Given the rising incidence of breast cancer in India, particularly among women of reproductive age, it is essential to comprehend their perceptions of their needs. This understanding can be effectively achieved through qualitative in-depth interviews. Accordingly, this study aims to investigate the supportive care needs of breast cancer survivors in a selected setting [6].

### **Statement of the Problem**

This research seeks to explore the supportive care needs of breast cancer survivors at a designated oncology hospital in Villupuram, Tamil Nadu.

### **Objectives**

1. To evaluate the supportive care needs of breast cancer survivors.
2. To examine the relationship between various background factors and supportive care needs.

### **Methodology**

Ethical approval was secured from the institution and relevant authorities. A quantitative, non-experimental cross-sectional study was conducted to evaluate the supportive care needs of 116 breast cancer survivors, who were selected using a convenience sampling method [7]. The data collection tool consisted of two sections:

#### **Part I**

This included demographic variables, such as age, educational background, marital status, family income, employment status, household composition, social support, place of residence, co-morbidities, time since diagnosis, stage at diagnosis, type of surgery, and treatments including chemotherapy, radiation therapy, and hormone therapy [8].

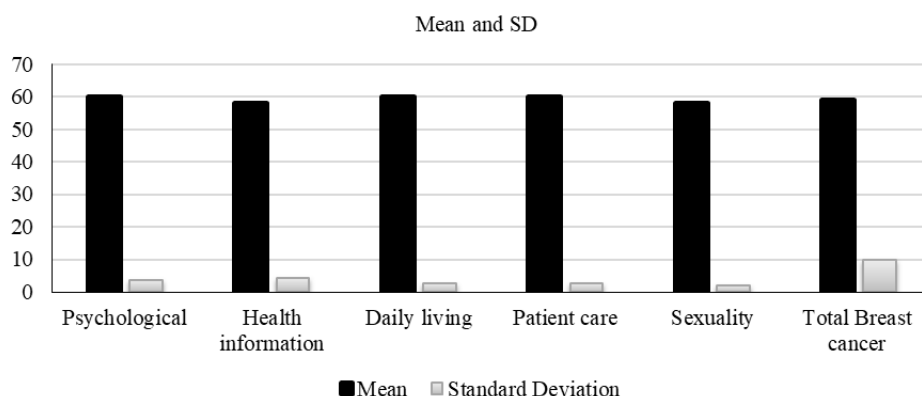
#### **Part II**

Data were gathered using a modified version of the Supportive Care Needs Survey-Short Form (SCNS-SF34), which contains 34 items designed to measure cancer-specific perceived needs across five domains: psychological support, health systems and information, physical and daily living needs, patient care and support, and sexuality. Participants rated their need for assistance over the past month on a scale from 1 to 5, where 1 indicates no need, 2 signifies satisfaction, 3 represents low need, 4

indicates moderate need, and 5 reflects high need. The collected data were analyzed using both descriptive and inferential statistics [9, 10].

## RESULTS AND DISCUSSION

Regarding demographic variables, majority of the study participants 69 (59.48%) were between 50–59 years, 58 (50%) had primary education; 98 (84.4%) were married, 82 (70.6%) were homemakers, 94 (81%) had family monthly income of <Rs. 20,000/-, household composition 103 (88.7%) had husband and children, 95 (81.8%) had family members as social support, 87 (75%) were from rural area, 86 (74.1%) had co-morbidity, 83 (71.5%) were <2 years since breast cancer diagnosis, 81 (69.8%) were in primary stage at diagnosis, 109 (93.9%) had mastectomy, 82 (70.6%) had radiation therapy, 93 (80.1%) had chemotherapy and 62 (53.4%) had hormone therapy (Figure 1).



**Figure 1.** Mean, standard deviation on dimensions of breast cancer survivors

The above findings present the mean and SD of psychological needs being  $29.8 \pm 3.5$ , health systems and information  $32.3 \pm 4.2$ , physical and daily living  $15.2 \pm 2.6$ , patient care and support  $15.06 \pm 2.7$ , sexuality  $8.7 \pm 2.1$ ; the total supportive care needs mean, and standard deviation was  $101 \pm 9.87$ .

The supportive care needs and associated factors following surgery in breast cancer patients were assessed. The average total score for women who had undergone surgery for breast cancer was  $83.95 \pm 22.97$ . It was noted that younger women and those who received chemotherapy and radiotherapy had significantly higher total scale scores compared to other groups. Additionally, the mean scores for the physical and daily living subscale were higher among patients who underwent chemotherapy and radiotherapy than those who did not, with a statistically significant difference ( $p < 0.05$ ).

Significant association was noted with educational level, marital status, employment status, social support, radiation therapy, chemotherapy and hormone therapy  $p < 0.05$ .

A study was conducted to investigate the factors linked to unmet supportive care needs among outpatient oncology patients and to determine if these needs were related to visits to the emergency department and hospitalizations. Findings showed that higher anxiety, higher depression, decreased physical function, and low HRQOL scores were the factors associated with unmet supportive care needs. Several factors were found to be linked to greater unmet supportive care needs, including being Black (adjusted odds ratio [AOR], 1.97 [95% CI, 1.49–2.60]), having Hispanic ethnicity (AOR, 1.31 [95% CI, 1.10–1.55]), and the time elapsed since diagnosis: 1 to 5 years (AOR, 0.64 [95% CI, 0.54–0.77]) and more than 5 years (AOR, 0.60 [95% CI, 0.48–0.76]). Additionally, anxiety (AOR, 2.25 [95% CI, 1.71–2.95]), depression (AOR, 2.07 [95% CI, 1.58–2.70]), poor physical functioning (AOR, 1.38 [95% CI, 1.07–1.79]), and low health-related quality of life (HRQOL) scores (AOR, 1.89 [95% CI, 1.50–2.39]) were also associated with increased unmet needs. Patients experiencing unmet needs were significantly more likely to have emergency department visits (adjusted hazard ratio [AHR], 1.45 [95%

CI, 1.20–1.74]) and hospitalizations (AHR, 1.36 [95% CI, 1.13–1.63]) compared to those without unmet needs.

## CONCLUSIONS

The study results showed that the highest supportive care needs were the demand for health system and information, and the lowest for sexuality. Nurse midwives need to identify the needs and apply effective supportive care programs to promote health system and information needs.

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