PSYCHOLOGICAL FEATURES OF PERSONALITY IN CANCER PATIENTS

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Abstract

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The role of psychological factor in the development of the disease, as well as the cure, is not supported, or even denied, by doctors who are working with oncological patients. Meanwhile, some researchers consider that personal characteristics of patients with cancer, their internal picture of disease, indicate a special role of the psychological factor in the development and course of cancer. In this article, we discuss the psychological characteristics of the personality of oncological patients, all breast cancer, cervical cancer, uterine cancer, and ovarian cancer. We conducted a questionnaire on the scale C.D. Spielberg, Yu.L. Khanin for self-assessment of the level of anxiety, Lusher's test for self-diagnosis and correction of psychological state on the scale of T. Holmes. To sum up, patients with malignant neoplasms are less excitable, demonstrative and exalted, more anxious and emotive compared to the control group of healthy subjects.

Keywords: cancer, psychological factor, anxiety, test Lusher, malignant neoplasm

Background

One of the tasks facing science is to solve the cancer problem, to find its causes and to be able to cure sick people from it. Naturally, scientific methods, revealing certain factors contributing to development of cancer, remain in front of the closed door in the main questions: "Why do some people fall ill while others living in the physical conditions do not?" The role of the psychological factor in the development of the disease, as well as the cure is not supported, or even is denied by doctors who work oncological patients. with Meanwhile, some researchers (Nikolaeva V.V., and Simonton, G. Porter and P. Noriss), considering personal features of the patient with human cancer, his internal picture of the disease, indicate special role psychological factor in development and course of cancer. There are confirmed on a large sample of the idea of psychological predisposition to some somatic diseases. the "infantile" regressive personality, the

mechanisms of the emergence of various diseases, including cancer. In particular, the presence of stress preceding the disease is noted.

The purpose of the study is to investigate direction of psychological characteristics of people subjected to malignant tumor.

MATERIAL AND METHODS

Overall, 131 patients were examined who were in the oncological hospital, whose age was 57.1 ± 13.9. We divided into 2 groups: 1 group of patients of which consisted of 76 patients with malignant neoplasms, and 55 healthy patients were examined. We collected a history of patient's life and psychodiagnostic study using the following techniques: Scale C.D. Spielberg, Y.L. Khanina scale of self-esteem level of anxiety. Lusher's test is for selfdiagnosis and correction of his psychological state. Severe stressful events - more than 40 points on the scale of T. Holmes.

RESULTS

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We conducted questionnaire to identify the personality traits contributing to the disease, according to J. Beckmann, "victim syndrome" patients with cancer had: a negative attitude towards themselves and others, stubbornness and inflexibility of character, frustration and suspicion,

rancor and inability to forgive, guilt and self-flagellation, vulnerability and sensitivity, concern and insecurity, weakened control over their feelings, instability and aggressiveness, excitability and nervousness habit to inefficient food.

Table 1. Frequency of occurrence of depressive disorders in different age groups of cancer patients and healthy

Age group	Frequency of depressive disorders, abs /%	
	Cancer patients	Healthy
0-19 age	3 / 1,57 ns	0 / 0ns
20-39 age	9 / 5,6 ns	0 / 0 ^{ns}
40-59 age	56 / 31***	52/ 4,1***
60-79 age	8 / 18,6 ns	3 / 15,4 ns

As can be seen from the table in both groups, the incidence of depressive disorders was in the ages of 40 to 59 years.

Figure 1.

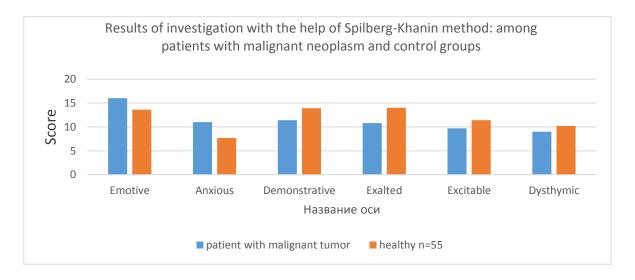
Evaluation structure of anxiety in control group Patients with malignant neoplasms Mild anxiety; 0% Moderate anxiety; 40% High anxiety; 60% Studied healthy group High anxiety; 0% mild anxiety; 33% Moderat anxiety; 67%

As can be seen from the diagram, in patients with malignant tumor, moderate anxiety was detected in the questionnaire in 40%, while in the 2 group among healthy subjects moderate anxiety was

Figure 2.

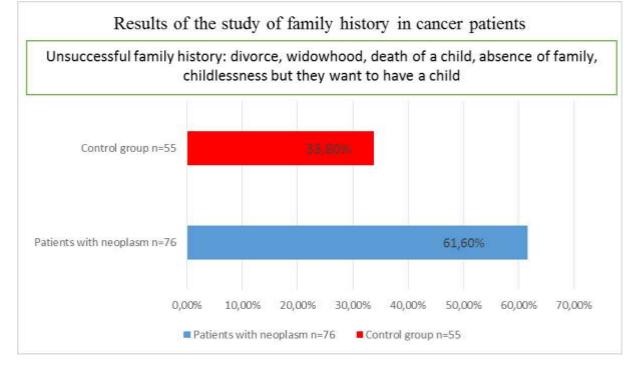
revealed in 67% of cases, but high anxiety was revealed only in patients with malignant patients, at that time as in the group in the control group there were no patients with high anxiety.

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As can be seen from the diagram, patients with malignant neoplasms are less excitable, demonstrative and exalted, more anxious and emotive compared the group healthy control of subjects peculiarities Mental characteristic for patients with separate forms of malignant neoplasms: in patients with Figure 3.

breast cancer, there was a high depressive incidence of disorders, high emotion, a high incidence of severe events in the anamnesis. Patients with cervical cancer high incidence generalized anxiety disorder, high emotion, a high incidence of severe stressful events in the anamnesis.



Because of studying the family history among cancer patients, we found out that these patients in the family had their neighbor's death, divorce, childlessness if they wanted to have a child, lack of family, widowhood.

CONCLUSIONS

Among patients with malignant neoplasms, more often than in the general population, mental disorders are identified due to the high incidence of depressive, anxious, cognitive disorders, asthenic disorder and anxiety disorder of the individual.

Patients with malignant neoplasms are less excitable,

demonstrative exalted, and more anxious and emotive compared to the control group of healthy subjects. Patients with separate nosological of malignant tumors forms have characteristic psychopathological and sociopsychological features that distinguish them from patients with other forms of malignant neoplasms: breast patients cancer characterized by high a incidence of anxiety reactions, high emotion and a high incidence of severe stressful events in the anamnesis.

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