The Relation of Copping Strategy by Looking Social Support with Stress Level of Breast Cancer Patient who Gone Through Chemotherapy

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Abstract

Background: Breast cancer is one of the most common illness that killed woman. One of the therapy to cure breast cancer is chemotherapy. Chemotherapy has side effect either physical and psychology, that caused people who's in chemo therapy, prone to stress. Stress effected by many factors, such as characteristic and chopping strategy that patient has been using. **Purpose:** To get a perspective about the relation of characteristic and chopping strategy with breast cancer patient stress, whose in chemo therapy. **Method:** This research using cross sectional study and taking sample by using accidental sampling method. **Results:** The data analyzed by using bivariat and multivariat with variable result shows that breast cancer patient stress who has chemo therapy related to age characteristic (p value = 0.00) the time since they diagnosed with cancer (p value = 0.03), how long they have chemo therapy (p value = 0.00) and chopping strategy by looking social support (p value = 0.00) looking for spiritual (p value = 0.00) with dominant variable which related to stress is chopping strategy to looking spiritual support (coefficients B = -1.139).

Keywords: Breast cancer, Chemotherapy, Stress

INTRODUCTION

Breast cancer is the most common cancer that happen to woman and usually attacking woman age 35 or more. Data from International Agency for Research on Cancer (IARC) year 2008, breast cancer ranked number two after lung cancer with 12,9 million case. Prevalence of breast cancer in Indonesia year 2013 approximately 61.682 people, or 0,5%. West Sumatera ranked in number 7 for breast cancer with number of patient is 2.285 people or 0.9%. This number was increased from the previous year with 2.120 case.

The procedure that become main alternative to overcome cancer is chemo therapy. Chemo therapy was aimed to heal, controlling and paliative cancer (Thackery, 2002).

Breast cancer patient who has chemo therapy prone to stress and because of that the stress medication needs special attention. World Cancer declaration (2013) aim number 8 stated that one of the aim healing of heaing cancer patient is to reduced pain and managing stress.

Breast cancer patient will feel affraid, worried and frustration. After diagnose, before surgery, during and after surgery, and during therapy session, the patient will feel lost and having stress (Antoni, 2003). The research result thats been done by Johansson (2013) explained that breast cancer patient have extra emotional problem and can trigger stress condition after diagnosed and treatment.

Chopping resources and many kind of support are really needed to overcome stress that breast cancer patient has while having chemo therapy. According to Johansson (2013), it found several individual characteristic which affected stress such as age, education, maariage status, religion, work, cancer stadium, and the medical person, and also found taht

woman with good chopping strategy have lower stress and also woman with good spritual also have lower stress.

Setiawan research (2015), explaining about chopping strategy, health status and life quality of woman with breast cancer, its found that the most common chopping strategy that use toreduce stress is to find social support, redefinition situation and looking for spiritual support.

Based on medical data based on says "can i be heal?". "can i see my children grow up?", " i feel embarrassed with my breast shape which not perfect". For overcome all those feeling patient choose to share a story with their close relative like their mother, siblings, going trough all the things with willingness and think it God test for them, looking for doctor information and nurse for their illness, pray, and also bring them self close to God and have faith that all the process will pass and the illness will be heal.

METHOD

This research using cross sectional study. The population in this research are RSUP Dr.M Djamil Padang, the number of patient who has chemo therapy in Therapy Diagnosis Instalation (IDT), chemo therapy unit has increased every year. In 2014 the number of patient who has chemo therapy was 928 people and in 2015 it increase to 970 people.

Based on documentation study on reporting book of head unit, we found patient data whose coming for chemo, normally already received several chemo. . the interview result patient with breast cancer diagnosed who has chemo therapy in IDT Chemo Therapy Unit in RSUP. DR. M Djamil Padang, for 400 people. The sampling method is using accidental sampling which using 81 people as sample. Data analyzed was using bivariat method pearson product moment, t-independent test and annova test also multivariate by using double linear regression.

RESULTS

The research result covering the relation of characteristic and chopping strategy with stress and factors that most related to breast cancer patient stress whose gone chemo therapy.

Table 1 The Relation Analysis of Age Characteristic, Time of Cancer Diagnosis, And Time Having Chemotherapy With Breast Cancer Patient Stress Whose Having Chemotherapy

Variabel Independent	Variabel Dependent	R	r²	p value
Age	Stres	-0.536	0.287	0.000
Time Since Diagnosis Cancer	Stres	-0.238	0.057	0.033
Time Following Chemotherapy	Stres	-0.362	0.131	0.001

Table 1 shows that r value for age characteristic to stress is -0.536, its means that both variables have negative relation were the age increasing will followed with decreasing stress. By statistics there is a meaningful relation between age characteristic with stress (p value = 0.000).

R value for characteristic of time since cancer diagnosis to stress is -0,238, this means that both variables have negative relation, were getting longer longer patient get cancer diagnosed will followed by stress reducing. Statistically theres a meaningful relations between time of cancer diagnose characteristic with stress (p value = 0.033).

Value of r for time of get chemo therapy to stress is -0,362, this means that both variable have negative relation were, getting longer the patient having chemo therapy it will followed with stress reduction. Statistically theres meaningful relation between both characteristic (p value = 0.001).

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Table 2 Relation Analysis of Clan Characteristic with Marriage Status With Stress of Breast Cancer Patient Who Have Chemotherapy

Variable Independent	Variable Dependent	Mean	SD	SE	p value
Clan	Stres				
Minang		27.95	2.939	0.383	0.94
Non Minang		26.73	2.729	0.582	
Marriage Status	Stres				
Marriage		27.91	2.885	0.350	0.057
Widow		26.08	2.691	0.746	

Table 2 shows that average stress that feels by patient from Minang clan is27,95 (SD = 2.939). While for patient from non Minang have average stress 26.73 (SD=2.729). The result of statistic test is p = 0.94 which means theres no significant different of average stress that feels by Minang clan and non Minang clan.

The average stress that feels by patient with marriage status is 27.91 (SD=2.885), while for patient with divorcee status the stress that they feels is 26,08 (SD=2.691). The result of statistic test is p=0.057 which means theres no significant different between average stress that feels by patient with marriage status and divorcee status.

Table 3 Characteristic Relation Analysis Between Cancer Stadium with Breast Cancer Patient Stress During Chemo therapy

Variable Independent	Variable Dependent	Mean	SD	95% CI	p value
Stadium	Stres				
Stadium 2		29.06	3.506	27.31; 30.80	0.058
Stadium 3		27.22	2.558	26.56; 27.88	
Stadium 4		27.00	4.359	16.17; 37.83	

Table 3 shows that average stress that feels by patient with stadium 2 is 29.06 (SD = 3.506), patient with stadium 3 is 27,22 (SD=2.558), and for patient with stadium 4 the stress level that they feel is 27.00

(SD=4.359). The result of statistic test found P=0.058 which means theres no significant different of average stress that feels by patient with stadium 2,3 and 4.

Table 4 Relation Analysis of Chopping Strategy with Stress of Patient Who Gone Through Chemotherapy

Variable Independent	Variable Dependent	R	r²	p value
Looking for social support	Stres	-0.293	0.086	0.008
Reassemble	Stres	-0.172	0.030	0.125
Looking for spiriual support	Stres	-0.553	0.301	0.000
Empowering family to received support and aids	Stres	0.43	0.185	0.705
Passive judgement	Stres	-0.114	0.012	0.310

Table 4 shows that r value for chopping strategy by looking social support for stress is -0.293, this means that both variable have negative relation were the increasing of chopping strategy by looking social support will follow with stress reduction. Statistically theres a meaningful

relation between copping strategyof looking for social support with stress (p value = 0.008).

R value for copping strategy reassemble stress is 0.172, this means both of variable have negative relation were increasing the copping strategy of

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reassemble will be followed by stress reduction. Statistically theres no meaningful relation between copping strategy of reassemble with stress (p = 0.125).

R value for copping strategy of looking for spiritual support with stress is -0.553, this means that both variable have negative relation were increasing copping strategy by looking for spiritual support will followed by stress reduction. Statistically theres a meaningfull relation between coping strategy by looking spiritual support with stress (p value=0.000).

R value for copping strategy by empowering family to get help from stress is 0.43, this means that both variable have positive relation where copping strategy by empowering family to asked and received help will be followed with stress reduction. Statically theres no meaningful relation between copping strategy by empowering family to received help with stress (p value = 0.705).

R value for copping strategy by passive judgement with stress is 0.114, this means that both variable have negative relation where increasing the copping strategy of passive judgement will be followed by stress reduction. Statistically theres no meaningful relation between copping strategy of empowering family to asked for help (p value = 0.310).

Table 5 Analysis of the most related factor to stress of breast cancer patient whose having chemotherapy

Variable	B	SE	p *value*
Age	-0.139	0.040	0.001
Periode of having chemotherapy	-0.650	0.229	0.006
Copping strategy by looking spiritual support.	-1.139	0.274	0.000

In table 5 we can see value of coeffecients B for copping strategy by looking spiritual support is the highest (-1.139), that makes copping strategy by looking spiritual support is the most dominan factor that affected patient stress whose having chemo therapy. We can concluded that every increasing of copping strategy by looking for spiritual support application will reduced stress that feels by breast cancer patient who gone trough chemotherapy as much as 1.139.

DISCUSSION

Getting old someone than the stress that they feel is getting lower. Taha (2010) research found that most woman who had breast cancer are age 45-64 years old. The Johansson (2013) research result found several characteristic that affected stress, one of them is the age where the respondent having cancer 30- 45 will have savere stress. Roy theory explained that age affected the way people express their feeling and doing copping with their illness (Viedebeck, 2008).

The average number of patient being diagnose with cancer in this research are 1 up to 2 years. Roy theory (Rasmun 2004) says that people is a system which can be adaptated, and people have different level of adaptation depend on how big stimulus that they can tolerate. Getting longer someone diagnose with cancer then the adaptation to the stressor will getting better and the stress that they felt will be lighter.

In this research the average responden is in stadium 3 with average stress thatthey felt is severe stress. Said (2012), found that most of cancer patient in stadium 3 have savere stress. Cancer stadium not affected the average stress that happen significantly, but score that they get shows that getting earlier cancer stadium the stress score that they received is getting higher.

The average copping strategy by looking social support was applied by breast cancer patient in this research are 31.54, increasing this copping strategy application will be followed with stress reduction that feels by patient. Setiawan (2015) research found one of copping strategy thats been used by woman with breast cancer to overcome their stress is to looking for social support.

Family isthe nearest patient environment. Getting higher support and attention thats been given by family then stress that feels by patient will be lower, so nurse expected to involved the family in chemo therapy process such as suggested family to accompanied pasien during chemo therapy session.

In this research the average copping strategy by looking spiritual support which applied by patient is 14.52,. the increasing of copping strategy application will be followed with stress reduction that feels by the patient. Copping strategy by looking spiritual support is the most affected factor of patient stress.

This research has the same opinion with Johansson (2013) research, where the patient with good spiritual copping will have lower stress level. patient with good spirituality will have optimism. Roy adaptation concept says that health problem will appears when someone can not able to adapt with environmental change. According to Ahyar (2010), if copping strategy that choose by someone work well then someone will adapt with that change.

On breast cancer patient that having stimulus chemotherapy, the main stressor are, cancer diagnosis, medical procedure such as surgery (mastektomi) and gone trough chemo therapy with the side effect of the medicine they take. Chemo therapy is a long process and repeatly happen, and with all those stressor will give unpleasant effect either mentally and physically. If the patient didnt have good copping strategy and not able to adapt then the response that will appears ineffective and it will cause stress.

CONCLUSIONS

Theres a meaningful relation between age, time when diagnose with cancer, time of having chemotherapy, and copping strategy by looking for social and spiritual support.

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