The depressive symptomatology among cancer patients in a tertiary care hospital in Sri Lanka.

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The depressive symptomatology among cancer patients in a tertiary care hospital in Sri Lanka

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Background: It is observed that one fourth of the cancer patients would ultimately become depressed. Depression affects quality of life, adherence to the treatment and survival time of cancer patients. We sought to investigate the relationships between depressive symptomatology, gender and age in a sample of cancer patients treated at a tertiary care hospital in southern Sri Lanka.

Methods: Two hundred and ten (210) cancer patients were studied using an interviewer administered questionnaire, bed head tickets and the diagnosis cards of the patients. Centre for Epidemiological Studies-Depression scale (CES-D) was used to measure depressive symptomatology. In CES-D, higher scores indicate greater symptoms. ANOVA and independent sample t –test were used.

Results: The sample consisted of 97 breast, 32 oral, 32 colon, 25 lung and 24 uterus cancer patients. The mean age was 55 years (SD = 10.2). About 30% of the subjects were male. The highest CES-D mean score was found in uterine cancer patients (mean = 10.71, SD = 9.5) followed by lung cancer (mean= 8.04, SD=6.5), breast cancer (mean=6.76, SD=6.9), oral cancer (mean=6.31, SD=4.8), and colon cancer (mean= 6.13, SD=4.2) patients. However, no significant differences of the mean scores were found. Gender and age was not related to the occurrence of depressive symptoms. Severe depressive symptoms (CES-D score $\geq$ 16) were found in 17% of uterine cancer patients followed by 16% of lung cancer, 9% breast cancer, 3% of oral cancer and 3% of colon cancer patients.

Conclusion: The prevalence of depressive symptoms seemed to be higher in uterine, lung and breast cancer patients compared to the other categories of cancer patients that we studied. Gender and age seem to be not related to the occurrence of depressive symptoms in this target population. Further research, however, is needed in this area. Psychological support services are greatly needed by these three categories of cancer patients as such support may at least improve their drug adherence rate as suggested by similar studies conducted in other countries.