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Correlates of Social Support of Breast Cancer Patients in a Tertiary Care Hospital in Southern Sri Lanka

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Introduction: Social support (SS) is an important aspect in psychosocial well-being of Breast cancer (BC) patients. Studies have indicated that BC patients are experiencing a verity of SS based on their socio-economic and cultural circumstances. This study aimed to investigate correlates of SS of a sample of BC patients treated at the Teaching Hospital Karapitiya (THK), Galle.

Methodology: A descriptive study on 400 cancer patients was conducted; among them ninety seven (n=97) were BC patients. An Interviewer Administered Questionnaire (IAQ) was used to collect data. SS was examined using validated Multidimensional Scale of Perceived Social Support (MSPSS) which has three sources of support; family, friends, and significant others/ special person -defined as the person who is very significant and close to the patient like boy/girlfriend. The overall score of the SS ranges from 7 to 84, and sub-scales scores ranges from 4 to 28: higher scores indicated high social support. Ethical approval for the study was obtained from the Ethics Review Committee, Faculty of Medicine, Galle.

Results: The mean age of the sample of 97 BC patients was 52 years (SD = 8.7). Majority were married (78%). Mean score ($\pm SD$) of overall SS was 72.75 ± 11.9 . Thus, in this sample of BC patients, the overall SS received by the patients was very high. SS received from their family members (26.08 ± 5.3) and significant others/ special person who were around them (26.27 ± 5.5) were very high, but SS received from friends were low (20.40 ± 3.2) compared to the support received from the other two groups. Patients, who were more than 50 years of age, married, had high income (> Rs. 10000), had been diagnosed in less than 12 months prior to the survey, and had not any disabilities or body changes were more likely to obtain higher overall SS scores than their counterparts. BC patients with disabilities had reported little family support than others (p=0.06), and patients in low income brackets (monthly income < Rs. 10000) had obtained low support from friends (p=0.06) than that of others.

Discussion: BC patients in this sample had received a higher overall SS, family support, and special person support which are similar to such studies done in other countries. However, higher support from friends was more prominent in other countries such as BC support groups, but in Sri Lankan context it is not so. Older age and being a married person ensured higher SS; disabilities and body changes were caused to receive a lower SS.

Conclusion: Overall, BC patients received satisfactory SS from their family and special persons around them. Social support issues of young and unmarried BC patients need to be addressed effectively to improve quality of life of such patients.

Key words: Breast cancer, social support, family support, Sri Lanka

References:

- Global Status Report. (2014). On non-communicable diseases 2014. Geneva: World Health Organization. Retrieved from <u>http://ncdalliance.org/sites/default/files/resource_files/Global%20status%20repor</u> <u>t%20on%20NCDs%202014.pdf</u>
- 2. Ozkan, S., & Ogce, F. (2008). Importance of social support for functional status in breast cancer patients. Asian Pacific Journal of Cancer Prevention, 9, 601-604.
- 3. Gokgoz, S., Sadikoglu, G., Paksoy, E., Guneytepe, U., Ozcakir, A., Bayram, N., et al. (2011). Health related quality of life among breast cancer patients: a study from Turky. Global Journal of Health Sciences, 3(2), 140-152.