DOI: http://dx.doi.org/10.31782/IJCRR.2019.11211



Phenomenological Study on Lived Experiences of Patients Undergoing Radiation Therapy in a Selected Hospital, Calicut

Sheeja CV¹, Assuma Beevi TM², Maryelizabeth Tidiya³, Theertha P Krishnan⁴

Professor, Department of Medical Surgical nursing, MIMS College of Nursing, Malappuram, Kerala; ²Principal, Department of Medical Surgical nursing, MIMS College of Nursing, Malappuram, Kerala; ³Assistant Professor, Department of Medical Surgical nursing, MIMS College of Nursing, Malappuram, Kerala; ⁴Assistant Lecturer, Department of Medical Surgical nursing, MIMS College of Nursing, Malappuram, Kerala.

ABSTRACT

Introduction: Radiation therapy involve the use of ionizing radiation rays to cure or improve symptoms of cancer by damaging DNA of that cell. Radiation therapy is used for treating different types of cancers effectively. Patients undergoing radiation therapy are having physical & psychological discomfort and cause difficulties in doing their daily living activities. Identifying the experiences of patients will help the health care team to plan the patient care efficiently.

Aim and Objective: The purpose of the study was to explore the lived experience of patients undergoing Radiation therapy to attain a realistic view of difficulties after exposure to Radiation therapy.

Research Design: Descriptive phenomenological research design was selected by the researcher to disclose the lived experience of patients undergoing Radiation therapy.

Method: Semi-structured interviewschedule with a purposive sample of 10 patients undergoing Radiation therapy were conducted. Verbatim transcripts were analyzed by using Descriptive phenomenological Analysis.

Results: Five super-ordinated themes were emerged from the analysis are living with physical discomfort, pain, emotional disturbances, psychosocial difficulties, unable to do daily activities. The sub themes for living with physical discomfort include nausea, vomiting & dyspnea, for emotional disturbances include feeling dejected unable to cope up with any stress and for psychosocial difficulties are not willing to mingle in social gatherings and feeling bad for taking help from others in doing their day to day activities.

Conclusion: Physical & psychological discomfort of the study participants who are undergoing Radiation therapy were identified through their Lived experience. Sudden changes in their living style caused due to Radiation therapy have increased the physical and psychological impact in their life.

Relevance to clinical practice: It is important to identify physical, emotional and psychosocial issues faced by the patients undergoing Radiation therapy enable the health care team to plan and give individualized care. Exploring the lived experience of patients wouldmake it possible to provide planned nursing care to patients undergoing Radiation therapybased on their needs.

Key Words: Radiation Therapy, Living Experience

INTRODUCTION

Cancer is characterized by development of abnormal cells in the body. These cells have the ability to divide uncontrollably and infiltrate & destroy the body tissues. The treatment for cancer is differed depending on the type, location and stage of cancer. This include surgery, radiation therapy, chemotherapy, hormone therapy and immunotherapy. The

Corresponding Author:

Dr. Sheeja CV, MIMS College of Nursing, Vazhayoor, Puthukode PO Ramanattukara-673633, Kerala; Mobile-09448388437;

Email: sheeja.cv@rediffmail.com

ISSN: 2231-2196 (Print) **ISSN**: 0975-5241 (Online)

Received: 27.08.2019 Revised: 01.10.2019 Accepted: 21.10.2019

diagnosis of Cancer is done along with a thorough physical examination and a complete medical history.

Cancer has the ability to spread throughout body. 90–95% of cancers are occurring from genetic mutations and 5–10% are from inherited genetic reasons. Common environmental factors include tobacco use (25–30%), diet and obesity (30–35%), infections (15–20%), radiation (both ionizing and non-ionizing up to 10%) and the remaining are from stress, lack of physical activity and pollution. ¹

The environment contributing to cancer refers not only to air, water, and soil but also to the substances and conditions at home and workplace, including diet, smoking, alcohol, drugs, exposure to chemicals, sunlight, ionizing radiation, electromagnetic fields and infectious agents.² Lifestyle, economic and behavioral factors are all aspects of the environment that is causing occurrence of cancer.

The prevention strategies used for cancers are maintaining a healthy body weight, not drinking much alcohol, by eating plenty of vegetables, fruits and whole grains, taking vaccination against infectious diseases, not eating much processed and red meat, being away from smoking and avoiding too much sunlight exposure.^{3,4}

The side effects of Radiation therapy are usually causing displeasure. Coping with cancer is a burden for many patients and their caregivers. Patients may undergo physical, psychological and social problems due to the diagnosis of cancer. Nurses are the care providers of health care system who are available for 24 hours with the patient.

Use of advanced technologies in delivering radiation therapy allow it to be a day care treatment and the side effects are comparatively less. By identifying lived experience of patientsundergoing Radiation therapy enable the nurses to plan the care at home which would be provided by their caregivers. Investigator felt that it would be ideal to identify these problems through their lived experience.

Rationale of the study

Radiation therapy is the use of ionizing rays to cure or improve symptoms of cancer. These rays damage DNA of tissue by killing it and sparing normal body tissues through which radiation is passing to destroy the tumor cells. Different shapes of radiation beams are used from multiple exposure angles to intersect at the tumor cells and giving a much larger dose than in the surrounding healthy tissue. Response to the treatment of radiation therapy is varied depends on the type of cancers.It is an integral part for treating cancer. Today, nearly 60% of cancer patients receive target specific radiation therapy. ⁵

The toxicities associate with radiation therapy are usually mild, reversible and depends upon the treatment area.⁶ Patients undergoing treatment for cancer needs education,

guidance and support regarding the effects and side effects of ionizing rays. By identifying common issues faced during radiation therapy will help to plan the care and make patients more familiar with their day today activities without much difficulties.

Patients undergoing Radiation therapy are experiencingsome side effects and are becoming physically weak. This situation exacerbatesthe symptoms and may not be able to tolerate the side effects of radiation therapy. By identifying the live experience of patient undergoing Radiation therapy will help the nurse to plan the care for their patients. Preferences of patients also can be considered while planning the care. So that the nursing interventions will relieve the symptoms as the care is psychologically accepted by them.

Most of the patients will undergo a drastic change in their physical, psychological and social aspects of life after knowing thediagnosis as cancer. The treatment also causes economic and psychological burden. Teaching certain intervention strategies to the patient and their family members would help them to cope with the diagnosis and treatment of cancers. These strategies are identified through their lived experiences. These experiences are the basics to plan nursing intervention strategies for treating patient undergoing Radiation therapy.

Purpose of the Study

Explore the lived experience of patients undergoing Radiation Therapy to attain a realistic view of difficulties faced during the therapy and complications felt by them after first exposure to the therapy.

Objectives

Explore lived experiences of patients undergoing Radiation Therapy.

Methodology

Qualitative descriptive phenomenological research approach with descriptive phenomenological design to explore the lived experience of patients undergoing Radiation therapy is selected.

Setting

Radiation Therapy Unit Aster MIMS Hospital Kozhikode

Population

All patients undergoing Radiation therapy

Sample and Sample Size

Patients undergoing Radiation therapy and those who meets the inclusion criteria. Qualitative research seeks in-depth understanding of a particular phenomenon, therefore sampling focused on patients undergoing Radiation therapy capable of providing rich data. Sample size was based on the intensity of data collected and continued until data saturation achieved.

Sampling Technique

Purposive Sampling Technique.

Inclusion Criteria

Patients who are

- diagnosed with cancer and undergoing radiation therapy
- ➤ have underwent first dose of radiation therapy
- willing to participate in the study.
- > able to communicate and share their experience

Exclusion criteria

- patients who are undergoing chemotherapy
- ► have undergone surgery
- not able to communicate and share their experience.

Selection and development of study instruments

Main source of data for Phenomenological studies are indepth conversations. The tool used were in two parts.

Tool 1-Bio-Socio Demographic Proforma

This consist of structured questions such as age, gender, educational level, occupation, socio-economic Status, monthly income, type of cancer, history of use of any drug

Tool 2- Lead Questions forIn-depth Interview

Tell me about your experience of Radiation therapy.

Are you undergoing any problems during therapy?

If so, what are such experiences?

What are the measures used to reduce such symptoms?

Tell in detail about the issues faced during radiation therapy

Content Validity

Content validity was done by giving Bio-Socio Demographic Proforma and Lead Questions for In-depth Interview to experts in the field of Nursing. Based on their suggestion the tool was modified. The tool was translated to Malayalam and re-translated to English to confirm the accuracy.

Pretesting of Tool

Pre-testing of the tool was done by administering tool to sample to assess feasibility, clarity and to assess any further modification are needed in tool.

Data collection procedure

After ethical clearance from Aster MIMS Ethical Committee, obtained permission from Head of oncology Depart-

ment. Eligible participants who were willing to participate in the study was given Subject Information Sheet and Informed Consent was obtained from each study participant. Data was collected by maintaining a rapport with the participants and interviewing them. Interview was carried out in Malayalam. Researcher collected data from each participant. Data was audio-recorded, translated and transcribed into verbatim. Data was read line by line for significant statements. Subthemes and themes generated by going through each statement.

Data were collected over a period of one week, using a semistructured interview guide and conducted in-depth face-toface interviews. These audio taped data were transcribed by a bilingual transcriber. The translated version of the interview was coded, and the analysis was done manually using Descriptive phenomenological Analysis (Figure: 1).

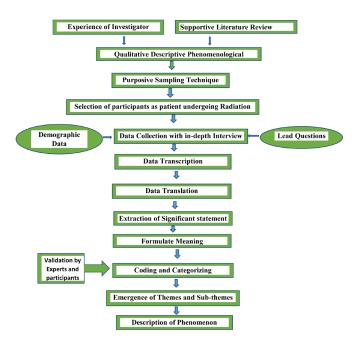


Figure 1: Schematic representation of data collection process

RESULT

Present study shows that 60% of study participants were females and 40% were males. 60% were belong to between 40-50- years of age. 70% were not having any job, 60% had primary education, 20% had stomach cancer, 30% had breast cancer and 50% were with head and neck cancer for type of cancer.

Five super-ordinated themes were emergedfrom main data analysis. That is living with physical discomfort, pain, emotional disturbances, psychosocial difficulties and unable to do daily activities. The sub themes for living with physical discomfort include nausea, vomiting & dyspnea, for emotional disturbances includes feeling dejected, unable to

cope up with any stress and psychosocial difficulties include not willing to mingle in social gatherings.

DISCUSSION

Present study reveals that patients who are undergoing Radiation therapy experience physical, emotional, and social adjustment problems. Diagnosis of cancer is a major health problem for the patients and their family members. Though technology is advanced and accessibility of treatment is increased, the stigma for the diagnosis of cancer is still present in the society. Study participants are becoming emotionally weak and psychologically disturbed as they expressed their experiences. Economic burden is another major issue for the family members to be focused. Many feels that cost of treatment is more for their reach. Insurance and third-party payments may be able to render help for such patients. Ultimately all of them want to be out of these issues and want to lead a peaceful life.

Similar study explain the phenomenon studied as the meaning of hope was essential during radiotherapy treatment and the results suggest that interpersonal relationships can be a prerequisite to the experience of hope. It also help health care professionals maintain a sense of importance of the 'whole experience' for those in their care. Lived experiences of patients are basics to realize the issues faced during their treatment.

It is important to identify the issues related to physical, emotional and psychosocial difficulties faced by the patients who are undergoing Radiation therapy to plan and give individualized care. Exploring the lived experience of patients will help and enable to provide such care for patients undergoing Radiation therapy. It is found that intrapersonal and interpersonal relationship skills are beneficial for reducing these unpleasant feeling of patients. Interpersonal relationship skills also can be included in the nursing interventions.

Relevance to clinical practice

It is important to identify the issues related to physical, emotional and psychosocial difficulties faced by the patients undergoing Radiation therapy to plan and give individualized care for patients. Exploring the lived experience of patients will help and enable to provide such care for patients undergoing Radiation therapy.

CONCLUSION

Participants explained the experience of their living after the diagnosis of cancer. The treatment with Radiation therapy

has caused certain changes in doing day today activities of life. As a result of difficulties caused to them during Radiation therapy increased physical and psychological impact to their living.

Funding for this research

Self funded

Conflict of interest

Authors have no conflict of interest

ACKNOWLEDGEMENT

Authors acknowledge the immense help received from the scholars whose articles are cited and included in references of this article. The authors are also grateful to authors / editors / publishers of all those articles, journals and books from where the literature for this article has been reviewed and discussed

REFERENCES

- Kushi LH, Doyle C, McCullough M, Rock CL, Wahnefried W, Bandera EV, et al (2012). American Cancer Society Guidelines on nutrition and physical activity for cancer prevention: reducing the risk of cancer with healthy food choices and physical activity, CA Cancer J Clin. 62 (1): 30–67. doi:10.3322/caac.20140. PMID 22237782.
- Parkin DM, Boyd L, Walker LC (December 2011), The fraction of cancer attributable to lifestyle and environmental factors in the UK in 2010, British Journal of Cancer, 105 Suppl 2: S77–81. doi:10.1038/bjc.2011.489. PMC 3252065. PMID 22158327.
- Anand P, Kunnumakkara AB, Sundaram C, Harikumar KB, Tharakan ST, Lai OS, et al (September 2008), Cancer is a preventable disease that requires major lifestyle changes, Pharmaceutical Research. 25 (9): 2097–116. doi:10.1007/s11095-008-9661-9. PMC 2515569. PMID 18626751.
- National Cancer Institute (26 February 2018), "Targeted Cancer Therapies". www.cancer.gov. Retrieved 28 March 2018.
- Manton K, Akushevich I, Kravchenko J (28 December 2008), Cancer Mortality and Morbidity Patterns in the U.S. Population: An Interdisciplinary Approach. Springer Science & Business Media. ISBN 978-0-387-78193-8.
- Islami F, Goding SA, Miller KD, Siegel RL, Fedewa SA, Jacobs EJ, et al (January 2018), Proportion and number of cancer cases and deaths attributable to potentially modifiable risk factors in the United States, Ca. 68 (1): 31–54. doi:10.3322/caac.21440. PMID 29160902.
- Prince, Jim M, Damian C, Stew M, Steve Y, Ian W, et al, tumorradio sensitivity – General Practice Notebook, Archived from the original on 24 September 2015.
- Hill R, Healy B, Holloway L, Kuncic Z, Thwaites D, Baldock C (March 2014), Advances in kilovoltage x-ray beam dosimetry, Physics in Medicine and Biology. 59 (6): R183–231.