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The Experience of Breast Cancer Handling During Undergoing Chemotherapy

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ABSTRACT

Breast cancer is a disease that is still the biggest cause of death for women to date in developed and developing countries in the world. The World Health Organization stated that in 2017 there was an increase of a number of women diagnosed with breast cancer in Europe by a total of 250,000 cases. It means that every 28 hours there is a new case of a breast cancer diagnosis. The phases in the process of treating cancer patients require a certain series of activities. Throughout this continuum, individuals having breast cancer would be in experience physical and psychological changes, resulting in decreased quality of life. Clients with breast cancer need time to accept the condition of the pain so that it affects the follow-up treatment in the form of chemotherapy. This study uses a qualitative approach. In-depth interviews were conducted to explore participants' experiences deeper by analyzing data using Interpretative Analysis Phenomenology. This study results from seven themes namely (1) Family support as an encouragement to undergo chemotherapy (2) Accepting the disease process with anxiety (3) Tired of Chemotherapy (4) Hoping for healing through chemotherapy (5) Distrust of having breast cancer (6) Endeavor with the process alternative medicine (7) Surviving with Chemotherapy.

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INTRODUCTION

Breast cancer is a disease that is still the biggest cause of death for women to date in developed and developing countries in the world. The World Health Organization (2018), stated that in 2017 there was an increase of number of women diagnosed with breast cancer in Europe with a total of 250,000 cases. It means that every 28 hours there is a new case of breast cancer diagnosis. Cancer Research UK states that every year in the UK, there are more than 330,000 people who are diagnosed having cancer. Then 30% of them are women (1). The cases of breast cancer in America ranged from 175,000 cases. It means that during 19 hours there is a

new case of breast cancer. In America, breast cancer is the second deadly disease after lung cancer (2).

Based on the basic health research in 2018, Indonesia still ranks first for the last 10 years regarding the prevalence of breast cancer. The average age range of women is 30-50 years who are affected by breast cancer (3). The results of the percentage data from the Global Cancer Observatory in 2018 was around 16.7%. The most common cancer in Indonesia is breast cancer for about 58,256 cases of totally 348,809 cancer cases in Indonesia. The Ministry of Health stated that the breast cancer rate in Indonesia reached 4.21 people per 100,000 population. The average number of deaths from breast cancer reaches 17 people per 100,000 population (4). The data of breast cancer in the city of Malang based on the

Main Referral Hospital, Dr. Syaiful Anwar Malang (December 16, 2019 at the Oncology Poly) showed that the number of breast cancer patients under control as of July 2019 was around of 800 to 1200 clients per month. For the age range of clients affected by breast cancer was around of 24 years to 65 years. There were around 150 clients with monthly chemotherapy actions.

Cancer care has been conceptualized as a series of multiple phases including risk assessment, primary prevention, detection, diagnosis, treatment, post-treatment survival, and end-of-life care. Delays in diagnostic, treatment and survival pathways always create additional suffering for people affected by cancer (5). In April 2020, a prospective cross-sectional study of Cancer Central Italy reported that more than one third of lymphoma patients had anxiety (36%), depression (31%) and post-traumatic stress disorder (36%) (6). The phases of the process of treating cancer patients require a certain series of activities. Throughout this continuum, individuals with breast cancer will have an experience physical and psychological changes, resulting the decreased quality of life (7). Family members and caregivers are often burdened during this process as well as they share responsibilities because of financial increase and psychological stress (8). The conditions while waiting for a diagnosis or determining a treatment program, feelings of uncertainty, stress, anxiety, fear, and rejection often arise (9). Even when the client is undergoing treatment, the physical and emotional side effects often occur, such as fatigue, sleep disturbances, depression and body image problems (10). In the long term survival of breast cancer patients, they may have experience identity changes, loneliness, ongoing financial burdens, and fear of recurrence (11).

The results of the preliminary study in November 2020 at the RS. Baptist Batu, recorded an increase of the number of breast cancer patients. Based on the results of interviews to several clients who came to the Oncology Poly Hospital Baptis Batu, to do chemotherapy, almost some of the clients who were diagnosed with breast cancer were initially diagnosed with denial and shock. The client begins to accept his condition along with the treatment process that must be passed. The clients with breast cancer need time to accept the condition of the pain so that it affects the follow-up treatment in the form of chemotherapy.

METHOD

This study uses a qualitative method to explore the real phenomenon of the Client's Experience of Breast Cancer by direct exploration (intuiting), analyzing (analyzing), and describing (describing) related the phenomena. The

Table 1. Characteristics of Respondents

qualitative approach used is interpretative phenomenology which is based on Heidegger's philosophy.

Recruitment of participants in this study using purposive sampling technique. The focus of this research is on depth and process, so this research is estimated to use research subjects with participants until saturated data is found, with participant criteria as follows: (1) Participants who have breast cancer and are undergoing chemotherapy. (2) The participants in this study were in the age range category from 24 years to 65 years. (3) Participants who have undergone chemotherapy for the last \pm 1 year. (4) Participants who are willing to do in-depth interviews and are able to tell well the experience of being a client with breast cancer who is undergoing chemotherapy.

The instrument in this research is the researchers themself. Before conducting the research, the researchers had prepared several questions as an interview guide. Indepth interviews were conducted to explore the experiences of participants more deeply which is expected to bring out some new things about the phenomena of experiences of breast cancer sufferers. The length of the interview ranged from 40-60 minutes for each participant.

The data analysis of qualitative research aims to process data, organize data, separate it into smaller units, create patterns which ultimately form the themes of research results (Semiawan, 2010). Methods for data validity consist of credibility, transferability, dependability, and confirmability. This research had also gone through the ethical test stage at the Faculty of Medicine, Universitas Brawijaya with Statement of Ethical Eligibility No. 199/EC/KEPK/11/2020

RESULTS AND DISCUSSION

The characteristics of the Respondents

The participants involved in this study were 6 participants who had met the research inclusion criteria. All participants in this study were post-mastectomy breast cancer patients who were treated as outpatients at the Oncology Outpatient Clinic. All participants had had a mastectomy and were or had completed chemotherapy.

The table 1 explains that there are 6 participants in this study. The age of the participants is in the range of 42 - 62 years with the lowest education being junior high school and the highest being undergraduate. One participant underwent radiation, four participants underwent chemotherapy, and a combination of light and chemotherapy one participant. 5 Participants live with their husbands and one participant is a widow living with her children.

Kode Partisipan	Usia	Pendidikan Terakhir	Status Kemo	Stadium Kanker	Tinggal dengan
01	62	Senior High School	Oral Chemotherapy 5th	1A	Husband+Child
02	53	Junior High School	Chemotherapy 6x	2	Child
03	42	Senior High School	Ray 25x Chemotherapy 6x	2	Husband+Child
04	56	Junior High School	Ray 20x Chemotherapy 6x	2	Husband+Child
05	45	Senior High School	Chemotherapy 12x	4	Husband+Child
06	62	Barchelor	Chemotherapy 6x	1B	Child

Source: Primary Data, 2020

DISCUSSION

This study found 7 (seven) themes, namely as follows: (1) Disbelief in experiencing breast cancer (2) Accepting the disease process with anxiety (3) Endeavoring with alternative treatment processes (4) Tired of chemotherapy (5) Surviving with Chemotherapy (6) Hope for healing through chemotherapy (7) Family support as an encouragement to undergo chemotherapy. The results of the data analysis will be presented in the form of a description based on specific objectives with the following scheme:

1. Exploring the motivation of clients with breast cancer in undergoing chemotherapy

Theme 1: Family support as an encouragement to undergo chemotherapy

- a. P1: "Thank god, because there was a lot of support from my children, husband and family, I finally went through this chemotherapy process. Yes, until now, I enjoy it, i don't feel burdened by the fact that iam suffering from cancer.
- b. P2: "I hope that you will be given health and strength, just be patient. Yes, that's all from above, all of them have separate lines. Yeah, if I'm low, the main thing is the spirit of getting treatment so i can get better. So that i can, what do you want to be happy about? Grandchildren."
- c. P3: "Family encouragement is very important for the 5th and 6th chemotherapy. My family, especially my family, is it true that the family support is important for me. I start chemo rays every day, he drives me until he can not work. It is for my health."
- d. P4: "I have children and a husband who really supports me. Main point, my husband always accompanies me even he has no time to say at that time "mom has to fight.. fight pain for the sake of the children"

patients Psychological support for undergoing chemotherapy is needed to help patients reduce anxiety, pain, and strengthen their psychological status (12). The results of this research said that family support can affect the recovery of women with breast cancer (13). So for breast cancer patients who undergo chemotherapy and get support from their families are more enthusiastic doing undergoing chemotherapy, so that it can help speed up the healing process. A research stated that the support from family is an important factor for a person when facing a problem (health) and as a preventive strategy to reduce stress where his outlook on life is broad and not easily stressed (14). The family support is very necessary in patient care, can help reduce patient anxiety, increase enthusiasm for life and patient commitment to continue treatment with chemotherapy.

According to oncologists Liave and Rosa, family is the best friend for cancer patients in dealing with their disease (15). Family support for cancer patients is needed to rise the patient's mental and spirit of life. A research found that family support has an important role for patients to determine the type of treatment that will be carried out by patients and is very important in motivating patients to carry out chemotherapy (16). The sources of the support can come from other people (parents, children, husbands, or relatives) who are close to the patient and the kinds of the support could be in the form of information, behavior or certain attention and material that can make the patient feel loved, cared for and loved (17).

2. Exploring the physical and psychological experiences of clients with breast cancer undergoing chemotherapy

Theme 2: Accepting the disease process with anxiety

- a. P1: "Now I have started to understand about cancer, but I'm still worried because I got information that this cancer has many complications and the most frightening thing is that it can cause death."
- b. P3: "Thankfully, my husband continues to support me. It's okay if I have to have breast surgery. The important thing is that I'm cure but still yes, how come it's called cancer. I still think I can recover or not"
- c. P6: "How about it, after the doctor explained, I accepted that I had breast cancer I was afraid he said it was dangerous if it wasn't treated"

A research found the psychological stress of breast cancer patients comes from five main sources, namely (1) concerns about their health, (2) physical decline, (3) work, (4) daily life and (5) social environment and fear that the family will feel harmed (18). The experience of older women raises concerns about the impact of caring for their health and social responsibility. A previous study on an older women concerning a process of metastases, she felt being a burden to the family then had a mental and physical discomfort during medical treatment, so she had a possibility of death (19).

Crary et al (2010) explained that breast cancer patients will have experience of a negative emotional response. These negative emotions associated with cancer include anxiety (fear and fear), anger (frustration and anger), and depression (guilt and hopelessness). The anxiety of patients receiving chemotherapy is caused by several factors including: age, education, occupation, frequency of chemotherapy, and stage of cancer (20). A research states the anxiety that occurs in breast cancer patients undergoing chemotherapy can cause patients to stop chemotherapy and reduce their quality of life (21).

Theme 3: Tired of Chemotherapy

- a. P1: "The doctor asked only to continue chemo drugs until the age of up to the 5th year so now it's the 3rd year, it's pretty tiring. Maybe 2 more years will be finished, hopefully I will be strong and still healthy....
- b. P2: "I'm really tired of doing chemo once I was vomiting, dizzy but after 3 days the effect is all body pain, it hurts but only for a few days after that it's over, but how do you do. Must stay strong even though I'm tired. Let me get well.
- c. P3: "Nausea and vomiting, that's all. My hair is falling out, I'm also desperate, people's name was in chemo, finally I got the 4th chemo, you dropped it. I was like that when you got home, I was nauseous and threw up for a week, finally I did you say to your father, I didn't say or not."
- d. P4: "Oh, after the chemo it was not that bad. The nausea and vomiting after that. Even though I got anti-nausea medicine but I still feel nauseous, like I'm feeling sick and my body is weak, even though before that I didn't feel like it after the first chemo it didn't feel bad -It's a mess, when the 3rd chemo I told my husband that I wasn't strong enough"

- e. P5: "I often drop after chemotherapy returns. Sometimes my blood pressure is low, at first it was hard to even talk about it. My body condition really declined until I thought I was about to die. So there's a psychological burden. That's sad, I've felt pain like this. A small child who is afraid to see my condition due to chemo, so sad (eyes teary)"
- f. P6: "After chemo, I also have to take medication that I have to take regularly. I'm so bored I sometimes don't drink. I have to go back and forth for control too. Sometimes I get tired too"

According to a previous research it was found that most of the participants felt tired, tingling and numb in the arms and legs, pain in the vagina and anus during defecation, and pain in the abdomen and other body parts (22). Most patients who have experience new side effects admit that they are experiencing emotional tension and seek information about how to manage their emotions. The implication of side effects on quality of life causes many women to reconsider their decision to stay on treatment. This decision is influenced by many factors including side effects, disease severity, fear of cancer recurrence. The severity of side effects influences the individual's decision to stay or discontinue therapy.

3. Explore the expectations of clients with breast cancer in undergoing chemotherapy

Theme 4: Hope for healing through chemotherapy

- a. P1: "I think Chemotherapy is the only medicine to get rid of this cancer."
- b. P3: "I followed the doctor's instructions to comply with the chemo schedule. I want to be healthy, I want to be healthy"
- c. P4: "My hope is I am chemo. I will still be given a long and healthy life, I will no longer be sick, so I can see my grandson grow up."
- d. P6: "Chemo is not good. it has a lot of effects on the body but if I want to get better. Yes I have to want chemo"

This point of view was explored by a previous study on a women who stated that they felt treatment should be done by a doctor who specializes in knowledge of breast cancer (23). Several women described how recommendations and reassurance from oncologists encouraged patients to choose chemotherapy (24). The advantages of chemotherapy are well understood by most breast cancer patients so that it is considered a safe treatment and a hope for women with breast cancer to remain cancer-free in the future (25).

One of the factors that influence the adaptation of someone who has just been diagnosed with cancer is optimism about healing. This is important for breast cancer patients because it plays a role in increasing positive expectations for the patient's recovery. Prevention of the worsening condition of breast cancer patients can be minimized by increasing optimism about healing from their disease (26). Breast cancer sufferers are generally depressed with their illness and the series of treatments they must undergo, but it was found that breast cancer patients who have the hope that one day they can recover and return to their activities as before suffering from breast cancer can trigger the emergence of a strong personality in dealing with the stresses of the disease (27).

4. Get an overview of the client's breast cancer journey from before, during and after undergoing chemotherapy.

Theme 5: Disbelief with breast cancer

- a. P1: "I don't understand what cancer is. I was also surprised when I found the symptoms and when I checked and was told by the doctor what was cancer called"
- b. P2: "It's a lump on the left but it's a plate but that's not it, but I don't know if it's cancer."
- c. P3: "I'm mentally burdened. I was wearing a big shirt, after that I didn't cover the big scarf. I just had a lump, not cancer. That's always been on my mind"
- d. P4: "At first it was heavy, how come it hurts like this. Even though I don't have my off spring. Mom, My grandmother didn't have cancer, I don't know where she got it from."
- e. P5: "I'm actually a clean person. I don't take care of my diet, but I still get cancer like this."
- f. P6: "I know that it's called breast cancer, so there's a lump in the breast or something. But I don't have a lump, so when I touch it. It just feels like there's a lump, so it's not lumpy. I don't have any inherited cancer"

One study described how some women expressed shock, anxiety, and self-blame with the diagnosis (28). The act of mastectomy that is carried out causes the sufferer to lose breasts which is a symbol of sexuality for a woman. As a result, sufferers find it difficult to accept their own situation, feel ashamed because they are no longer perfect as a woman, and feel insecure to meet other people so it takes time. So it takes adjustment to be able to accept the situation. Losing a limb can cause grief for breast cancer patients. Kubler-Ross, describes the stages of grieving and mourning consisting of denial, anger, bargaining, depression and acceptance (29). In the denial stage, the individual will act as if nothing happened, refusing to accept the reality of the loss. Anger stage, the individual expresses a defense and sometimes feels intense anger towards God, other individuals or against situations. In the bargaining stage the individual protects or delays the awareness of loss by trying to prevent it from occurring.

Theme 6: Strive with alternative medicine

- a. P2: "I mean I wants to get better. Alternatively where have I been to, I forgot, what's the name I forgot, it's you who went to Jogja, I was there, but there were no services because there were a lot of patients, you had to register first after 3 months, but in Malang there's also in Malang, behind the IKIP, what's the name, I forgot the alternative too up to 3 series I underwent an alternative but still didn't get better."
- b. P3: "But I didn't go straight to it. I didn't go straight to the doctor but went to the alternative, if I'm not mistaken, it was my two months. It turned out that the growth was fast, the lump was growing so fast, what's wrong with you. It was taken to an alternative because my extended family wanted it so that it wouldn't have to be operated on again."
- c. P4: "At first, let's choose an alternative. My husband and my child until I was given prayer water from the lodge too. It was routine when the water ran out, my child number 2 gave the water that had been prayed for, it was never late, but yo ended up going to the hospital too because the lump got worse big"

d. P5: "What efforts have I made. I also do medical, diet, spiritual. Spiritual is not negative or heresy, it means attending recitations, prayer assistance from the kyai."

Each culture has various treatments for healing sick members of the community. In traditional societies, not all diseases are caused by biological causes. Some informants believe that breast cancer can be cured with treatment by a doctor (medical treatment), but there are also informants who choose to seek alternative medicine. This is in accordance research, most of the respondents went to another treatment place before going to the hospital (30). Came to the hospital too late. Several factors why people prefer alternative or traditional medicine as treatment to cure disease: 1) Social factors 2) Economic factors 3) Cultural factors 4) Psychological factors 5) Saturation factors for services 6) Benefit and success factors 7) Factors knowledge 8) Faith.

Theme 7: Surviving Chemotherapy

- a. P1: "In order not to break up for 5 years, so we did it like that before eating candy so yes if it was candy, it was fun. So that's what I remember and the tone in my mind."
- b. P2: "Actually, I don't really like chemo, because I didn't feel well at the time of chemo, but my self-awareness. I have to realize that it's for myself. So yes I live, that's self-awareness"
- c. P3: "I'm following, what's important is my principle. I'm cured, so I'm just like that so I thank God the chemo routine started if I'm not mistaken August to December 2018"
- d. P4: "The name is people who want to be healthy, whether they want it or not, I just do it. Chemo, I mean. for my husband and children"
- e. P5: "I had breast cancer for 6 years. I've had several surgeries, in and out of the hospital. Time and time again it was like facing death. Now after chemotherapy, I do nuclear therapy. It's called an attempt to get well."
- f. P6: "So for, after chemo. Yes, after chemo, I just followed it, I just obeyed. I follow the doctor's procedure so if for example the hospital or the doctor wants me to have chemo, I will go for it."

A research explains that the self-esteem of breast cancer patients after undergoing surgery is in the high category and 80% of patients express their belief in healing after surgery (31). One of the factors that influence the adaptation of someone who has just been diagnosed with cancer is optimism about healing. This is important for breast cancer patients because it plays a role in increasing positive expectations for the patient's recovery. Optimism towards patient recovery is influenced by several factors including: age, parity status, education level, marital status, selfesteem, family support, health status, stress, coping and selfefficacy (32). External factors that motivate respondents to treat children as a life expectation. The respondent's hope is to be able to recover from his illness and be able to take care of his children growing up (33).

CONCLUSIONS AND SUGGESTIONS

The specific goals that have been set by the researcher can be answered through 8 (eight) themes, namely: (1) Disbelief in experiencing breast cancer (2) Accepting the disease process with anxiety (3) Strengthening yourself when you have to undergo a mastectomy (4) Endeavoring with the treatment process alternative (5) Tired of Chemotherapy (6) Surviving with Chemotherapy (7) Hoping for recovery through chemotherapy (8) Family support as an encouragement to undergo chemotherapy.

Declaration of conflict of interest

The authors declare that there is no conflict of interest

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