

Transforming the Lives of Breast Cancer Patients: A Qualitative Study

Zakariyati^{1,2}, Ariyanti Saleh^{3*}, Rina Masadah⁴, Erfina³

¹Doctoral student program of medicine, Medical Faculty at Hasanuddin University, Makassar, Indonesia.

²Institut Ilmu Kesehatan Pelamonia Kesdam XIV/ Hasanuddin, Makassar, Indonesia

³Faculty of Nursing, Hasanuddin University, Makassar, Indonesia.

⁴Department of Pathology Anatomy, Hasanuddin University, Makassar, Indonesia.

Email: ariyantisaleh@unhas.ac.id

*Corresponding Author

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ABSTRACT

Introduction: The transformation of the lives of breast cancer patients is an important issue as the incidence of this disease increases. Breast cancer is the most common type of cancer among women, often causing emotional challenges, including anxiety and depression, as well as identity changes. This study aims to explore the experiences of breast cancer patients undergoing chemotherapy, with a focus on the physical, psychological, social, and spiritual impacts.

Methods: This study was qualitative research, and information was collected by conducting in-depth interviews with 11 patients, 5 nurses, 2 survivors, and 1 doctor at Tk.II Pelamonia Hospital, Indonesia.

Results: 4 essential points were found, namely changes in daily life, including physical and psychological impact, social support from family and friends, spirituality, and hope and motivation.

Conclusion: There is a need for a holistic care approach that integrates social and spiritual support to improve the quality of life of breast cancer patients during treatment.

Keywords: Breast Cancer, Chemotherapy, Social Support, Spirituality, Quality of Life.

INTRODUCTION

The transformation of the lives of breast cancer patients is a critical topic to discuss, especially in the context of the increasing incidence of this disease worldwide. Breast cancer has become one of the most common forms of cancer, not only because of its high prevalence but also because of its significant impact on patient's quality of life (Arnold et al., 2022; Siegel et al., 2023). According to the latest data, breast cancer is the most commonly diagnosed type of cancer among women, and this condition can cause drastic changes in the psychological and social aspects of their lives (Vahora et al., 2022).

A breast cancer diagnosis often leads to severe emotional challenges, including anxiety, depression, and identity changes. The treatment process, which can include surgical interventions and adjuvant therapy, has the potential to bring side effects that are physically and mentally taxing on patients (Koop et al., 2022). It is essential to explore how individuals struggle to cope with and adapt to significant changes in their lives as a result of breast cancer diagnosis and treatment journey.

This qualitative study focuses on individual patients to understand how they cope with the life challenges that arise after a breast cancer diagnosis. Through this in-depth approach, we can delve into the experiences, coping strategies, and perspective changes experienced by patients. This research focuses on the social and spiritual aspects of transforming patients' lives. Family, friends, and community support are essential in their recovery process (Vahora et al., 2022). Spiritual beliefs can assist patients in finding new meaning and purpose in life, assisting them in facing and accepting existing realities. The psychological and social consequences of breast cancer highlight the need for more attention to patients' quality of life, especially in the context of individual-focused care (Melhem et al., 2023).

Therefore, research on the life transformation of breast cancer patients is essential to provide in-depth insight into the transformation experienced by breast cancer patients, both physical, psychological, social, and spiritual.

METHOD

This research is qualitative research that focuses on individual lives. Thus, understanding the perceptual experience of individuals can be done by conducting interviews. In qualitative data analysis, we sought to identify patterns of everyday experiences experienced by participants. This study was conducted in an outpatient hospital at Tk.II Pelamonia hospital in Indonesia. In this study, as many as 11 breast cancer patients, 5 nurses, 2 survivors, and 1 doctor were included in in-depth interviews. Interviews were conducted face-to-face with researchers in a private room with an average duration of 40 minutes. Flexible and open interview scripts are used to support the description as they are experienced. The interviews began spontaneously, creating a supportive environment that allowed participants to freely express their own experiences, feelings, and spiritual concerns since receiving a breast cancer diagnosis. During the interview process, it was recorded in MP3 form to make it easier to compile the script and analyze it. The analysis was carried out by tabulating in the Microsoft Excel application and setting themes based on categories and codes found according to the respondents' statements.

RESULT

Table 1: Distribution of demographic data of participants

Variable	n	%
Age		
38-43 Years	6	54,5%
44-50 Years	5	45,5%
Pendidikan		
Elementary School	1	9%
High School	4	36,4%
Bachelor's Degree	5	45,5%
Master's Degree	1	9%
Marital Status		
Marry	11	100%
Divorce	0	0%
Work		
Housewives	3	27,3%
Self-employed	4	36,7%
Civil Servants	4	36,7%
Chemo Amount		
2	1	9%
3	10	90,1%

Based on table 1. The age of the respondents is still very productive in the range of 38-43 years (54.5%), with a higher education level of 54.5% (bachelor's degree)

Master's Degree). Generally, the marital status is married and still accompanied by the husband (100%), self-employed and civil servant jobs are 36.7% each with the highest amount of chemo to 3rd as much as 90.1%.

Table 2. Characteristics of Triangulation Participants Source (survivor, oncology nurse, oncologist) (n=8 people)

Participants	Gender	Age (Year)	Information
Oncology Nurse			
PP 1	Woman	34	Length of employment > from 10 years with S1 and Nurse Professional qualifications
PP 2	Woman	34	Length of employment > from 10 years with DIII Nursing educational qualification
PP 3	Woman	36	Length of employment > from 10 years with S1 and Nurse Professional qualifications
PP 4	Woman	37	Length of employment > from 10 years with DIII Nursing educational qualification
PP 5	Woman	32	Length of employment > from 10 years with DIII Nursing educational qualification
Survivor			
PS 1	Woman	51	High School Education, Marital Status, and Civil Servants

PS 2	Woman	52	High School Education, Married and Self-Employed Status
Doctor of Oncology			
PD 1	Man	55	Length of employment > 10 years, Oncologist education.

Based on Table 2, most health workers (nurses and oncologists) have worked for more than ten years, and two survivors are elderly. All nurses are female and have DIII education levels in nursing and the nursing profession.

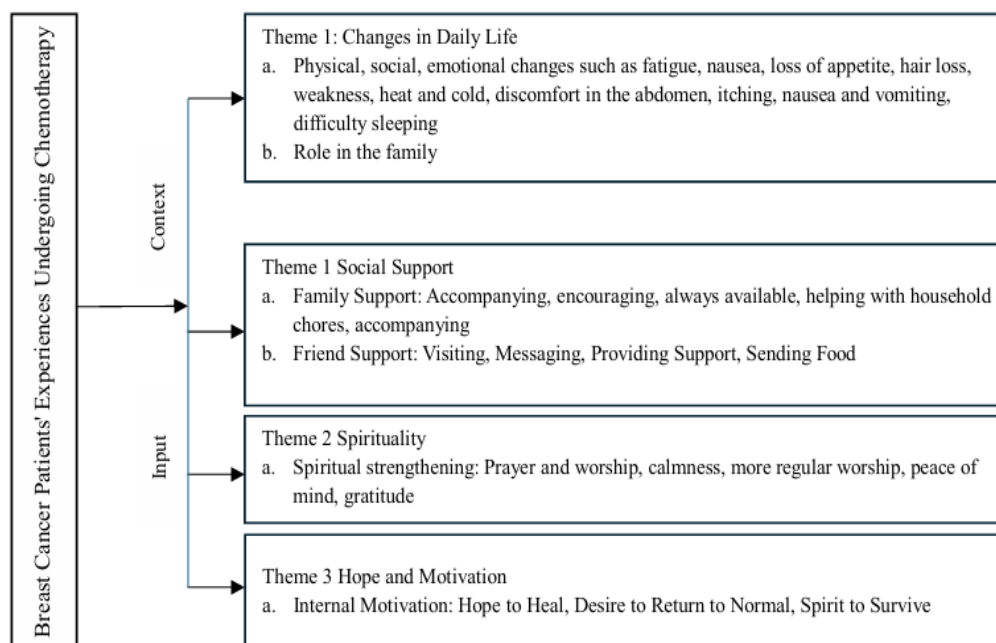


Chart 1: Themes on the exploration of breast cancer patients' experiences in undergoing chemotherapy

Based on Chart 3, the average patient experiences changes in their daily lives. Some participants experienced similar complaints related to physical weakness after chemotherapy. Participants 1, 2, 3, 4, 5, 6, 7, 9, and 11 reported weakness, fatigue, and weakness after undergoing chemotherapy. Participant 2: "This is a weakness that feels weak," and Participant 9: "It feels like there is a weakness, fatigue." Sleep disturbances were also a common complaint experienced by Participants 1, 2, 3, 5, 6, 7, 8, and 11. They reported difficulty sleeping or insomnia as a side effect of chemotherapy. Participant 3 said: "Four days and four nights, there was no feeling of not going down in the slightest." Nausea and physical pain were often reported by Participants 3, 6, 7, 10, and 11, where they experienced nausea, pain, and vomiting after undergoing chemotherapy. Participant 10 mentioned: "Nausea vomiting itching."

In terms of psychological effects, anxiety and stress were the main complaints experienced by Participants 1, 2, 3, 4, 5, 6, 7, 8, 9, and 11. They admitted to feeling anxious and depressed during chemotherapy, as Participant 7 said: "It feels like mom is worried about stress." Some participants, such as Participants 1, 3, 4, 5, and 9, also experienced depression and mood swings. For example, Participant 1 revealed: "I had felt anxious or depressed."

Nurses agree that patients often experience psychosocial problems, such as anxiety, which are a significant challenge in their care. Some nurses note that physical weakness, sleep disturbances, and nutritional problems are common complaints, often caused by side effects of chemotherapy. Nurses 1 and 2 highlighted that anxiety and weakness are symptoms that patients usually face, while Nurse 3 added that sleep disorders also appear frequently. Nurse 4 pointed out that a lack of family support can worsen the level of anxiety experienced by patients, and Nurse 5 mentioned that breast pain, as well as symptoms of nausea and vomiting, are also side effects that patients often report. Oncologists recommend that the management of therapy in the early stages is better than that of those who come to treatment in the advanced stages.

Participants 1, 5, 6, 9, and 11 tried to return to activity despite facing side effects from the treatment. They show a willingness to stay involved in daily activities and work. Participant 5 revealed, "The daily activities I should want to start," affirming her intention to return to her daily routine. Participant 6 stated, "I can do everything I can do," showing the spirit to remain active in the midst of the challenges faced. Nurses 1 and 4 stated that patients often experience physical weakness and sleep disturbances due to the side effects of treatment. This indicates that their physical activity has become limited, and they may need time to adapt to their new

conditions. Nurse 2 emphasized that it is essential for patients to stay mobile, even within the limits of their abilities.

The importance of social support from family and friends in facing the cancer treatment process. Participants 1, 3, 4, and 5 emphasized the crucial role of family in providing emotional and practical support, such as encouragement and assistance in daily care. For example, Participant 1 stated, "There is a husband who has to wait until he doesn't; anyway, I'm waiting," showing the husband's active involvement in supporting the recovery process. In addition, Participants 2 and 6 noted that support from friends was also invaluable, although sometimes limited. Participant 2 emphasized that "their existence remains acknowledged," signaling the importance of emotional support from friends, although not always in a large form. Participants 7, 8, and 10 further indicated that support from the surrounding environment, including neighbors and the community, also played a role in providing encouragement and helpful information.

The nurses agreed that the emotional support provided by the family was very influential on the healing process and the patient's well-being. Nurses 1 and 2 emphasized that involving the family in spiritual activities, such as praying, can provide additional encouragement for patients. Nurse 3 noted that encouragement and support from family members, such as a partner, is essential to help patients feel more robust in the face of their illness. Nurse 4 emphasized that support from family should be prioritized, especially during chemotherapy, to motivate patients. On the other hand, Nurse 5 noted that the lack of support from the family can be a significant obstacle for patients in the healing process. The survivors said that the form of family support by being present to accompany the treatment process was extraordinary support.

The role of spirituality in dealing with a cancer diagnosis. Participants 1, 2, and 4 highlighted the importance of spiritual practices such as dhikr, prayer, and recitation of the Qur'an, which are considered to provide calm and strength in the face of challenges. Participant 1 stated, "Deepening religious knowledge grows because maybe this is a rebuke for me," showing how the experience of illness can encourage individuals to delve deeper into the spiritual aspect. Participants 5, 6, and 7 emphasized the importance of surrendering to God and getting closer to the Almighty, reflecting an attitude of acceptance and hope in difficult situations. Participant 7 revealed, "This disease is also a rebuke from God," which indicates that they see illness as an opportunity for spiritual reflection. In addition, Participants 3, 8, and 11 emphasized that support from family and community contributes to their spiritual well-being, creating a sense of mutual support and togetherness in the face of the treatment process. Participant 3 stated, "Support from family and friends is critical; They are always there to encourage and help me in this difficult time," Participant 8 revealed, "Many friends and family always remind me to pray and be grateful; it really helps me feel not alone,"

The nurses stressed that patients need to undergo spiritual practices, such as prayer and dhikr, as part of their journey. Nurses 1 and 2 highlight the importance of spiritual effort to draw closer to God, where effort and prayer must go hand in hand. Nurse 3 emphasized that praying and self-healing are effective ways to gain calm and strength when facing illness. Nurse 4 also noted that the prayer support of the family is urgently needed, suggesting that family involvement in spiritual practice can have a positive impact on patients. Meanwhile, Nurse 5 underlined the importance of family attention in supporting the patient's spirituality, where family involvement can increase a sense of care and emotional support.

Participants 3, 8, and 9 Expressed their hope to return to activities and improve their quality of life after treatment. "Alhamdulillah, now the level of food is very small..." (Participant 3) and "Usually the future, even though it is not normal, there is just one" (Participant 8). Participants 4 and 7: Showing motivation to stay motivated and fight despite difficulties. "We are enthusiastic, God willing." (Participant 5) and "motivation for the spirit of financial support" (Participant 7).

Nurses 1, 2, 3, 4, 5 emphasize the importance of hope in the patient's healing process. Nurse 1 stated that there was no word to give up, and many patients who recovered became motivation for other patients. This suggests that hope can serve as a motivator for patients to keep fighting. Nurse 4 noted that the biggest motivation often comes from self and family support. Educating families to provide emotional support and encouragement to patients is essential to creating a positive environment. This helps patients to remain optimistic and open to the treatment they are undergoing.

DISCUSSION

Changes in the Daily Life of patients with breast cancer

Breast cancer patients undergoing chemotherapy undergo significant changes in daily life, especially activity restriction and adaptation to changes (Table 2). Chemotherapy is associated with a variety of symptoms that develop over time, including psychological distress, pain, fatigue, and self-image disorders, which collectively contribute to a decline in quality of life (Y. F. Wang et al., 2023). The treatment process often leads to an increase in sedentary behavior, which is associated with worsening symptoms such as anxiety, depression, and fatigue, which further affects physical and cognitive function (Welch et al., 2023). Patients report decreased physical, emotional, and functional well-being, with fatigue being a very burdensome side effect, often judged to be very disruptive and affecting daily activities and social interactions (Epstein et al., 2021; Muhammad et al.,

2023). Chemotherapy-induced nausea and vomiting also significantly affect patients' eating habits and social functioning, requiring specific management strategies to reduce these impacts (Gour et al., 2023). In addition, changes in food preferences were also observed, with patients tending to adopt a healthier diet, although this did not necessarily lead to weight gain due to reduced physical activity (Pedersini et al., 2021).

Undergoing chemotherapy is a multifaceted experience that includes both physical and psychological impacts, which have a significant effect on the patient's quality of life. Physical impacts felt include fatigue, nausea, loss of appetite, hair loss, weakness, heat and cold, and discomfort in the abdomen. Meanwhile, the psychological impact experienced is anxiety and depression (Chart 3). Complaints during the chemotherapy process have been obtained because most of them have been in chemotherapy 2-3 (Table 1).

This is in line with research that explains that chemotherapy can cause a variety of side effects, including nausea, mucositis, and fatigue, which can severely affect nutrient intake and sleep, thus affecting overall well-being and mental health (Barry, 2023). Dermatological side effects, such as skin changes, also contribute to decreased self-esteem and quality of life, which affects body image and causes stress, depression, and anxiety (Almeida et al., 2023). Cognitive impairment, often referred to as "chemo brain" is prevalent, with up to 75% of non-central nervous system cancer survivors experiencing cognitive decline, especially in terms of memory, learning, and executive function (Kim et al., 2023; Miyashita, 2024).

Psychologically, patients often experience increased anxiety and depression, especially at the beginning of chemotherapy, although these symptoms may decrease in tandem. The psychological burden is exacerbated in patients with a history of psychiatric disorders or those who use psychotropic medications, who tend to maintain higher levels of anxiety and depression during treatment (Kamimura et al., 2024). The emotional experience of chemotherapy is complex, with patients expressing feelings of anxiety, distrust, and hope, often relying on family support as an important coping mechanism. Nonpharmacological interventions, such as music therapy and clown visits to hospitals, have shown promising results in reducing psychological distress and improving emotional states, highlighting the importance of a holistic approach to care (Simões et al., 2023).

Researchers assume that undergoing chemotherapy is a multifaceted experience that has a significant impact on the physical, psychological, and quality of life aspects of patients. Chemotherapy causes noticeable physical consequences, such as fatigue, nausea, and hair loss, as well as sleep and nutritional disorders, which worsens the patient's physical and mental health and affects body image and self-esteem. In addition, patients often experience anxiety, stress, and depression, especially in the early stages of treatment. Cognitive impairment, usually called 'chemo brain,' is also a significant problem, affecting memory, concentration, and executive function, thus reducing overall quality of life. In this context, social support, especially from the family, plays a vital role in helping patients cope with the emotional stress caused by chemotherapy. Finally, nonpharmacological interventions, such as music therapy and other diversion activities, are considered effective in reducing psychological distress, suggesting that a holistic approach to care is essential for improving patients' emotional well-being during chemotherapy treatment, including Multimodal Nursing Intervention (MNI), which includes Progressive Muscle Relaxation (PMR) and psychological counseling significantly improves sleep quality, fatigue, and depression levels (Erfina et al., 2022).

Social Support for patients with breast cancer

Social support from family and friends plays an essential role in the experience of breast cancer patients undergoing chemotherapy, affecting various aspects of their physical and psychological well-being. In this study, it was found that family, such as accompanying, encouraging, always present, and helping with household chores, and friends, such as visiting, sending messages, providing support, and sending food, hold an important role in undergoing chemotherapy in breast cancer patients (Chart 3). Most of the respondents in this study had marital status, married by coming for medical treatment accompanied by their husbands, and on average, they had income (self-employed) and health insurance (PNS) that supported this chemotherapy process (Table 1).

This has also been proven in previous studies where family support can improve the quality of life and mental health of breast cancer patients. Various studies have shown that family support can increase motivation to comply with chemotherapy protocols, thereby improving treatment outcomes and quality of life (Karim et al., 2023; Lubis et al., 2023). The presence of family support is associated with better body image as well as reduced anxiety and depression in patients, which highlights the importance of family support in managing psychological stress related to cancer treatment (Garousi et al., 2023; Wijayanti & Ladesvita, 2023). Companionship and peer support also contribute significantly to the emotional and practical needs of breast cancer patients. Peer support, in particular, offers emotional validation, practical advice, and role modeling, which can ease fears of cancer recurrence and improve overall quality of life (Y.-Z. Wang et al., 2024).

Researchers assume that social support, especially from family and friends, plays a crucial role in the experience of breast cancer patients undergoing chemotherapy, having a significant effect on their physical and psychological well-being. This study shows that the existence of family support not only improves the quality of life and mental health of patients, but also contributes to the motivation of patients to adhere to chemotherapy protocols, thus having a positive impact on treatment outcomes. Overall quality of life. This assumption

underscores that strong social support can be a determining factor in the successful treatment and adaptation of breast cancer patients.

Spirituality of patients with breast cancer

Spirituality plays an important role in strengthening breast cancer patients undergoing chemotherapy because it provides a sense of calm, peace of mind, and gratitude, which is obtained by more regular worship, prayer, and worship (Chart 3).

Research shows that spirituality and religiosity are significant management mechanisms for breast cancer patients, helping them manage the psychological and physical challenges of the disease and its treatment. Spiritual support can increase a patient's capacity to deal with the side effects of chemotherapy (Daralina et al., 2024). Similarly, a study in Tunisia highlighted the importance of religious beliefs in overcoming cancer, noting that an increase in beliefs since a common diagnosis occurs among patients provides emotional comfort and influences therapeutic decisions (Mokrani et al., 2023). Furthermore, spiritual well-being, which includes both religious and existential dimensions, has been linked to reduced depressive symptoms and improved overall well-being during cancer treatment (Lestari et al., 2023). The balance of spiritual and nutritional needs is also emphasized, as it supports the immune system and improves the quality of life during chemotherapy (Sriati et al., 2021). The development of spiritual needs during chemotherapy is dynamic, with existential needs often associated with life dissatisfaction. This highlights the need for a multi-professional approach to effectively address these needs (Büssing et al., 2021). Mindfulness-based spiritual practices have also been shown to improve spiritual well-being significantly, demonstrating their potential as an effective intervention to improve the quality of life of breast cancer patients undergoing chemotherapy (Wahyuningsih et al., 2019). Collectively, this study underscores the importance of integrating spiritual care into the treatment regimen for breast cancer patients, as it contributes significantly to their psychological resilience and overall quality of life during chemotherapy.

Expectations and Motivations of patients with breast cancer

Breast cancer patients undergoing chemotherapy have a variety of expectations and motivations that are influenced by a variety of factors, including their physical, psychological, and social needs. They hope to recover and have the desire to return to normalcy and the spirit to survive (Chart 3). One crucial expectation is related to the role of young women as wives, where they seek to maintain self-love and self-esteem, adjust to marital relationships, and aid in family recovery, which is essential for their rehabilitation and family dynamics (Gao et al., 2024). During chemotherapy, patients often experience unmet spiritual needs, which can fluctuate during the treatment phase, affecting their life satisfaction and existential outlook (Büssing et al., 2021). Pre-treatment knowledge about chemotherapy side effects also plays a role in shaping expectations, as understanding these effects can improve coping and treatment adherence (Abdus-Salam et al., 2022). Expectation is a significant motivating factor, with pain identified as a predictor of hope, and factors such as self-esteem and depression affect expectation levels during treatment (Cristina et al., 2016).

The expectations and motivations of breast cancer patients during chemotherapy are multifaceted, involving complex interactions between personal, relational, and treatment-related factors that require comprehensive support from healthcare professionals to address them effectively.

CONCLUSION

The experience of undergoing chemotherapy for breast cancer patients is a complex and multifaceted process, which has an impact on their daily lives, including significant physical and psychological effects on their quality of life. Physical impacts that include fatigue, nausea, and self-image disorders, as well as psychological impacts in the form of anxiety and depression, create severe challenges in patients' daily lives. Social support from family and friends has proven crucial in helping patients cope with the emotional distress that arises during treatment by improving their motivation and quality of life. Spirituality also plays an important role, providing the calm and emotional support needed to face the challenges of treatment. The patient's expectations and motivations, which are influenced by physical and emotional needs, suggest that the management of social and spiritual support can strengthen the endurance and quality of life of breast cancer patients during chemotherapy. As such, the study underscores the need for greater attention to the patient's experience and the support they need in coping with the cancer treatment journey.

Research Ethics

This research was carried out after passing the Research Ethics Committee of the Faculty of Medicine, Hasanuddin University of Makassar, by issuing a research ethics license number 507/UN4.6.4.5.31/PP36/2024.

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