THE POWER OF HOPE AND QUALITY OF LIFE IN PATIENTS WITH HEAD AND NECK CANCER

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Theoretical framework and objectives:

- Head and Neck cancer is especially traumatic emotionally because of disfigurement and functional impairment resulting from both the cancer and its treatment.
- Awareness of diagnosis of cancer can have a devastating effect on individual personality, psychological balance and their families.
Numerous concerns exist from a psychological perspective for the head and neck cancer patient, including the reaction to the cancer itself, the threat to one's mortality, body image issues, fears of treatment (surgery, radiation, and chemotherapy) and potential disfigurement, family, social and vocational issues.
In the frame of theoretical and empirical background of Clinical Psychology and Psychooncology, in the past decade there has been a considerable increase of interest in Hope issues and Quality of life (QoL).

Snyder's cognitive model of hope is very famous which defines hope as "a positive motivational state that is based on an interactively derived sense of successful (a) agency (goal-directed energy), and (b) pathways (planning to meet goals)" (Snyder, Irving, & Anderson, 1991, p. 287).
The main aim:

- The main aim of this study is to compare patient’s level of Hope and the Quality of life, before and after the Head and Neck cancer surgery.
Design & methods:

• Participants inclusion criteria: During the period of June 2009- May 2013, 125 participants with diagnosed Head and Neck cancer were involved in this study. Patients attending the Maxillofacial surgery department at Clinical Hospital in Stip, were invited to participated in this study. Participant exclusion criteria was significant psychological distress.

• The questionnaires we used: Quality of Life Questionnaire (EORTC QLQ)-H&N35, a questionnaire designed to assess the quality of life of head and neck (H&N) cancer patients in conjunction with the general cancer-specific EORTC QLQ-C30 ; Adult Hope Scale (AHS) C. R. Snyder.
Results:

- The results shown that there were significant differences between the level of Hope and Quality of life, comparing the period before and after surgery. Issues associated with the head and neck cancer patient are far-reaching, and the ramifications of treatment often extreme. Therefore it is important for patients, caregivers, and medical staff to understand the many facets of adjustment to cancer and the impact of treatment on the patient's quality of life as well as its medical impact.
Conclusion

Psychological support is often necessary in assisting these patients to make a successful adjustment to all the difficulties they will encounter as a result of the illness. Even long-term survivors report difficulties in coping, and therefore caregivers must remember that patients make a lifetime adaptation when undergoing treatment for head and neck cancer. Because their lives are changed, they must make appropriate personal changes in order to assist them in ensuring the highest possible quality of life following treatment.