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Depression, suicidal risk and pain among cancer patients

Vladimir Milošev, Lenče Miloševa, Faculty of Medical Science, Goce Delčev University; Clinical Hospital,Štip, R.Macedonia

Abstract

Introduction: Cancer patients have to face and dial with many questions and factors such as receiving bad news of repeated threats to their own life, suffering from pain, luck of support and loosing meaning of life. Patients also face new social roles, lifestyle and medical treatment expense. All of these factors cause anxiety, fear of death, loss of confidence and some of them may have major depressive disorder. According to Yu et al. (2012) the study of cancer co-morbidity with depression has been challenged because depressive symptoms range from reactions to mood disorder, through intense anxiety to major depressive disorder. Depressive disorder and suicidality and co-morbid with cancer is underestimated and under-treated. This was main motivation to try with this research to answer on some questions which in our opinion will help physicians to pay more attention to this condition.

 Objectives: The first aim of this study was to asses prevalence of depression and suicidality among patients with diagnosed cancer in maxillofacial region. Additionally, the second aim was to check correlation between pain and depressed cancer patients.

Material and Methods: In the frame of the UGD supported project, the data were collected from Department of maxillofacial surgery, Clinical Hospital, Stip, Macedonia, during the period 2014-2016. Patients with diagnosed cancer in maxillofacial region participated in this study. The final survey sample consists of 115 patients (64% female and 36% male) aged 19-70 years. In order to asses depression and suicidality we applied: Patient Health Questionnaire-9 (PHQ-9) and M.I.N.I. structured clinical interview (module for suicidal risk). We assessed severity

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of pain by using a Visual Analog Scale (VAS). Written informed consent was obtained by all participants.

Results: *Prevalence of depression*

Of 115 study patients, 52 patients (45.52%) with PHQ-9 scores=10 or more were classified in the depressive group. Among these, twenty seven patients (51.92 %) experienced mild depression,thirteen (25%) had moderate depression and twelve (23.07%) were in severe depression.Sensitivity and specificity of diagnosis being correctly were 25.0% and 9.2% respectively.

Pain and depression

Mann-Whitney U testing showed that cancer patients with depression experienced significantly more pain than cancer patients without depression ($p<0.001$). If patients were classified according to pain level, we found that ten (19.23%) and twelve (23.08%) depressed cancer patients had moderate and severe pain level respectively.

Additionaly, Mann-Whitney U testing showed that cancer patients with high depressive and pain score significantly have higher risk of suicidality than cancer patients without those factors ($p< 0.001$ and $p< 0.001$, respectively). Cancer patients with depression and pain were 1.4 (95% CI interval =1.06 -1.52) and 1.2 (95% CI interval=1.09-1.25) times more prone to have suicidal risk, respectively.

Conclusion: We can conclude that depressive disorder is the one of the most common problem in cancer patients and it deserve additional attention. The prevalence of 45.22 % is fit with the higher range of some findings of previous studies (3%-58%). The prevalence of suicidality (32.69%) also show us that the mechanism of the association between cancer, depression, suicidality and pain should be approached as holistic (biopsychosocial model), not as a single disorder. Due to the limitation of this study, more prospective screening studies are needed in future. There is a need of multidisciplinary work and teams between maxillofacial surgeons, clinical psychologist, psychiatrist and oncologist.

Key words : depression; suicidal risk; pain; cancer patients; maxillofacial region