

The Importance of Knowing the Potential for Cure among Women Newly Diagnosed with Breast Cancer

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ABSTRAK

Diagnosis kanser payu dara di kalangan wanita Malaysia telah mendorong ramai wanita untuk mendapatkan rawatan daripada pelbagai pertubuhan kesihatan dan ianya merupakan satu amalan yang ketara di kalangan wanita Malaysia. Objektif kajian ini adalah untuk mengetahui sama ada penyembuhan adalah satu maklumat yang penting kepada wanita yang baru didiagnos dengan penyakit kanser payudara. Kajian ini juga, bertujuan untuk menilai sama ada maklumat mengenai penyembuhan dipengaruhi oleh variabel lain seperti kumpulan etnik, umur, tahap pendidikan dan kelas sosial. Kaedah yang digunakan dalam kajian ini adalah kaedah temubual yang berstruktur dengan sembilan item maklumat, diberikan kepada 100 orang wanita yang baru didiagnos dengan kanser payudara. Wanita-wanita ini juga diminta memilih maklumat penting yang menjadi keutamaan. Kaedah Thurstone Scaling digunakan untuk menghasilkan profil maklumat mengikut pilihan dan skala nilai mengikut keutamaan. Analisis Varians (ANOVA) dan ujian-t telah digunakan untuk melihat perbezaan antara skor min. Keputusan kajian mendapati bahawa maklumat tentang kecenderungan ke arah penyembuhan mendapat keutamaan di kalangan responden. Hasil kajian juga mendapati tiada perbezaan yang signifikan di antara tahap pendidikan, kelas sosial, umur, serta kumpulan etnik dengan maklumat tentang penyembuhan. Kesimpulan kajian ini menjelaskan bahawa maklumat penyembuhan penting bagi wanita-wanita yang baru didiagnos dengan kanser payudara tanpa mengira kumpulan etnik, umur, tahap pendidikan dan kelas sosial. Hasil kajian ini dapat membantu para doktor dan jururawat memberi maklumat dan nasihat kepada wanita yang baru didiagnos dengan kanser payudara.

Kata kunci: penyembuhan, kanser payudara

ABSTRACT

A diagnosis of breast cancer among Malaysian women causes many women to seek cure from different health bodies and is a common practice prevalent among Malaysian women. The objective of the study was to explore whether cure is an important information to women newly diagnosed with breast cancer, and to assess if the information on cure were influenced by variables such as ethnic group, age, level of education and social class. A survey design using a structured interview was adopted for this study and nine items of information were presented to 100 women newly diagnosed with breast cancer. Women were asked to choose which information is important and of priority. Thurstone Scaling method was used to produce rank orderings or profiles of information and scale values

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according to priority. An Analysis of Variance (ANOVA) and t-test was carried out to look at the differences between the mean scores. Information on the likelihood of cure obtained the highest priority. No significant differences were found in terms of educational level, social class, age and ethnic groups in relation to the information on cure. In conclusion, adequate information on cure is important and a priority to all women newly diagnosed with breast cancer, irrespective of ethnic group, age, level of education and social class. The findings of this study will be useful to health care professionals when providing information to women newly diagnosed with breast cancer.

Keyword: cure, breast cancer

INTRODUCTION

Breast cancer is the most common malignancy amongst women of all ages and is on the rise in Malaysia (Usha Devi, 2001). It is also the number one cause of death among Malaysian women. A breast cancer diagnosis for women is regarded with more fear than any other diagnosis, instilling fear of shock, grief, uncertainty and loss of control. Studies have indicated that breast cancer patients have extensive information needs and seek as much information as possible about the likelihood of cure and the disease process (Davison et al., 1995, Graydon et al., 1997). Women upon diagnosis of breast cancer want to know whether there is a cure for breast cancer. This important information need was found to be the top priority information for British and Canadian women (Luker et al., 1996). Women find this information important and of priority to deal with their illness (Chalmers & Thompson, 1996).

Many women with breast cancer seek cure from different health bodies. Women here, seek all kinds of treatment to find a cure including "witchcraft", traditional, herbal and Ayurvedic medicine till their dying day (Omar, 2000). Seeking help and cure from alternative health professional is a practice prevalent amongst Malaysian women, particularly as such treatment is non-invasive and does not lead to any blood loss or damage in their body image. Malay women still continue to choose the traditional method of seeking a "witchcraft",

whereas Chinese and Indian women choose herbal medicine from "Sinseh" and Ayurvedic medicine to seek cure for breast cancer. Women in Malaysia do not get enough information on cure. Women are ignorant of the fact that breast cancer survival rate is improved with early detection and early treatment. Seeking cure with unproven alternative treatment upon diagnosis of breast cancer has led to a low survival rate among women with breast cancer in Malaysia (Najibah, 2001). Irrespective of whether they were educated or uneducated, Malaysian women wanted more control over their health and sought information about the cure for breast cancer. Information on cure did not end only upon diagnosis but was found to continue even during their recovery phase.

Information on cure is a necessary prerequisite to informed decision making (Cawley et al, 1990). The information on cure could be the key to the process of empowerment. The current sources of information available on brochures and pamphlets do not reveal any information on cure, which could assist in their decision making.

Women upon diagnosis of breast cancer look upon nurses and doctors for information about the disease and for opinions. These women need to be provided with sufficient information on cure as a guide for decision-making.

Information about the likelihood of cure of breast cancer has been perceived as the most important information at diagnosis in

a UK study (Luker et al, 1996). No study has been done locally to explore the importance of cure among women with breast cancer.

The aim of this study is to explore whether the information on cure was important to women newly diagnosed with breast cancer and to determine whether the variables such as age, level of education, social class and ethnic group had any influence on the information on cure.

MATERIALS AND METHOD

A survey design using a structured interview was adopted for this study. The study was conducted in Hospital Universiti Kebangsaan Malaysia (HUKM) and Hospital Kuala Lumpur (HKL). Approval to conduct the study was obtained from the Research Ethics Committee and from the directors of both hospitals. To examine the preference for information, nine information needs devised by Degner et al. (1997) were presented. Prior approval was obtained from Lesley Degner to use the nine information needs in this study. The nine information needs were presented in four languages: English, Malay, Mandarin & Tamil and women were given the nine information needs according to their preferred language. Women were asked to choose which information is of importance and priority.

One hundred consecutive women newly diagnosed with breast cancer, between 3-4 months from diagnosis were interviewed. All the women in this study had undergone mastectomy and the interview was conducted in a private room. Informed consent was obtained prior to the interview. The sample comprised Malay (n=50), Chinese (n=30) and Indian (n=20). The patients' age were categorised into two groups. The mean age of the study participants was 45 years (ranging from 32 to 60 years). Level of education was categorized as Standard 6, Form 3 (primary education), Form 5, Form 6 (secondary education) and graduate.

Social class was allocated in accordance to the nature of work (occupation) of study participants and their husband. Professional groups were categorized into social class I, administrative and managerial workers into social class II, clerical and technicians into social class III, sales and related workers into social class IV, agricultural workers into social class V and lastly, factory workers, labourers and transport operators into social class VI (Table 1).

Table 1: Characteristics of socio-demographic variables for newly diagnosed breast cancer (n=100)

Ethnic Group		
Malay	50%	(n = 50)
Chinese	30%	(n = 30)
Indian	20%	(n = 20)
Age		
< 45 years	57%	(n = 57)
> 45 – 65 years	43%	(n = 43)
Educational level		
Graduate	24%	(n = 24)
Secondary	59%	(n = 59)
Primary	17%	(n = 17)
Social Class		
1 & 11 (Upper)	46%	(n = 46)
111 & 1V (Middle)	45%	(n = 45)
V & V1 (Lower)	9%	(n = 9)

All data were coded using the data entry program of SPSS and details were recorded on demographic variables including age, level of education, ethnic group and social class. The Thurstone scaling program gave the scale values (score) for how many times each item was preferred. An Analysis of Variance (ANOVA) and t-test (t) was carried out to look at the differences between the mean scores.

RESULTS

Information on the likelihood of cure obtained the highest importance with a score of 1.83 (Table 2). Information on sexual attractiveness achieved a score of 1.04 followed by spread of disease (0.86), different types of treatment (0.65) and side-effects of treatment (0.01). The other

perceived important information needs were about the risk to family with a score of (-0.66), social life (-1.09) and self-care (-1.30). The information on impact on family and friends obtained the lowest score (-1.34). There was no significant difference in the scores for "likelihood of cure" between the various ethnic groups, educational level, social class, and age (Table 3, 4 & 5).

Table 2: The Thurstone Scale Analysis on the Nine Information (n=100)

Information	Scale Value	Rank
Information about cure	1.83	1
Information about sexual attractiveness	1.04	2
Information about spread of disease	0.86	3
Information about types of treatment	0.65	4
Information about side-effects of treatment	0.01	5
Information about genetic risk	-0.66	6
Information about social life	-1.09	7
Information about self care	-1.30	8
Information about impact on family and friends	-1.34	9

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Table 3: Scales Value for the item Cure and for each Ethnic Group, Educational level, Age and Social class on the Information on Cure

		Scale values
Information on Cure	n = 100	1.83
Ethnic group	Malay (n=50)	1.79
	Chinese (n=30)	1.83
	Indian (n=20)	1.83
Educational level	Graduates (n=24)	1.83
	Secondary (n=59)	1.80
	Primary (n=17)	1.83
Age (years)	Younger (<45) (n=53)	1.79
	Older (>45) (n=47)	1.83
Social class	Upper Social class (n=46)	1.79
	Middle Social class (n=45)	1.83
	Lower Social class (n=9)	1.83

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Table 4: Analysis of Variance (ANOVA) on information on Cure for the three ethnic groups, Educational level and Social class

		F	P
Ethnic group	Malay	0.007	0.993
	Chinese		
	Indian		
Educational level	Graduate	0.004	0.996
	Secondary		
	Primary		
Social class	Upper social class	0.009	0.991
	Middle Social class		
	Lower Social class		

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Table 5: Comparison for the two age groups on the Information on Cure, using t-test

		t	P
2 age groups	Younger(>45)	-0.095	0.925
	Older (>45)		

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DISCUSSION

The results of the present study suggest that the information on cure is the topmost priority information for women newly diagnosed with breast cancer, irrespective of age, level of education, social class and ethnic group. Information on cure was ranked the highest and most important information compared to other information needs. This finding is similar to the findings of Luker (1995), Degner (1997), Graydon (1997), and Galloway (1997), whereby cure was also an important and priority information need among women with newly diagnosed breast cancer.

All women wanted information on cure to deal with their illness (Chalmers Thompson, 1996). This explains why women with breast cancer seek cure with various kind of alternative medicine including "witchcraft" (Omar, 2000) and end up in late presentation (Usha Devi, 2001).

Women fear breast cancer and mastectomy, and many lacked knowledge on whether there is a cure for breast cancer. Adequate information on cure upon diagnosis of breast cancer is therefore very important, as it will encourage women to seek cure with western medicine instead of traditional or alternative medicine.

Information on cure is important, as it will guide them in their decision making and thus improve greater outcome through greater adherence to treatment and thus increase their survival rate (Usha Devi, 2001). Information on cure is important as women need this information to maintain hope or to reassure themselves that their own perception and knowledge are valid. As Graydon (1997) points out that the importance placed on certain diseases may be a reflection of a high degree of perceived threat, actual gap in knowledge or lack of comprehension of the information provided. In conclusion, information about the likelihood of cure was the most important and topmost priority for women newly diagnosed with breast cancer irrespective of ethnic group, age, level of education and social class. The findings of this study will be useful to health care professionals when providing information to women newly diagnosed with breast cancer.

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