

QUALITY OF LIFE OF PATIENTS WITH LUNG CANCER AND PRESERVED COGNITIVE FUNCTIONS

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The evaluation of the quality of life is a basic parameter in the assessment of the efficacy of therapeutic management in the care of oncological patients. The purpose of the study was the analysis of the quality of life regarding patients with lung cancer with preserved cognitive functions, treated in the pulmonology unit. There were three stages of the investigations. Stage 1 comprised the assessment of the cognitive function according to the CAS scale. Stage 2 included an interview with the use of the researcher's own questionnaire and the assessment of the quality of life in different planes of functioning according to the Rotterdam List of Symptoms. Stage 3 concerned the dominating symptoms and comprised the determination of the severity of dyspnea according to the MRC scale, pain and pain stress according to the PSS and the PDS scales, pain evaluation according to modified Pain Evaluation Form worked out by Szatanik and the estimation of fatigue with neoplastic disease according to the FSA-7 scale. The study group included 36 patients (18 women and 18 men), aged 50 - 70 years with the diagnosis of lung cancer but with preserved cognitive functions. The patients were all receiving health or retirement pensions, and all were from an average occupational group. Almost all had lived in a town. The majority of patients were exposed to chemo- or combined therapy. When the quality of life evaluation was conducted the following problems of physical functioning were present: dyspnea (100%), lack of energy and weakness (93%), pain and pain stress (75%), sleep disorder (72%), constipation (63%), loss of appetite (51%), nausea (51%). Major mental problems included: worrying (72%), anxiety (63%) feeling of lack of hope (30%). The quality of life according to patients' evaluations was average. Physical activity was observed in 69% of the patients, limited social activity in 84% and fatigue with neoplastic disease occurring in 78%. A higher level of quality of life can be achieved in patients with lung cancer and preserved cognitive functions by decreasing physical ailments, as well as the improvement of mental and environmental functioning.