

[DOI: 10.20472/IAC.2015.015.032](https://doi.org/10.20472/IAC.2015.015.032)

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## **COMPARISON OF QUALITY OF LIFE IN LUNG CANCER PATIENTS IN THE KNOW AND WHO DOES NOT KNOW**

### **Abstract:**

**OBJECTIVES:** There is no doubt the diagnosis of a life threatening disease such as cancer is devastating and has an enormous effect on one's quality of life. It is argued that cancer is not just a single event with a certain end but a permanent condition characterized by ongoing ambiguity, potentially delayed or late effects of the disease or treatment, and concurrent psychological issues. Thus historically there was a belief that a patient should not be told about his or her cancer diagnosis. At present this has changed. In recent years there has been considerable attention on how to break 'bad news' from a patient's perspective. Given that lung cancer is one of the common cancers world-wide, the implications of focusing on quality of life as well as survival require to be understood.

**METHODS:** The European Organization of Life Questionnaire (EORTC QLQ-C30), a core cancer specific questionnaire containing 30 item patients' functioning, global quality of life, disease and The EORTC Lung Cancer Questionnaire (EORTC QLQ-LC13), a site specific questionnaire consisting of 13 items on lung cancer symptoms and its treatment related side-effects. Comparison was made in quality of life scores between who knew their cancer diagnosis and those who did not.

**CONCLUSIONS:** In all, 70 lung cancer patients were interviewed. Of these, 28 patients (40%) knew and 42 (60%) did not know their cancer diagnosis. The intention here is to show that knowing or not knowing one's cancer diagnosis does not make any significant difference to the patients' responses to a quality of life questionnaire. With regards to patients' symptom scores, again there were no significant differences between the two groups, indicating that the knowledge of their cancer diagnosis did not lead to an overestimation of symptoms by patients who knew they had developed lung cancer.

**RESULTS:** We, there argue that assessment of quality of life in lung cancer patients should be integrated into clinical practice and evaluated prospectively.

### **Keywords:**

diagnos, lung cancer, quality of life, truth telling

**JEL Classification:** I10