The Correlation between Treatment of Depression and Quality of Life in Breast Cancer Survivors

Amir Motamedi: Quality of Life in Cancer Research Group, Breast cancer Research Center, ACECR, Tehran, Iran
Shahpar Haghighat: Quality of Life in Cancer Research Group, Breast cancer Research Center, ACECR, Tehran, Iran
Navid Khalili: Quality of Life in Cancer Research Group, Breast cancer Research Center, ACECR, Tehran, Iran
Akram Alsadat Sadjadian: Quality of Life in Cancer Research Group, Breast cancer Research Center, ACECR, Tehran, Iran
Sepideh Omidvari: Mental Health Research group, Iranian Institute for Health Sciences Research, ACECR, Tehran, Iran
Fatemeh Mollahoseini: Quality of Life in Cancer Research Group, Breast cancer Research Center, ACECR, Tehran, Iran
Zahra Sheikhi Mobarakeh: Quality of Life in Cancer Research Group, Breast cancer Research Center, ACECR, Tehran, Iran

Corresponding Author: Amir Motamedi, motamedi1487@yahoo.com

Abstract

Introduction: Breast cancer is reported to be the most common cancer in Iranian women. Cancer may be complicated with depression and anxiety. Also, the quality of life of breast cancer patients is lower in comparison with the general population. The aim of this study is to assess the quality of life of and relative severity of depression in breast cancer survivors and the correlation between treatment of depression and quality of life.

Method: Our study was a cross-sectional study, and we used clustered sampling. The sample population consisted of 50 women diagnosed and treated for Breast cancer who had admitted the Breast Cancer Clinic of Jahad-Daneshgahi. Depression was assessed with the Beck Depression Inventory-Short Version (BDI-SV) and quality of life was assessed with the Short-Form (36) Health Survey (SF-36). The data were analyzed using parametric paired and independent sample T-test.

Results: Among our sample population, 31 patients (62%) admitted our psychiatrist and was treated for depression. The mean BDI-SV scores of our sample population at the beginning and end of our study were 18, and 6.5 respectively, showing a significant change according to Paired Sample T-test (p<0.000). The mean SF-36 score of our sample population at the beginning and the end of our study were 51.68, and 68.25 respectively. Also showing a significant change (p<0.000). Independent Sample T-test showed that the SF-36 score of the two groups which did and did not consult a psychiatrist to be not significantly different (p=0.999).

Conclusion: The results of this study show significant reduction in the severity of depression and significant increase in the quality of life of our sample population, three months after the completion of therapeutic interventions for cancer. The non-significant difference between the final SF-36 score in the two groups which did and did not consult a psychiatrist, represents the importance of other factors increasing the quality of life that should be considered in the treatment of patients.

Keywords: Breast Cancer, Depression, Quality of Life.