ABSTRACT

QUALITY OF LIFE AND FUNCTIONAL STATUS OF BREAST CANCER SURVIVORS.

Dr.Deepika.B, Dr.J.Surendran, Dr.Ananthi.B, Prof.Dr.G.Selvaluxmy, Division of Radiation Oncology, Cancer Institute (WIA), Chennai.

Aim: To assess the quality of life and functional status of breast cancer survivors.

Objectives:

1) To assess the quality of life and functional status of disease free breast cancer survivors.

2) To find out the difference between, different treatment groups of disease free breast cancer survivors.

3) To determine age specific relationship with quality of life.

4) To find out the relationship between functional status and quality of life and year of survival

Materials and methods:

150 survivors of cancer breast who have completed the primary treatment and who have survived 3 years after treatment who report to OPD as follow up were taken from cancer institute between May 2017 to August 2017 were evaluated about their quality of life at present using EORTC C 30 and BR 23 questionnaire followed by systemic and local examination.
**Results:** In our analysis we found that the average age group of breast cancer survivors was around 53.58 years and average survival was around 6.59 years. In our analysis we found that the distribution of age was 20-40 years -10 survivors, 40-60 years -113 survivors, Above 60 years -27 survivors. We have also analysed that Age has a significance affecting the QOL among survivors associated with following factors like Fatigue, Body image, Sexual functions and Sexual enjoyment with significant P-value of 0.020 for fatigue, 0.055 for Body image, 0.035 for sexual functions and 0.029 for sexual enjoyment. Occupation has significance in QOL affecting the social functions in unemployed survivors with a significant P value of 0.052. Education has significance with QOL associated with financial issues with significant P-value of 0.055. Marital status has a significance with QOL associated with social functions and financial issues with significant P-Value of 0.041 and 0.022. Stage has a significance affecting the QOL associated with Hair loss with significant P value of 0.046. Duration has no significance with that of QOL. Treatment has a significance affecting the QOL associated with sleep disturbances with significant P-Value of 0.014. We have also analysed that overall quality of life is better in 89 % of survivors with only 11% who had poor quality of life.

**Conclusion:** In our study we found the most common long term sequelae of breast cancer survivors that affect the QOL. In our analysis we found that quality of life decreases with increase in age of the survivors. Duration had no association with QOL. Occupied women had better QOL than housewives. Educated women
had better QOL compared to the illiterate. Unmarried women had better social functions and better QOL. Survivors who received surgery and chemotherapy had more sleep disturbances affecting the quality of life than survivors who received surgery, chemotherapy and radiation. Stage I had more hair loss issues when compared to stage II and III. Fatigue, sexual functions, sexual enjoyment and Body image issues affected the QOL of the survivors whereas QOL was not affected by physical functions. Though the following factors had some impact with the demographic profiles, the overall quality of life was better among breast cancer survivors.

**Key words:** Breast, Survivors, Quality of Life.