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# OPTIMISM OF CERVICAL CANCER PATIENTS UNDERGOING CHEMOTHERAPY

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## ABSTRACT

Cervical cancer is the second most common among women in less developed regions, with an estimated 570,000 new cases in 2018. Cancer patients with an optimistic attitude toward life can adapt to their physical condition better than pessimistic cancer patients. This study aimed to explore the optimism of cervical cancer patients undergoing chemotherapy. This type of research used qualitative study design, and the qualitative type used in this research is narrative. The source population is cervical cancer patients undergoing chemotherapy in RSUP. H. Adam Malik. The sample used purposive sampling. The result found cervical cancer patients feel down, often think they are not accepting their illness, and are afraid to die. Seeing their friends recover from cervical cancer after undergoing long-term treatment fosters a sense of optimism in sufferers. All patients experience tremendous fear of the smooth process of chemotherapy and need family nuclear to encourage optimism to undergo chemotherapy. Recommendation for future researchers is to develop programs for optimizing cancer patients' optimism, empowering families of people with cancer, and forming a cancer survivor community and effective communication for people living with cancer, especially cervical cancer.

## KeyWords

**Optimism, Cervical Cancer patients, Chemotherapy.**

## Introduction

Cervical cancer is the second most common cancer at women living in less developed regions, with an estimated 570,000 new cases in 2018 (84% of the new cases worldwide) (WHO, 2019). In developed countries, programs are in place, which enables females to be vaccinated against HPV and women to get screened regularly. Screening allows pre-cancerous lesions to be identified at stages when they can quickly treat. Early treatment prevents up to 80% of cervical cancers in these countries (WHO, 2019).

In 2018, approximately 311,000 women died from cervical cancer; more than 85% of these deaths occurring in low-and middle-income countries (WHO, 2019). (WHO, 2013) Corroborates that cervical cancer is the second most common cancer in women affecting more than 1.4 million women worldwide with an increase estimates of new cases from 493,000 in 2002 to 528,000 in 2012 and 274,000 deaths in 2002 and 266,000 deaths in 2012. In sub-Saharan Africa, 34.8 new cases of cervical cancer were diagnosed per 100,000 women annually, and 22.5 per 100,000 women die from the disease (Ferlay *et al.*, 2013). Anorlu (2008) in (Utami, Permanasari and Istanti, 2019)Cervical cancer is gradually becoming a rare disease in many developed countries; this is not the case with many countries in sub-Saharan Africa. Cervical cancer is the most common cancer in women in sub-Saharan Africa and second to breast cancer in northern Africa.

The Indonesian Ministry of Health's Data and Information Center nationally, the prevalence of cancer in all ages in Indonesia in 2013 was 1.4% or an estimated 347,792 people (KemenKes, 2015). Cervical cancer is cancer with the highest prevalence of sufferers in Indonesia in 2013, which was 0.8% or an estimated 98,692 patients. Riau Islands Province, North Maluku Province, D.I Province Yogyakarta had the highest prevalence of cervical cancer in Indonesia at 1.5%, North Sumatra Province in 2013 ranked ninth with a prevalence of 0.7% or an estimated 4,694 patients (RI, 2013).

Wijaya (2010) in (Sitio, Suza and Nasution, 2016) cervical cancer will cause its problems for women who experience it because this cancer is associated with changes in the female reproductive organs, which are considered a significant part of women. Cancer patients who have an optimistic attitude towards life can adapt to their physical condition better than cancer patients who are pessimistic (Thieme *et al.*, 2017).

Previous research says that optimism has a role in improving health, preventing illness, and adapting to stress. Cancer patients who are on therapy for a long time have a low level of optimism for recovery (Saniatuzzulfa and Retnowati, 2017). The research of Nufus (2017) the results of this study indicate that optimism affects the well-being of cancer patients, optimism is one of the predictors of well-being. Based on these descriptions, the purpose of this study was to explore how the optimism of cervical cancer patients undergoing chemotherapy.

## Literature Review

An optimistic attitude is called optimism. Optimism is the belief that future events will have positive results (Carver and Scheier, 2002). Shapiro and Chock (2003) explains that confidence is a habit of positive thinking. Goleman (2002), states that optimism is a strong hope that everything in life will be able to be appropriately overcome, even if overwritten by problems and frustration. Optimism is an attitude that sustains the individual so as not to fall into ignorance, hopelessness, or depression when the individual faces difficulties.

Seligman (2008), defines optimism as a belief that unfortunate events are only temporary, do not fully affect all activities, and are not entirely due to self-carelessness but can be due to situations, fate, or other people. When experiencing a social event, an optimistic individual will believe that it will last a long time, affect all activities, and be caused by oneself. According to Carver and Scheier (2014), optimism contributes positively to individual welfare. Someone who is optimistic tends to have positive feelings when faced with problems compared someone who is pessimistic. A pessimist has negative emotions in the form of anxiety, anger, sadness, and even despair.

Chang (2001) defines optimism as an individual's expectation of good things to happen; in other words, an optimistic individual is an individual who expects good events to occur in his future life. Optimism expects good things to happen, and problems that arise will be resolved with excellent final results. Optimistic individuals also have broader areas of life satisfaction (Srivasta, McGonigal, Richards, Butler & Gross 2006 ; Puri Rachman & Indriana, 2013) Another definition of optimism means being able to focus attention from resources on things that are important and escape from problems and grief and accept trauma. Optimism is one of the personal qualities that trigger someone to keep trying to achieve goals and achieve better results (Carver *et al.*, 2005).

Previous research has mentioned that optimism plays a role in improving health, preventing illness, and adapting to stress. Cancer patients who have been on therapy for a long time have a low level of optimism for recovery (Schofield *et al.*, 2004). Optimism is

one of the predictors of well-being; this is confirmed by Carver et.al (2005) research by involving 163 samples, namely breast cancer patients.

## Method

This type of research is qualitative study design, and the qualitative type used in this research is narrative. The source population is cervical cancer patients undergoing chemotherapy in RSUP. H. Adam Malik Medan. The sample uses purposive sampling. The inclusion criteria sample of cervical cancer patients :

1. Who are willing and possibly interviewed
2. Do not experience cognitive damage
3. All stage cervical cancer patients undergoing chemotherapy treatment,
4. Can hear and speak Indonesian.

Exclusion criteria are subjects who do not meet the inclusion criteria. This qualitative method uses an In-depth Interview. In this study, the authors used semi-structured interviews. Semi-structured interviews are more appropriate for qualitative research than for other reviews. The characteristics of semi-structured interviews are open-ended questions. Still, there are limitations to the theme and flow of the conversation; the speed of the meeting can predict, flexible but controlled, there are interview guidelines that use as a benchmark in the stream, sequence, and use of words, and the purpose of the interview is to understand a phenomenon (Herdiansyah, 2010).

The analysis of qualitative data that is done interactively and continues until it is complete so that the information is saturated. Data analysis activities include data reduction, data presentation, and verification or often known as conclusion drawing and verification (Miles & Huberman, 1994).

## Results

The results based on the research conducted are obtain:

**Table 1. Characteristics Of Informant**

| Informant's Initials | Stadium | Age          | Work                     |
|----------------------|---------|--------------|--------------------------|
| SL                   | III B   | 55 years old | Houswife                 |
| RM                   | III B   | 39 years old | Grocery store seller     |
| MN                   | II B    | 47 years old | Laundry Worker           |
| RM                   | IIIB    | 60 years old | Civil Servant Retirement |

The results of the data analysis obtained four themes main are:

### 1. Condition When Dropping

The feelings of informants are variety feel. When people with cervical cancer condition drops are not accepted their disease and fear death, doubt their recovery and give up, and don't want to eat.

*"If I often daydream, it's not thinking about anything because I don't want to eat it; I don't think about anything else" (Informant 1).*

*"Like where am I, why did God give this disease to me, that's all I think about my child, so I have to be enthusiastic, I have to get well. We have to ask many questions from those who have undergone treatment first. But we must be grateful because some are worse than us. Some husbands and wives are sick, their husbands are ill with colon cancer, and their wives are ill with cervical cancer" (Informant 2).*

*“Usually, when I think about death, how come you can die fast when I am sick. How can I remember God again? Already sick rather than feeling pain all the time” (Informant 3).*

*“Yes, that's what I was thinking. Can I recover or not” (Informant 4).*

## 2. Recover From Cervical Cancer

The informant also expressed his opinion about his recovery from cervical cancer suffered.

*“Yes, I am optimistic that I will recover because I have no more complaints, all my complaints have disappeared, and our thoughts are number one for us to be healthy. Many are also receiving treatment; my friends have recovered, too, so I have to be optimistic” (Informant 2).*

*“It is optimistic that it can cure all recovering from cervical cancer. There is a way, God says, but if our minds are confused, how can we heal. Sometimes I'm sitting there. I'm just sitting there. I hear it's getting complicated. My mind gets more complicated when I listen to their complaints (cancer patients). Some later say what disease are you, so add to your thoughts, but some friends give encouragement like those sick with breast cancer, young people from Aceh, I'm excited, madam, excited, he said” (Informant 4).*

They feel optimistic about recovering from cervical cancer when they see their fellow cancer survivors undergoing chemotherapy treatment have recovered from their illness and feel excited when fellow cancer fighters encourage each other.

*“Yes, in my mind, it is essential to go to the hospital; if recovery is from the almighty, if people are after surgery, they are afraid to grow again, sometimes that feeling is there, but surrender to the almighty. If I do what the doctor says, I give up; the important thing is to try because the rays (radiotherapy) have to be 25 times. My radiation (radiotherapy) 12 times, chemo twice tomorrow, to 3 times. I can't feel this radiotherapy, but I have diarrhea, and if I use chemo, my appetite will decrease. The doctor said that my vagina has cancer, but yes, Alhamdulillah, it heals on its own; what I feel is the area I use when using sanitary napkins. It's not good when we touch it (vagina), but it gets better after treatment at the hospital” (Informant 1).*

*“Yes, I'm optimistic, the legs and waist are getting better, but I don't know” (Informant 3).*

They sometimes fear that his illness cervical cancer will worsen but can only surrender and do what the doctor recommends, and there has been a change for the better.

## 3. Fluency In Chemotherapy Treatment

This theme is related to the fluency of chemotherapy treatment :

*“People say don't chemo, but I've asked the same person who's already had chemo. Chemo is like an infusion. They said it was the same as the previous one. But the first time, I feared chemo, while the vaccine was worried about seeing the device. How will I be made later, will this be inserted into my body, will it work or not, but after two times it's like this, it's normal” (Informant 2).*

Informants 2 expressed his feelings before and after chemotherapy. In the beginning, before chemotherapy, I felt afraid, but after undergoing the second chemotherapy, I didn't feel scared anymore.

*“It was the first time chemo and radiotherapy were afraid because people said here, you'll only have radiotherapy once, you're already K.O, and you'll die soon. I won't be brave but keep looking at the others who have breast cancer, and the others I see bald heads, but how come they're fat, I asked you for chemo and radiotherapy too. Yes, he said, it hurts. Then he answered no, ma'am, just given an intravenous drip, at most vomiting and diarrhea, then it became enthusiasm. The last time, I thought, what will I do when I have chemo and ask the nurse, why is there something terrible when the effects of the chemo are ready, sir? That's ma'am. The pain is already severe. You are still in stage 2, ma'am. Life expectancy is still significant” (Informant 3).*

Informant 3, for the first time undergoing therapy, was afraid because she did not get support from the environment but was motivated by patients who had undergone chemotherapy because they looked healthier and strengthened by support from nurses.

*"I am excited about undergoing chemotherapy because all the children are supportive and other families who don't support medical treatment later someone come to me with herbal medicines. Then I say I don't want to drink this, so I never have evil thoughts about chemotherapy but the first time, there must be fear and hope all goes well" (Informant 4).*

She said that all of his family supported him to undergo chemotherapy, but the first time chemotherapy was still afraid and hoped that everything would go smoothly.

*"When I saw the doctor, no one said anything, the radiotherapy 25 times didn't say it was chemo, but in the records at the Polyclinic, there was a note that chemo had to do; go for it. But fortunately, some can't undergo chemo because their kidneys are swelling; from there, so drink a lot so that the kidneys are fine" (Informant 1).*

She did not expect to undergo chemotherapy but was grateful to be able to undergo chemotherapy treatment because many of his friends could not do chemo.

#### **4. Family Support Encourage Optimism Undergo Chemoterapy**

Informants reveal the need for family support in motivating themselves to undergo chemotherapy.

*"Children often call and ask for this herbal medicine; the medicine from Kalimantan says it's good, but never mind the treatment, don't mix herbs, and I believe this is medical" (Informant 1).*

*"90% of the time, there must be support from the family. If I am sick, my husband is reasonable, and I will live long. If I am women who make us sick, even my husband, if my husband gives us sadness, I will be sad if we are sick, my husbands leave us, do we not go crazy? I need to be healthy. My pain is left behind. My husbands are loyal to taking care of me. To support me, I must be able to recover. If he cooks, I eat so that my bodies are healthy. I have to be equally encouraging when I cook it. I don't know what to eat. Right now, I can still eat, even though I can still eat it during treatment, but later after treatment, I can no longer eat it because chemo is hard. If I don't have energy, how can I want chemo? And there must be a friend in the main story, so I don't think badly about my disease." (Informant 2).*

*"Yes, I need family support because I don't know anything like me if I deal with our thoughts on my own. I don't have friends to talk to like my sister, whose house in front of me is selling, my children work, and my husband also works, so I don't have any friends to talk to, so I keep thinking about the illness, so I sleep. Even if I am sick, I have a friend who tells me I can still hold it in. It's already ill. No friends, so I keep shedding tears" (Informant 3).*

*"The family should be able to motivate, especially the nuclear family like children, because my husband is no longer there, nor are my parents around" (Informant 4).*

All informants said they needed their families to increase their optimism in undergoing chemotherapy, especially for nuclear families. Family can be friends to tell stories and share complaints in dealing with the effects of chemotherapy.

#### **Discussions**

The informant's variety felt about his condition when she was down and faced with the disease and the side effects of his treatment: not accepting their disease and fearing death, doubting their recovery and emptiness, and don't want to eat. According to research (Saniatuzzulfa and Retnowati, 2017), a decrease in optimism in treatment is caused by the patient's physical condition drop. The theory of grieving proposed by Ross (1969) is that there are five stages of sadness when someone is suffering: denial (denial), anger (anger), bargaining (bargaining), depression (depression), and acceptance (Hobbs, 2013).

Individual response going through these stages differs depending on internal and external factors affecting their psychological response. Patient cancer patients who have responded psychologically, not infrequently, will undergo some or all of these psychological responses. In addition to experiencing a reaction in the grieving stage, cancer patients experience anxiety and self-isolate when diagnosed with cancer. (Lestari, Budiyarti and Ilmi, 2020).

Informants who feel not accepting their disease and fearing death and doubting their recovery is denial stage the patient is unable to think what she should have done to get out of the problem. The first reaction of the individual experiencing loss is shock, disbelief, or denying the fact that the failure happened. Therefore, the stage of Denial is very uncomfortable, and the situation is harrowing, and they can't even accept the condition suffered. Study Slameto et al. (2008), patient readiness in dealing with cancer is the whole state of a person who made it ready to give a response or answer inside the sure way of dealing with a situation (Kurniawan, Manurung and Rohayati, 2019).

Emptiness and don't want to eat is a sign of depression in cancer sufferers. Research result shows that 34.4% of cancer patients in Indonesia experience depression (Setiyarini and Effendy, 2018). Patients with cancer may experience depression, loss of hope, anxiety, and emptiness. It can be due to disease conditions or treatment that the patient must undergo. Depression can arise because of a sense of loss and fear. For example, the patient feels he will lose part of his body shape and is afraid of being shunned by his family, especially his husband (Konginan, 2013). Signs of depression in people with cancer include sadness, discouragement, guilt, disturbed concentration, suicidal ideation, worthlessness and helplessness, hopelessness, sleep disturbances, decreased sex drive and energy, and appetite (Febriyanti, 2019).

The research found that cervical cancer patients feel optimistic about recovering from cervical cancer when they see their fellow cancer survivors undergoing chemotherapy treatment have recovered from their illness and feel excited when fellow cancer fighters encourage each other. Sitompul (2020) research states the need for a community to share and care for fellow cancer survivors. So it can use as a positive forum that makes cancer patients exchange ideas with other survivors who are still in the recovery process, find out information, and exchange ideas within the community.

For cancer patients, social support can be an encouragement to fight cancer (fighting spirit) and help sufferers to survive (Allifni, 2011). Patients who receive high social support have a better prognosis and adjustment (Situmorang, 2019). Several studies have shown three sources of social support indicating that there are three potential sources of social support for cancer patients: doctors or paramedics, partners or family, and other patients with the same condition (Dessy, 2017).

In the smooth running of chemotherapy treatment, all patients experienced great fear before chemotherapy. Still, after several times undergoing chemo, they felt they were used to it and were not afraid anymore. Informants hope that the treatment process will run smoothly. Although chemo affects their bodies, several informants are still grateful to follow chemotherapy treatment where not all cancer patients are in a condition that allows undergoing chemo. Chemo is one way to kill cancer cells in the body to overcome the influence of less fun from cancer, and the patient expects to have positive attitudes and thoughts for healing. Someone who always has a positive perspective and hope for the future can be said to be an optimist (Saniatuzzulfa and Retnowati, 2017).

According to informants, family support increases their optimism in undergoing chemotherapy, especially for nuclear families, especially husbands related to their role as a wife. Family can be friends to tell stories and share complaints about chemotherapy's effects. The husband's support is the husband's support wife, a form of support where the husband can provide psychological assistance well in the form of motivation, attention, and acceptance. The husband's support is a helpful relationship with extraordinary value for the wife as a sign of positive bonds. The husband's support will help the wife in getting self-confidence and self-esteem as a wife (Mulyaningrum, Lufianti and Yuwanti, 2020). Having family support will have an impact on increasing self-confidence in patients in the process treatment of the disease (Susilawati, 2013). As is family support makes it easier for sufferers to carry out activities related to with problems that she also feels loved and can share the burden, express feelings can openly help infacing current problems occur (Jainurakhma et al., 2021).

## Conclusion

Based on the study results, cervical cancer patients feel down, and They often think they are not accepting their illness and are afraid to die. Seeing their friends recover from cervical cancer after undergoing long-term treatment fosters a sense of optimism in sufferers. All patients experience tremendous fear of the smooth process of chemotherapy and need family nuclear to encourage optimism to undergo chemotherapy. My recommendation for future researchers is to develop programs for optimizing cancer patients' optimism, empowering families of people with cancer, and forming a cancer survivor community and effective communication for people living with cancer, especially cervical cancer.

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