

Relation between Cognitive Responses and Quality of Life in adult cancer patients

Lucía del Carmen González-Alcocer, Mariana Alejandra Sierra-Murguía. Cancer Center Tec 100, Queretaro, Mexico.

Introduction

A diagnosis such as cancer is considered a stressor, and this means that cancer patients will have a cognitive response that allows them to cope with the diagnosis. These responses can be adaptive (such as cognitive engagement and avoidance) or maladaptive (such as cognitive avoidance and rumination). Cognitive Responses are related to cancer because they can determine the way the patient thinks about the disease in order to develop a coping style. There are many different emotional responses to cancer (depression, anxiety, post-traumatic growth, etc.) and these are mediated by the cognitive responses (thought style).

AIM

The objective of this study was to characterize thought styles (rumination, cognitive engagement & avoidance) in adult cancer patients and to determine if there was a correlation between thought styles and the *quality of life* in cancer patients.

Method

Present research is a **CROSS-SECTIONAL STUDY**. Adult oncological patients (N=88) from Cancer Center Tec 100 (Queretaro, México)

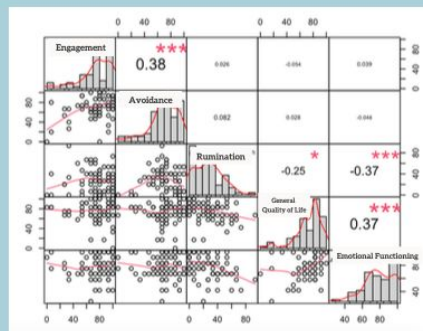
Instruments

- Thought Style Inventory IEPRAC (Sierra, M.A., et al, 2021)
- Quality Of Life Questionnaire EORTC QLQ-C30 (Cerezo, O., et al 2012)

Statistical Analysis

Descriptive statistics for general characterization, Pearson's correlation coefficient between the two variables (thought style and quality of life) and a linear regression analysis for significant correlations.

Results



General quality of life correlated negative and significantly to rumination as a thought style ($r=-.248$).

Emotional functioning (quality of life variable) correlated negative and significantly to rumination as a thought style ($r=-.366$)



A linear regression analysis found that rumination thought style is a predictor of a decrease in the general quality of life (R squared of .06, F of 4.9 and $p=.02$).

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.248 ^a	.061	.049	20.61431

a. Predictors: General Quality of Life

ANOVA ^a						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	2113,506	1	2113,506	4,974	.029 ^b
	Residual	32296,180	76	424,950		
Total		34409,687	77			

a. Dependent variable: Rumination
b. Predictors: General Quality of Life

Conclusion

Rumination as a thought style was found as a predictor of a decrease in general quality of life and emotional functioning. These results are worth future research to increase quality of life in oncological patients by designing interventions to modify rumination as a thought style once identified. Prospective studies are suggested to look at the development of psychopathology and adjustment to cancer depending on the thought style.

References

- Sierra-Murguía, M. A., González-Alcocer, L., Navarro-Contreras, G., Guevara-Sanginés, M. L., & Padrós-Bláquez, F. (2021). Diseño y análisis de propiedades psicométricas del Inventario de Estilos de Pensamiento en Respuesta al Cáncer (IEPRAC). *Psicooncología*, 18(1), 77.
- Cerezo, O., Oñate-Ocaña, L. F., Arrieta-Joffe, P., González-Lara, F., García-Pasquel, M. J., Bargalló-Rocha, E., & Vilari-Compte, D. (2012). Validation of the Mexican-Spanish version of the EORTC QLQ-C30 and BR23 questionnaires to assess health-related quality of life in Mexican women with breast cancer. *European journal of cancer care*, 21(5), 684-691.

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Cancer Center Tec 100
By ABC International

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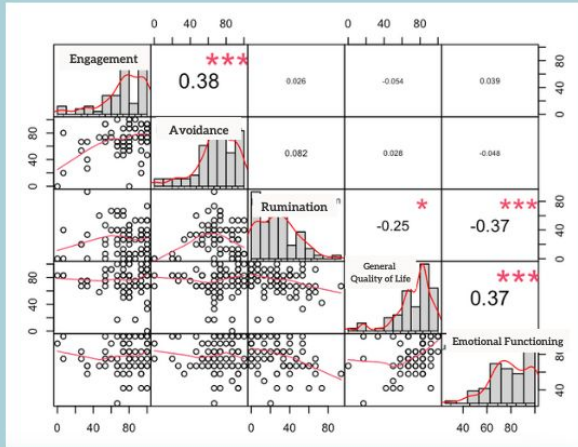
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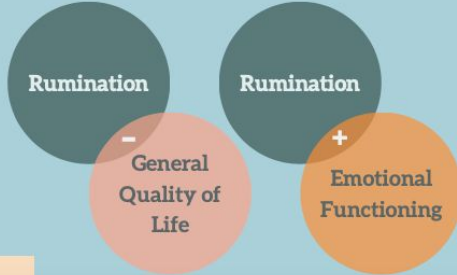
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