

CASE STUDY: A QUALITATIVE STUDY AIMED AT COMPARING STANDARD THERAPY IN A BREAST CANCER PATIENT TO THE SPIRITUAL HEALING AND PSYCHOLOGICAL SUPPORT, IN IMPROVING PATIENT'S COMPLIANCE

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Submitted 13th April 2020, Accepted 17th November 2020

ABSTRACT

Background: Breast tumor is the most well-known type of cancerous growth in ladies of Pakistan. The effect of the underlying diagnosis, treatment conventions, chemotherapeutic agents in contrast with culture, social and psychological parts of the ailment is not settled. **Method:** This subjective review analyzed and contrasted the standard treatment conventions and the Spiritual Healing including psychological support utilized by patient with breast cancer in connection to its effect on the enhanced quality of her life and her enhanced wellbeing status. Mrs Fouzia Mohsin a patient with bosom malignancy persistent, mother of 6 youngsters having an age of 53 years and 5 months from Faisalabad experiencing chemotherapy from Shifa International Hospital Islamabad and also Spiritual Healing and mental support was met. Information were dissected utilizing topical examination. The patient's understanding of bosom disease concentrated on the conviction of suitability of medication treatment picked by her physician and in addition the positive mental impact of Spiritual recuperating alongside the scope of feelings felt all through her ailment. **Results:** The significance of spiritual healing and mental support of the family along with breast cancer tackling techniques i.e chemotherapy, radiotherapy and mastectomy is far excessively helpful and steady in method for upgrading consistence to treatment and accordingly enhanced personal satisfaction. This is the principal study to look into the case of lady experiencing breast cancer on the experiencing chemotherapy and Spiritual Healing. This article gives illumination of the voiced encounters of a woman with breast tumor. The information not just highlights the part of standard chemotherapy and radiotherapy as fundamental adapting methodologies additionally underlines the adapting of issues like disengagement, hostility, and outrage as regular reactions to chemotherapy through Spiritual Healing and Psychological support of the family. **Conclusion:** One of a kind elements are bosom malignancy patient's have to look for Spiritual Healing and Support of family for her sickness to remain spurred and increment in her consistence. These social elements require advance examination and research.

Keywords: Breast Cancer, Spiritual Healing, Psychological Support, Compliance.

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INTRODUCTION

Breast cancer is a worldwide concern. It is a sickness that is not limited by culture, religious conviction, social class, or financial status. Worldwide appraisals propose that, on a yearly premise, there are more than 1,050,000 detailed new instances of bosom cancer [1]. Among Asian nations, Pakistan has the most elevated rate of bosom malignancy. Confirm from the Karachi tumor registry demonstrates that the age-institutionalized yearly rate of breast cancer is 69 for every 100,000. This figure is comparable to European and North American rates [2]. In Lahore, Pakistan, over a time of 8 years, there were 3,338 instances of

breast cancer displayed at Shaukat Khanum Memorial Hospital [3]. Current figures demonstrate that in Pakistan, bosom malignancy influences both youthful and moderately aged ladies and can influence ladies as youthful as 20 years. The etiology of breast disease is mind boggling and can include various demonstrative components, for example, hereditary qualities, eating regimen, chemicals, and natural elements. In Pakistan, it is evaluated that germ line transformations in the BRCA1 and BRCA2 qualities represent 5% of bosom growth cases [4]. Recently, it was demonstrated that in Pakistani

families with numerous instances of bosom tumor, the predominance of BRCA1 or BRCA2 changes was 42.8% and 11.9% for single instances of bosom cancer [4]. Thus, Pakistani ladies who convey both of these harmful changes confront a lifetime danger of growing early onset bosom disease. There is no cure for bosom tumor; even after surgical, chemotherapy, and radiation treatment, there is the steady dread of repeat and uncertainty [5, 6]. There is no all inclusive experience of living with bosom malignancy, just people who have the experience can identify with it [7]. Every lady's translation of living with the disease will be subjective and affected by her social and social life setting, feeling of prosperity, and religious beliefs [8, 9]. These components may support the sorts of torment she endures [10, 11]. Women with bosom growth encounter enduring identified with life measurements: physical agony, otherworldly, enthusiastic, mental, and social types of suffering [6]. This experience can affect how they adapt to their sickness. Adapting techniques can be affected by how ladies see their illness [11, 14]. Illness portrayals might be displayed by indication recognition/social convictions, view of the chronicity of the disease, the physical and passionate impacts of the sickness, circumstances and end results observations, and potential for cure. Misjudged convictions about causation may antagonistically change adapting procedures and can affect the result of the illness and personal satisfaction of the individual experiencing the disease [15]. In Pakistan, in spite of the fact that bosom tumor is the most well-known type of growth in ladies, the encounters of patients and the agony they continue are moderately obscure. This is the primary review to look at the lived understanding of a Pakistani bosom tumor. The point of the review is 2-overlay: (a) to analyze results of patient's encounters with respect to the standard treatment including chemotherapy and radiotherapy. (b) to inspect the results of patient's encounters with respect to the Spiritual Healing (Spirituality) and Psychological Support of the family.

METHODS

This subjective review utilized partially structured interviews and mental perceptions to investigate the perspectives of patient in connection to bosom cancer; the encounters of living with the infection from early determination ahead; the adapting procedures utilized; and the effect of Spiritual Healing (Spirituality) and Psychological Support of the family that have Influenced the patient's life. How accommodating they were in expanding her consistence towards the treatment and in addition

expanding her inspiration level which at last brought about change in the nature and quality of her life. The inquiries were produced from the accessible, important bosom health writings. Relative mental perception was made through expanded consistence towards treatment. It was imperative that the outline of the inquiries addresses particularly tended to the social affectability of the patient included. To accomplish this, the co-specialist was additionally a Pakistani required in the outline of the inquiries to guarantee that members knew about the manner utilized and could draw in with the inquiries utilized [16, 17]. The reasonableness of the inquiries was tried utilizing 3 pilot tests, and important changes to the calendar inquiries were made. All specialists in the review were knowledgeable about meeting methods. To guarantee the consistency of the meeting procedure and to improve the legitimacy and dependability of the information gathered, the essential agent was included in all interviews [18, 19].

RESULTS

The profound endeavors were helping the patient to leave enthusiastic stun. The patient was spurred of the conviction that the Allah should help her and might answer her supplications. The patient frequently utilized her pharmaceuticals and was agreeing to the guidelines of the doctor.

Coping Through Spiritual Healing

The issue of bosom disease is an enthusiastic one that prompts various reactions and responses from the patient. In this review, the patient communicated her motivation and profound seek after her improvement as she was perusing different verses from Holy Quran. The relative demonstrated their care by helping the patient take as much time as is needed. In addition the relatives called out in mosque to appeal to God for the patient's great wellbeing. The patient was experiencing Muslim enchantment treatments and extraordinary supplications. The charms of Quranic verses alongwith the customary supplications encouraged the patient to leave grievance and feel renewed in feeling of interior prosperity. Henceforth the consistence was enhanced towards treatment.

Coping Through Standard Therapy

The physicians of Shifa Prescribed her Lapatinib P.O, Xeloda (Cepecitabine) P.O, Vinkebir® (Vinorelbine Tartarate) I.V the antineoplastic agents were successful in treating the breast cancer of the patient. The Patient also underwent mastectomy before chemotherapy which was given to target any leftover metastatic cells.

Table 1: Patient’s hematological profile.

Test	Results	Reference Range
WBC Total	11300/ μ L	4000-11000/ μ L
RBC Total	4.3m/ μ L	F (3.8-5.8) m/ μ L
Hemoglobin	11.2g/dL	F (11.6-16.5) g/dL
HCT	33.4%	F (38-47) %
MCV	77.2fL	80-90 fl
MCH	25.8pg	27-32 pg
MCHC	33.5g/dL	33-38 g/dL
Platelet Count	318000/ μ L	150000-400000/ μ L
Neutrophils	60%	40-75 %
Lymphocytes	30%	20-45 %
Monocytes	5%	2-10 %
Eosinophils	5%	1-6 %
Basophils	0%	(0 – 1) %
RDW	16.9%	11.5-13.6
MPV	8.0fL	6.8-10.2

Table 2: Histopathology report of patient.

Spc Nature	Biopsy
Spc Site	Breast left
History	Lump left breast
Estrogen Receptors	Positive in 25% tumor cells show moderate staining
Progesterone Receptors	Negative
HER-2/ neu	Positive (3+)
Final Diagnosis	Left Breast Biopsy shows Invasive Ductal Carcinoma, grade-II

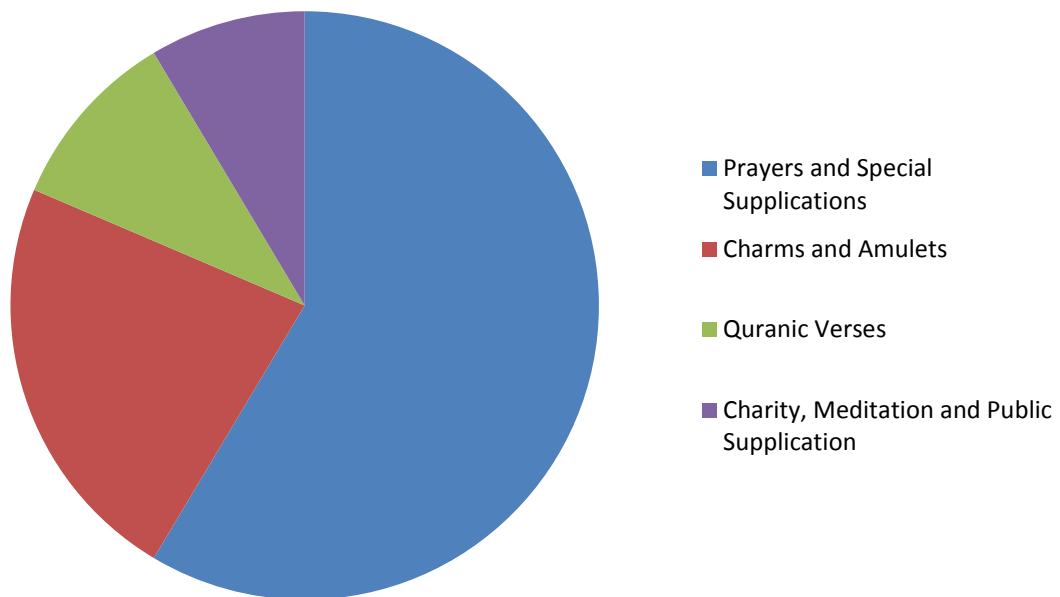


Figure 1: Different aspects of spirituality divisions and types of spiritual healing.

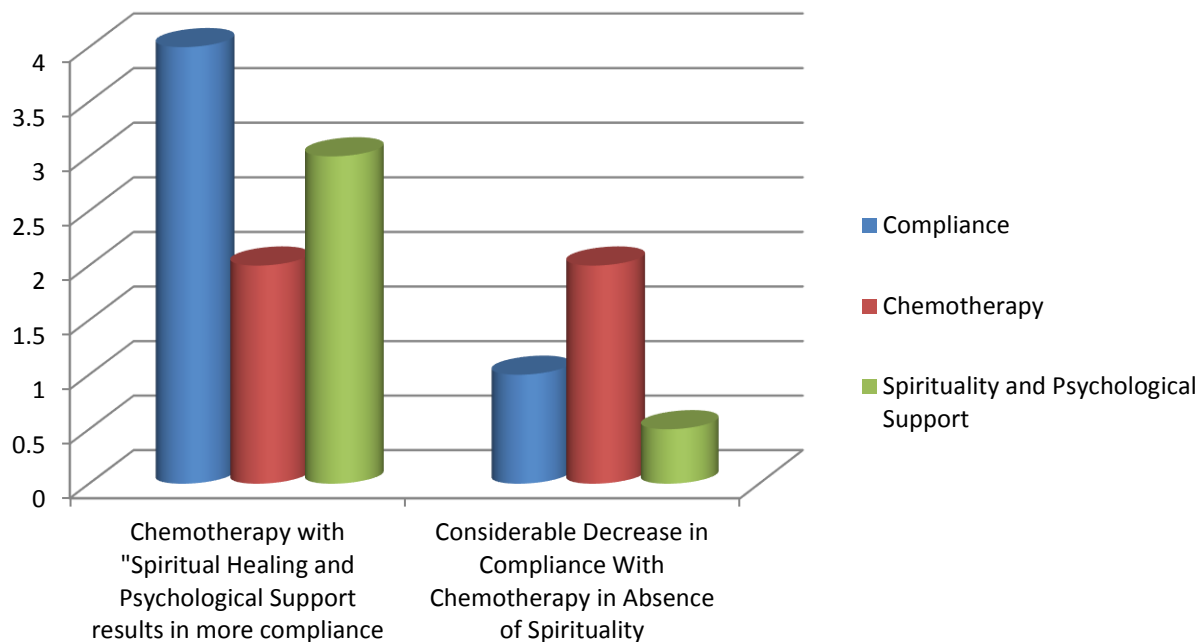


Figure 2: Comparison of compliance with chemotherapy in absence and presence of spirituality and psychological support.

DISCUSSION

In this review, the primary reaction of the patient was the stun in light of the determination of breast cancer as in all ladies [20, 21] which made turmoil, passionate mayhem, and the need to redesign their lives to keep up control [22]. The Patient then experienced mastectomy and was dreadful. After which the patient began accepting her chemotherapy. At first the patient was loaded with anger and discontent as mastectomy had recently totally changed her appearance and her body progressed towards becoming non feminist and also the male pattern baldness, emesis and serious agony made her non-compliant towards the treatment. After which the patient was drawn nearer by profound healer. He made "Koranic" appeal for the patient. He exhorted the patient to offer her petitions five times each day. The patient experienced these. She recited "Quran", experienced Muslim Spells and "Quranic Verses". She offered her supplications and examined her issue

with her family particularly spouse. Relatives called out in a mosque to appeal to God for her. At last it was seen that there was a profound change in patient's conduct. She began taking her pharmaceuticals routinely. She wound up noticeably self roused with an expectation in "Awesome Power". Her consistence level enhanced and she began to foresee the unfriendly effects of Chemotherapy as "minors". These variables added to the upgraded nature of her life [23].

CONCLUSION

The "Spiritual Healing" which can incorporate Offering petitions, Undergoing Muslim Charms and Amulets of an Old Hermit type of Muslim Spiritual Healer alongside psychological support of the family tends to expand inspiration of patient and result in expanded consistence towards chemotherapy. All of which eventually prompt change in personal satisfaction of the patient and increase compliance.

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