

## Overview of Quality of Life in Cancer Patients undergoing Chemotherapy at the Etam Cancer Shelter and Samarinda City Cancer Shelter House

Orin DwiYanti<sup>1</sup>, Khumaidi<sup>2</sup>, Syahrin<sup>3</sup>, Erwan Ahmad<sup>4</sup>

<sup>1,2,3,4</sup>Diploma of Nursing Program, Faculty of Medicine, Mulawarman University, Indonesia

Corresponding author: [orindwiYanti@gmail.com](mailto:orindwiYanti@gmail.com)

phone number: +6283140241450

### ABSTRACT

**Background:** A non-communicable disease whose incidence continues to increase every year is cancer. Cancer is the second leading cause of death worldwide. Chemotherapy is a medical treatment that cancer patients must undergo. Chemotherapy causes many effects for cancer patients. This condition can affect the quality of life of cancer patients who do chemotherapy. **The purpose:** of this study is to provide an overview of the quality of life in cancer patients undergoing chemotherapy. **Method:** The research design used was a quantitative descriptive method with a survey approach. Taking 30 respondents with consecutive sampling technique based on the inclusion criteria of cancer patients who are undergoing chemotherapy. The quality of life measurement instrument used the WHOQOL-BREF questionnaire with univariate data analysis. **Results:** The results showed as many as 16 respondents (53%) with poor quality of life and 14 respondents (47%) had good quality of life. **Conclusions:** Cancer patients undergoing chemotherapy at the Etam Cancer Shelter and Samarinda City Cancer Shelter have a poor quality of life.

**Keywords** : Quality of Life, Cancer, Chemotherapy

### 1. INTRODUCTION

Cancer is a non-communicable disease whose prevalence continues to increase from year to year and has become the second leading cause of death in the world after cardiovascular disease (Arifin et al., 2022; Mercer, 2018). According to global predictions, the number of new cancer cases will reach more than 30 million by 2040, with the greatest burden occurring in low-income countries (Murthy et al., 2024). Cancer is expected to affect one in five individuals during their lifetime, and one in nine men and one in twelve women are expected to die from cancer (WHO, 2022).

Based on WHO data in 2022, there are 20 million new cancer cases and nearly 10 million cancer deaths worldwide. The most commonly diagnosed type of cancer is lung

cancer, followed by breast, colorectal, prostate and stomach cancer (WHO, 2024). In Indonesia, cancer cases were recorded at 408,661 in 2022 with deaths reaching 242,988, making cancer one of the main burdens of public health (Global Cancer Observatory, 2022). In East Kalimantan, the prevalence of cancer in 2018 reached 1.7%, with breast and colorectal cancer as the most common types of cancer (Kemenkes RI, 2018). Data from RSUD Abdoel Wahab Sjahranie Samarinda also shows an increase in cancer cases from year to year, although it decreased in 2024.

Chemotherapy as one of the main modalities in cancer treatment is often accompanied by significant physiological and psychological side effects. Symptoms such as nausea, vomiting, hair loss, fatigue, and emotional disturbances such as anxiety can have an impact on the patient's quality of life (Altun & Sonkaya, 2018; El Kheir & Ibrahim, 2019). Quality of life is an important indicator in evaluating the success of therapy and the overall well-being of cancer patients. This aspect includes individuals' perceptions of their physical, psychological, social, and environmental conditions (Rodrigues et al., 2021).

Previous studies have shown that the quality of life of cancer patients is influenced by various factors, including individual characteristics, environmental conditions, and the stage and type of cancer suffered (Ramasubbu et al., 2020). In Samarinda City, the existence of a cancer halfway house is a form of social support for patients who are undergoing treatment. However, until now there have not been many studies that examine the overall quality of life of cancer patients in these shelters, especially those undergoing chemotherapy.

Based on the explanation described above, it encouraged researchers to conduct research to find out how the quality of life in cancer patients undergoing chemotherapy at the Etam Cancer Shelter and Kaner Shelter in Samarinda City.

## 2. METHOD

The type of research used is quantitative with a descriptive research design. Descriptive research aims to describe systematically, factually, and accurately about the facts or characteristics of a particular population.

The instrument used in this study was a survey approach, where data were collected through distributing questionnaires to all cancer patients who were respondents. The sample size was 30 respondents selected using consecutive sampling technique, namely all populations that met the inclusion criteria were sampled.

### 3. RESULT AND DISCUSSION

The results of this study on the Overview of Knowledge Levels and Attitudes About Abortion in Undergraduate Nursing Study Program Students, Faculty of Medicine, Mulawarman University. Data collection was conducted through a survey or questionnaire in paper form (hard copy) with total sampling technique regarding the Overview of Knowledge Levels and Attitudes About Abortion in Undergraduate Nursing Study Program Students, Faculty of Medicine, Mulawarman University with 52 respondents selected according to inclusion criteria. The results of this study on the Overview of Quality of Life in Cancer Patients undergoing Chemotherapy at Rumah Singgah Kanker Etam and Rumah Singgah Kanker Kota Samarinda. Data collection was done through a survey or questionnaire in paper form (hard copy) with consecutive sampling technique with a total of 30 respondents selected according to the inclusion criteria. The results of data collection that have been obtained are then tabulated and analyzed.

The results of the data in this study are presented in tabular form and will then be interpreted in narrative form.

Table 3. 1 Frequency Distribution of Quality of Life

Category	Frequency	Percentage (%)
Good	14	47%
Poor	16	53%

Based on the results of the study, it is known that out of 30 respondents, the number of respondents in the category of poor quality of life was 16 respondents (53%) and good quality of life was 14 respondents (47%).

Based on the results of research conducted by researchers, it was found that most respondents were in the category of poor quality of life (53%). Based on this data, it shows that cancer patients who undergo chemotherapy have a poor quality of life. The results of this study are in line with research (Siwi et al., 2021) on the Quality of Life of Cancer Patients undergoing Chemotherapy at Dadi Keluarga Purwokerto Hospital, totaling 100 respondents with the results of poor quality of life as much as (77.6%), sufficient quality of life (19.4%) and good quality of life (3%). This is almost similar to the results of research conducted by (Kadir & Fitriani, 2019) based on the results of research obtained by qualifying respondents with poor quality of life results there were 27 respondents (64.3%). In contrast to research conducted by (Sari & Ladesvita, 2023) who conducted research in the One Day Care Room of Fatmawati Hospital showed that of the 63 respondents, 54

respondents (85.7%) had a good quality of life and a moderate quality of life of only 9 respondents (14.3%).

One of the factors that can affect quality of life is chemotherapy side effects such as nausea and vomiting, fatigue, alopecia, pain, decreased appetite, and mouth ulcers. Chemotherapy has a noticeable impact on the patient's physical condition, with responses varying from individual to individual. If the side effects that arise are not managed properly, the patient's quality of life can further decline (Ambarwati & Wardani, 2014). In addition to the side effects of chemotherapy, in another study conducted by Susanti et al. (2022) Pre-elderly age factors also cause a decrease in quality of life due to age factors associated with decreased physical function.

Quality of life can also be influenced by the stage of cancer; the stage of cancer indicates the extent to which the disease has spread and has a major effect on the prognosis and quality of life of patients. Based on the TNM system, stages I and II are categorized as early stages, while stages III and IV are classified as advanced (Oktafiani, 2024). Patients with early stages generally have a better quality of life because they undergo milder treatment. Conversely, patients with advanced stages tend to experience more severe physical problems than those with early-stage cancer because cancer cells have invaded other organs in the body (metastasis), more severe symptoms, and face more complex mental and social challenges that cause a decrease in their quality of life (Afifah & Sarwoko, 2020).

Other research also states that the length of time suffering from cancer also affects the quality of life of cancer patients. Cancer patients who have had cancer for more than one year face additional challenges due to long-term treatment, such as surgery, chemotherapy, and other therapies. The long-term effects of these treatments impact the physical, social and psychological aspects of patients, increasing the need for ongoing care and support. Many patients also experience stress, anxiety, and depression, leading to a reduced quality of life (Rumsilah et al., 2024).

#### **4. CONCLUSION**

Research on the description of quality of life in cancer patients undergoing chemotherapy at the Etam Cancer Shelter and Samarinda City Cancer Shelter has been conducted. Based on the results of research conducted by researchers, it was found that most respondents were in the category of poor quality of life (53%) and respondents who were in the category of good quality of life (47%).

## 5. REFERENCES

- Afifah, V. A., & Sarwoko. (2020). Faktor-Faktor Yang Mempengaruhi Kualitas Hidup Pasien Kanker Payudara Yang Menjalani Kemoterapi. *Jurnal Komunikasi Kesehatan*, 11(1).
- Altun, İ., & Sonkaya, A. (2018). The Most Common Side Effects Experienced by Patients Were Receiving First Cycle of Chemotherapy Dear Editor-in-Chief. *Iran J Public Health*, 47(8), 1218–1219. <http://ijph.tums.ac.ir>
- Ambarwati, W. N., & Wardani, E. K. (2014). *Efek Samping Kemoterapi Secara Fisik Pasien Penderita Kanker Serviks*. 97–106.
- Arifin, H., Chou, K.-R., Ibrahim, K., Rifa'atul Fitri, S. U., Pradipta, R. O., Rias, Y. A., Sitorus, N., Wiratama, B. S., Setiawan, A., Setyowati, S., Kuswanto, H., Mediarti, D., Rosnani, R., Sulistini, R., & Pahria, T. (2022). Analysis of Modifiable, Non-Modifiable, and Physiological Risk Factors of Non-Communicable Diseases in Indonesia: Evidence from the 2018 Indonesian Basic Health Research. *Journal of Multidisciplinary Healthcare*. <https://doi.org/10.2147/JMDH.S382191>
- El Kheir, D., & Ibrahim, A. (2019). Epidemiological assessment of distress during chemotherapy: who is affected? *Journal of Taibah University Medical Sciences*, 14(5), 448–453. <https://doi.org/10.1016/j.jtumed.2019.08.004>
- Global Centre Observatory. (2022). *Global Cancer Observatory*. <https://gco.iarc.who.int/en>
- Kadir, B. A. M., & Fitriani, R. (2019). Gambaran Kualitas Hidup Penderita Kanker Serviks Setelah Pengobatan di Rumah Sakit Islam Faisal Makassar. *Jurnal Midwifery*, 1(1), 40–57
- Kemenkes RI. (2018). *Laporan Nasional Riskesdas 2018 - Repositori Badan Kebijakan Pembangunan Kesehatan*. <https://repository.badankebijakan.kemkes.go.id/id/eprint/3514/>
- Mercer, A. J. (2018). Updating the epidemiological transition model. *Epidemiology and Infection*, 146(6), 680–687. <https://doi.org/10.1017/S0950268818000572>
- Murthy, S., Trapani, D., Cao, B., Bray, F., Murthy, S., Kingham, T., Are, C., & Ilbawi, , Andre. (2024). Premature mortality trends in 183 countries by cancer type, sex, WHO region, and World Bank income level in 2000-19: a retrospective, cross-sectional, population-based study. *Articles Lancet Oncol*, 25, 969–978. [https://doi.org/10.1016/S1470-2045\(24\)00274-2](https://doi.org/10.1016/S1470-2045(24)00274-2)

- Oktafiani, L. (2024). *Hubungan Stadium Kanker dengan Quality of Life pada Pasien Kanker di RSUD Kabupaten Jombang*. Institut Teknologi Sains dan Kesehatan Insan Cendekia Medika Jombang.
- Ramasubbu, S. K., Pasricha, R. K., Nath, U. K., Rawat, V. S., & Das, B. (2020). Quality of life and factors affecting it in adult cancer patients undergoing cancer chemotherapy in a tertiary care hospital. *Cancer Reports*, 4(2), 1–11. <https://doi.org/10.1002/cnr2.1312>
- Rodrigues, C., Silva, M., Cerejo, R., Rodrigues, R., Sousa, L., Trigo, C., Branco, L., Agapito, A., & Fragata, J. (2021). Quality of life among adults with repaired tetralogy of fallot: A literature review. *Revista Portuguesa de Cardiologia (English Edition)*, 40(12), 969–974. <https://doi.org/10.1016/j.repce.2021.11.016>
- Rumsilah, R., Suparman, R., Febriani, E., & Mamlukah, M. (2024). Analisis Faktor-faktor yang mempengaruhi Kualitas Hidup Pasien Kanker Payudara. *Journal of Public Health Innovation (JPHI)*, 5(1), 9–18. <https://doi.org/10.34305/jphi.v5i01.1422>
- Sari, S. J., & Ladesvita, F. (2023). Activity Daily Living dan Quality Of Life Pasien Kanker Yang Menjalani Kemoterapi. *Indonesian Journal of Health Development*, 5(1), 30–38.
- Siwi, A. S., Sumarni, T., Fadly, A. R., & Hidayat, A. I. (2021). *Kualitas Hidup pada Pasien Kanker yang Menjalani Kemoterapi*.
- Susanti, M., Yustisiana, & Salmi. (2022). Profil Kanker Payudara di RSUP Dr. M. Djamil Padang. *Nusantara Hasana Journal*, 2(2), 101–108.
- WHO. (2022). *Beban kanker global terus meningkat, di tengah meningkatnya kebutuhan akan layanan*. <https://www.who.int/news/item/01-02-2024-global-cancer-burden-growing--amidst-mounting-need-for-services>
- WHO. (2024). *Global cancer burden growing, amidst mounting need for services*. <https://www.who.int/news/item/01-02-2024-global-cancer-burden-growing--amidst-mounting-need-for-services>