The information and practices of the cancerous patients about nutrition

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Abstract

The aims of this research are to determine knowledge level of nutrition of cancerous patients, to find out nutrients which is taken by patients after suffer from a cancer. The study was carried out as descriptive cross-sectional. The sample of study includes 150 cancer diagnosed patients. It was determined that the majority of the patients (81.4%) – mostly females - participating in the study was older than 35 years old. It was identified that the majority of cancerous disease   had breast cancer and lung cancer (65.4%) and that the majority of patients had new diagnosis and cancer diagnosis a month ago   (64.7%).   The fact that the amount of   fruits that are necessary to be consumed every day remains in 45.3% and   that the daily consumption rate of   vegetable remains in 14 s% also demonstrated that   nutrition was inadequate; that fish was not eaten.

Keywords: Cancer; nutrition; information; practice; nursing.

1.   Introduction

Cancer takes place in the second rank among   the frequently seen diseases in our   country. Due to its being fatal, the disabilities it left, and high costs in treatment, cancer causes to the heavy losses in the economy of country. With this   aspect of it, it always keeps its place in the agenda as   a problem of public   health. Cancer   is an incurable disease of our age. The early diagnosis and treatment of the disease has a vital importance.   Another factor is   also nutrition problems in the patients, which is known effective on the morbidity and mortality and mostly ignored or not emphasized as much as necessary. There is a view   that   the relationship of   the disease with   nutrition is in   the rate of 35%, provided   that the environmental conditions are   not   taken into consideration, according   to the distinct resources, that this rate reaches 75%, provided   that the environmental conditions are taken into consideration, Nowadays, the influence of nutrition on   the genetic   structure were also   included   this interaction. This influence were discussed in both the formation of diseases and the methods of treatment.

Epistemological and experimental studies introduce the relationship between nutrition and cancer. The nutrients, on the one hand, contain the substances developing cancer, on the other hand, the substances   preventing cancer. The studies demonstrated   that 1/3 of all deaths from cancer were   related to nutrition and that and vegetable and fruit intensive nutrition could reduce the incidence of cancer by 20% However, there is a few studies on how the nutrition of the cancerous is and it affected the disease (Tisdale 2001:438-440; Bauser

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and Capra 2003; Read and ark 2005:52-54; Bokhorst and Schueren 2005:76-80; World Cancer Research Fund 2007, Bayrak and ark 2010:95-97).

2. Purpose

Therefore, in this study, the information and practices about nutrition of cancerous patients will be determined and the effect of nutrition on the disease will be identified.

3. Material and Method

3.1. The form of Study; The study was carried out as descriptive cross-sectional, The aims of this research are to determine knowledge level of nutrition of cancerous patients, to find out nutrients which is taken by patients after suffer from a cancer, to determine the relationship between disease and nutrition , to create awareness among nurses on nutrition of cancerous patients.

3.2. The universe and sample of the study: The universe of study consists of the cancerous patients recorded in the hospitals loca ted in the centrum of Şanlıurfa. The sample of study 150 cancer diagnosed patients who referred to the hospitals with the various reasons in the months of November and December of 2012 and in January 2013.

3.3. The data collecting instruments of study: The data of the study by means of a questionnaire prepared by the researcher in the light of the recent literature. The questionnaire consists of the questions revealing the socio-demographic characteristics of the patient, data about disease, and case of information and practice of the patient about nutrition The questionnaire was completed by interviewing the patient face to face

3.3.Assessment of the study: The data of the study on SPSS package program. As the test of the relationship between the case of nutrition and variables, chi square analyses were carried out but since the expected value is more than 25%, descriptive statistical findings were used and interpreted. In the relationship, between the gender and sort of cancer, only chi square test was used.

4. Results

Table 1- Socio-demographic characteristics of the cancerous patients

Variables	Number (n)	Percent(%)
Age		
25 and less	11	7,3
26-35	17	11,3
36-45	43	28,7
46-55	29	26,0
56 and more	40	26,7
Gender		
Female	95	63,3
Male	55	36,7
Educational Status		
İlliterate	70	46,7
Primary School	36	24,0
Secondary School	18	12,0
High School and over	26	17,3
Marital Status		
Married	108	72,0
Single	18	12,0
Widowed or Divorced	24	16,0

Place of living		
Province	115	76,7
District	35	23,3
Employment Status		
Employed	37	24,7
Unemployed	113	75,3
Income Status		
TL 500-999	100	66,7
TL 1000-1500	38	25,3
TL 1500 and over	12	8,0

In Table 1, socio-demographic characteristics of the cancerous patients were presented. When regarding to the data, it is determined that the majority of the cancerous is in ages more than 35 (81.4%) and mostly female. The least age one of the patients is 19 years old and has osteoid cancer and the patient in the highest age is 80 years old and has long cancer. The ratio of female –male is 1.72. It is seen that 46.7% of the cancerous patients are illiterate. It is identified that the majority of the patients are married (72.0%) and live in the centrum. When regarding to the employment and income status, it is identified that 75.3% of the patients are unemployed and their incomes are less than TL 1.000.

Table 2- The Cases Of The Cancerous Patinets About Consuming The Nutrients

Nutrients	None		A time a month		A time a fortnight		One time or two times a week		Every Day		Every Meal	
Milk	24	16,0	9	6,0	30	20,0	64	42,7	23	15,3	0	0
Buttermilk	2	1,3	5	3,3	13	8,7	63	42,0	60	40,0	7	4,7
Tea	15	10,0	4	2,7	3	2,0	14	9,3	89	59,3	25	16,7
Vegetable teas	118	78,7	9	6,0	13	8,7	7	4,7	2	1,3	1	0,7
Ready fruit juices	22	14,7	14	9,3	43	28,7	60	40,0	9	6,0	2	1,3
Coffee	75	50,0	21	14,0	22	14,7	29	19,3	3	2,0	0	0
Cola –Fanta	84	56,0	16	10,7	21	14,0	24	16,0	4	2,7	1	0,7
Drinks with alcohol	139	92,7	6	4,0	2	1,3	1	0,7	1	0,7	1	0,7
Water	0	0	0	0	1	0,7	1	0,7	11	7,3	137	91,3
Yogurt	2	1,3	2	2,0	8	5,3	50	33,3	82	54,7	6	4,0
Cheese	2	1,3	3	2,0	12	8,0	40	26,7	88	58,7	5	3,3
Milk Puddings	21	14,0	31	20,7	62	41,3	30	20,0	6	4,0	0	0
Red Meat	6	4,0	15	10,0	43	28,7	82	54,7	4	2,7	0	0
Chicken Meat	16	10,7	22	14,7	25	16,7	84	56,0	3	2,0	0	0
Fish Meat	75	50,0	60	40,0	10	6,7	5	3,3	0	0	0	0
Giblets	97	64,7	34	22,7	11	7,3	8	5,3	0	0	0	0
Soudjouk - Sausage	114	76,0	15	10,0	9	6,0	8	5,3	0	0	0	0
Lahmacun kebab	10	6,7	17	11,3	39	26,0	81	54,0	3	2,0	0	0
Toast- pizza	114	76,0	16	10,7	7	4,7	9	6,0	4	2,7	0	0
Egg	8	5,3	3	2,0	16	10,7	60	40,0	62	41,3	1	0,7
Legumes	9	6,0	6	4,0	34	22,7	97	64,7	4	2,7	0	0
Olive	4	2,7	4	2,7	8	5,3	30	20,0	100	66,7	4	2,7
Pastry	42	28,0	20	13,3	52	34,7	33	22,0	3	2,0	0	0
Chocolate- candy	69	46,0	27	18,0	28	18,7	21	14,0	5	3,3	0	0
Snack	46	30,7	21	14,0	31	20,7	44	29,3	7	4,7	1	0,7
Vegetable	3	2,0	3	2,0	15	10,0	103	68,7	21	14,0	5	3,3
Fruit	1	0,7	2	1,3	12	8,0	64	42,7	68	45,3	3	2,0
Bread	0	0	1	0,7	5	3,3	4	2,7	19	12,7	121	80,7
Rice Dish, Macaroni	4	2,7	22	14,7	24	16,0	88	58,7	7	4,7	5	3,3
Butter	72	48,0	28	18,7	25	16,7	22	14,7	3	2,0	0	0
Margarine	92	61,3	16	10,7	20	13,3	17	11,3	5	3,3	0	0

Honey, Grape Molasses, Jam	35	23,3	39	26,0	25	16,7	38	25,3	13	8,7	0	0

In Table 2, the cases of the cancerous patients about consuming the nutrients are presented. It was identified that the nutrients the patients consumed a time a fortnight or less were are mostly vegetable teas, coffee, cola-fanta, drinks with alcohols, milk puddings, fresh meat, giblets, soudjouk- sausage, toast –pizza, pastry, chocolate –candy, snack, butter, margarine, honey, and grape molasses. The nutrients the patients consumed every day and every meal were found as tea, water, yogurt, cheese, egg, olive, fruit, and bread. In the nutrient group they consume one or two times a week, the milk, buttermilk, ready-made fruit juices, red meat, chicken meat, lahmacun (a pizza spicy meat filling), kebab, legumes, rice dish, and macaroni take place.

5. Discussion

In Turkey ,when the incidences of cancer according to the gender are examined, it is continuously reported that the cancer rate in the male is higher. In the cases of cancer for the year 1999, the rate of males is 61% (Cancer Control Policy and Information 2002). In respect with the end of 2000, the incidence of cancer in Turkey is 280 per one hundred thousand for the males, while 172 per one hundred thousand for the females. This means that 2/3 of the cancerous patients are males, 1/3 of them females. This rate is almost the same in the world (TUİK 2009). However, in this study, that the number of the cancerous females are more and the rate of female-male is 1.72 bring into mind that there is an significant increase in the incidence of the cancer seen in the females and that the factors increasing the cases of incurring of the females to the disease of cancer should be considered.

In the studies carried out, it was suggested that the low socio-economic status and unbalanced and poor nutrition are significant factors. The meat, chicken, fish, milk, and dairy products, and even dry legumes that are rich from the aspects of the nutrient members such as protein, vitamin B, iron, zinc, calcium and have a primary importance in the nutrition of human cannot be adequately provided by low income families (Baysal 2003:69). This result brings into mind that, in this study, the fact that most of cancerous patients are illiterate is a significant factor is in being low income and in unbalanced and poor nutrition

The cases of the patients about the cancer are presented. According to this, it was identified that the majority of the patients had lung cancer (65.4%) and that the disease was diagnosed newly or 1 month ago (64.7%). When regarding to the gender, it was identified that there was breast cancer in the females the most (49.5%), while there was gastrointestinal tract cancers in the males the most (550.9%). When regarding to the statistical relationship between the gender and sorts of cancer, It was found that there was a significant difference between them ($p < 0.05$).

In our country, according to the data of TUİK 2009, it is suggested that the most seen sort of cancer is the lung cancer in males, the breast cancer in females(TUİK 2009). In this study, although this implication is confirmed in the females, for the males, GIS cancers take place in the first rank. According to the study carried out in Van, in the sorts of cancer seen in the males, GIS cancers took place in the first rank in such a way that it supported this study. It was reported that the inadequacies in nutrition could be resulted from the pickle, foods that are rich from the aspect of nitrosamines, and mycotoxins. In two studies, in which the epidemiologic characteristics of esophagus and stomach cancers in the regions and the regional risk factors were examined, in the group of esophageal, while the story of the abundantly drunken hot tea and cancerous family was in the foreground, smoking cigarette was not found determinative. In the stomach cancer, the daily diet habits,

abundantly eating the hot and salty foods, and insufficiently eating the fresh vegetables and fruits is remarkable. In addition, it was found that the nitrate and nitrite contents in the drinking water and consumption of bread baked in the fire of cowpat were also effective (Alıcı and Ark 2006:95). Therefore, the habits to eats in the province of Urfa should be seriously taken into consideration.

That the majority of patients have the new or "one month ago" diagnosis (64.7%) may be a finding that is both good or bad. That it is a good finding is catching the disease at the outset and this brings into mind that with the practice of remedial practices carried out on them, it will positively affect the mortality and mobility.

When regarding to obtaining of the cancerous patients, almost half of them obtained the information and it was found that 93.2% of the people obtaining the information obtained it from the doctor and that the information was mostly associated with the method of treatment to be able to quickly recover from the cancer. In the cancerous patients, the nutrition support must begin at the moment of diagnosis and take place in the treatment plan in all of disease phase. Via the nutrition support, cancer related symptoms can be taken under control; postoperative complications and infection rates can be reduced; hospitalization tine can decrease, and the increase in the treatment tolerance and immune response can be provided. With all of these results that can be obtained, an improvement can be provided in the quality of life of the patient (Bauser and Capra 2003:260; Bokhorst and Schueren 2005:81; World Cancer Research Fund 2007, Yılmaz and ark 2011:140, Demir and Onat 2011:502). In this study, the nutrition case of the cancerous patients were not assessed and the awareness of patients were not raised.

The levels of the cancerous patients associated with nutrition are presented in Table 1. It is seen that 56.7% of the patients was nourished by 3 meals. The patients were asked their information about why a healthy human should consume which nutrients and then the nutrients specific to cancer. However, it was identified that the cancerous patients but those having education about how the cancerous patients should be nourished did not have any information. When regarding to the case of information about nutrition of healthy people, it was identified that the patients did not know very well the importance of not consuming the dry foods (27.4%) but the other nutrition members

That the patients do not have any information about how they should nourish brings into mind that they will have the insufficient information based on this and reduces the quality of life of the patient as described above.

The studies carried out suggest that the cancerous patients should first of all, consume, the vegetable and fruit weighed nutrients and unprocessed agricultural products much more and that a limitation should be about consuming the processed cereal products, whose the rate of saturated fat are high, that are sugary, and the red meat. In addition, these studies report that it should be stay out of the acidified and salty goods (Bauser and Capra 2003:259; Bokhorst and Schueren 2005:82; World Cancer Research Fund 2007, Yılmaz and ark 2011:138; Demir and Onat 2011:501, KETEM 2013). In the present study, that the fruit that should be consumed remains in 45.3% of the amount that should be consumed every day and the vegetable in 14.0% of this amount show that it is insufficiently nourished. That the red meat is consumed in the expected rate and that there is unbalance in the other nutrient groups bring into mind that the interventions to be made to the cancerous patients are so urgent and important.

6. Conclusion and Suggestions

- it is determined that the majority of the cancerous is in ages more than 35 (81.4%) and mostly female.
- The least age one of the patients is 19 years old and has osteoid cancer and the patient in the highest age is 80 years old and has long cancer.
- it is identified that 75.3% of the patients are unemployed and their incomes are less than TL 1.000
- The nutrients the patients consumed every day and every meal were found as tea, water, yogurt, cheese, egg, olive, fruit, and bread.

Suggestions

- It was identified that nutrition playing important role in the recovery of the cancerous patients was poor, that the information about this issue was not enough; that the nutrients they consumed were not in balance; and that these nutrients were inadequate

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