

## **ANXIETY AND DEPRESSION ASSESSMENT IN PATIENTS WITH NON-SMALL CELL LUNG CARCINOMA IN RELATION TO MENTAL ADJUSTMENT TO CANCER EVALUATED USING THE MINI-MAC SCALE**

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Most patients with non-small cell lung carcinoma (NSCLC) are diagnosed at advanced stages of the disease. Psychological symptoms, such as anxiety and depression, are identified in cancer patients as frequently as shortness of breath, coughing, and weakness. These symptoms are associated with poorer treatment adherence and poorer outcomes. Beside establishing the diagnosis and initiating the required treatment, one must also evaluate the patient's psychological and emotional state and identify their strategies for coping with the disease.

**Purpose:** To analyze the relationship between mental adjustment to cancer on the one hand, and anxiety and depression on the other in patients with NSCLC.

**Methodology:** 185 patients were grouped based on their Mini-MAC results: A — mostly constructive coping styles, B — balanced coping styles; C — mostly destructive coping styles. The study used the Mini-MAC scale for evaluating mental adjustment to cancer, and the Hospital Anxiety and Depression Scale to determine the levels of anxiety and depression.

### **Results:**

A comparative analysis of anxiety and depression levels between the groups studied showed higher anxiety levels in patients with mostly destructive or balanced coping styles than in those with mostly constructive coping styles (10.93 vs 9.27 vs 6.28, respectively;  $p < 0.001$ ). Similarly, depression levels increased along with more negative coping styles (11.85 vs. 8.84 vs. 5.76, respectively;  $p < 0.00$ ). The linear regression model used showed that compared to mostly destructive coping styles, mostly constructive coping styles decreased anxiety levels by a mean of 2.83 points ( $p < 0.001$ ). Also, compared to mostly destructive coping styles, balanced coping styles decreased depression levels by a mean of 1.882 points ( $p = 0.024$ ), while mostly constructive coping styles decreased depression levels by a mean of 3.869 points ( $p < 0.001$ ).

**Conclusions:** Anxiety and depression levels are associated with mental adjustment to cancer, and are the lowest in patients who have a constructive coping style. A constructive style of mental adjustment to cancer is a statistically significant independent determinant of lower anxiety and depression levels in patients with NSCLC.