

Body image discontentment among head and neck cancer patients in Visakhapatnam district: An empirical study

Descontentamento com a imagem corporal entre pacientes com câncer de cabeça e pescoço no distrito de Visakhapatnam: Um estudo empírico

Descontento con la imagen corporal entre pacientes con cáncer de cabeza y cuello en el distrito de Visakhapatnam: Un estudio empírico

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Abstract

Head and neck cancers, which comprise tumours of the oral cavity, throat, nasal cavity, and thyroid, pose substantial physical and psychological issues. These tumours frequently require harsh therapies such as surgery, radiation therapy, and chemotherapy, which can result in apparent changes in appearance and physical function. As a result, patients are frequently subjected to body image distress, low self-esteem, and overall unhealthy psychological well-being. This study aims to investigate head and neck cancer patients' self-perceptions and body image problems, with an emphasis on feelings of self-consciousness, physical attractiveness, and general body dissatisfaction amongst head and neck cancer out patients undergoing treatment in HCG cancer hospital in Visakhapatnam. This study was conducted on 50 head and neck cancer outpatients undergoing treatment at an oncology centre Healthcare Global Enterprises Ltd (HCG) hospital Visakhapatnam during the period of (May 2023 to June 2023) who were willing to participate in the study and were 20 years of age and above. An interview schedule was prepared by the researcher and administered to the patients comprising section A (questions pertaining to the demographic and clinical details of the patient), section B (modified 6 item Body Image Scale). Majority of the patients were male (62%) while female constituted 38% with the majority aged between 20- 39 years (61%) and the most common cancer being that of oral cavity (58%). The findings reveal a sizable proportion of respondents reporting feeling self-conscious and less physically attractive as a result of their sickness or treatment. Many individuals are dissatisfied with their appearance and overall body image, with a significant percentage reporting that these issues interfere with their social relationships and sense of wholeness. These findings highlight the need of addressing psychological and emotional support in the treatment and care of head and neck cancer patients. Integrating mental health and body image counselling into cancer treatment programmes has the potential to greatly improve patients' overall well-being and quality of life.

Keywords: Cancer; Head and neck cancer; Body image distress; Wellbeing; Quality of life.

Resumo

Cânceres de cabeça e pescoço, que compreendem tumores da cavidade oral, garganta, cavidade nasal e tireoide, apresentam problemas físicos e psicológicos substanciais. Esses tumores frequentemente requerem terapias severas, como cirurgia, radioterapia e quimioterapia, que podem resultar em mudanças aparentes na aparência e função física. Como resultado, os pacientes são frequentemente submetidos a sofrimento de imagem corporal, baixa autoestima e bem-estar psicológico geral prejudicial. Este estudo tem como objetivo investigar as autopercepções e problemas de imagem corporal de pacientes com câncer de cabeça e pescoço, com ênfase em sentimentos de autoconsciência, atratividade física e insatisfação corporal geral entre pacientes ambulatoriais com câncer de cabeça e pescoço em tratamento no hospital de câncer HCG em Visakhapatnam. Este estudo foi conduzido em 50 pacientes ambulatoriais com câncer de cabeça e pescoço em tratamento em um centro de oncologia Healthcare Global Enterprises Ltd (HCG) hospital Visakhapatnam durante o período de (maio de 2023 a junho de 2023) que estavam dispostos a participar do estudo e tinham 20 anos de idade ou mais. Um cronograma de entrevista foi preparado pelo pesquisador e administrado aos pacientes, compreendendo a seção A (perguntas relativas aos detalhes demográficos e clínicos do paciente), seção B (Escala de Imagem Corporal modificada de 6 itens). A maioria dos pacientes era do sexo masculino (62%), enquanto as mulheres constituíam 38%, com a maioria com idade entre 20 e 39 anos (61%) e o câncer mais comum sendo o da cavidade oral (58%). As descobertas revelam uma proporção considerável de entrevistados relatando se sentirem constrangidos e menos atraentes fisicamente como resultado de sua doença ou tratamento. Muitos indivíduos estão

insatisfeitos com sua aparência e imagem corporal geral, com uma porcentagem significativa relatando que essas questões interferem em seus relacionamentos sociais e senso de totalidade. Essas descobertas destacam a necessidade de abordar o suporte psicológico e emocional no tratamento e cuidado de pacientes com câncer de cabeça e pescoço. Integrar aconselhamento sobre saúde mental e imagem corporal em programas de tratamento de câncer tem o potencial de melhorar muito o bem-estar geral e a qualidade de vida dos pacientes.

Palavras-chave: Câncer; Câncer de cabeça e pescoço; Distúrbios da imagem corporal; Bem-estar; Qualidade de vida.

Resumen

Los cánceres de cabeza y cuello, que comprenden tumores de la cavidad oral, garganta, cavidad nasal y tiroides, plantean importantes problemas físicos y psicológicos. Estos tumores con frecuencia requieren terapias duras como cirugía, radioterapia y quimioterapia, que pueden dar lugar a cambios evidentes en la apariencia y la función física. Como resultado, los pacientes con frecuencia sufren angustia por la imagen corporal, baja autoestima y un bienestar psicológico general poco saludable. Este estudio tiene como objetivo investigar las autopercepciones y los problemas de imagen corporal de los pacientes con cáncer de cabeza y cuello, con énfasis en los sentimientos de timidez, atractivo físico e insatisfacción corporal general entre los pacientes ambulatorios con cáncer de cabeza y cuello que se someten a tratamiento en el hospital oncológico HCG en Visakhapatnam. Este estudio se realizó en 50 pacientes ambulatorios con cáncer de cabeza y cuello sometidos a tratamiento en un centro oncológico Healthcare Global Enterprises Ltd (HCG) hospital visakhapatnam durante el período de (mayo de 2023 a junio de 2023) que estaban dispuestos a participar en el estudio y tenían 20 años de edad o más. El investigador preparó un cronograma de entrevistas y lo administró a los pacientes que incluía la sección A (preguntas relacionadas con los detalles demográficos y clínicos del paciente) y la sección B (Escala de imagen corporal modificada de 6 elementos). La mayoría de los pacientes eran hombres (62 %), mientras que las mujeres constituían el 38 %; la mayoría tenía entre 20 y 39 años (61 %) y el cáncer más común era el de cavidad oral (58 %). Los hallazgos revelan una proporción considerable de encuestados que informaron sentirse cohibidos y menos atractivos físicamente como resultado de su enfermedad o tratamiento. Muchas personas están insatisfechas con su apariencia y su imagen corporal en general, y un porcentaje significativo informa que estos problemas interfieren con sus relaciones sociales y su sentido de plenitud. Estos hallazgos resaltan la necesidad de abordar el apoyo psicológico y emocional en el tratamiento y cuidado de los pacientes con cáncer de cabeza y cuello. La integración de la salud mental y el asesoramiento sobre la imagen corporal en los programas de tratamiento del cáncer tiene el potencial de mejorar en gran medida el bienestar general y la calidad de vida de los pacientes.

Palabras clave: Câncer; Câncer de cabeça e cuello; Malestar por la imagen corporal; Bienestar; Calidad de vida.

1. Introduction

Cancer is a dreaded disease that causes high suffering and mortality worldwide. Head and neck cancers(HNC), which comprise tumours of the oral cavity, throat, nasal cavity, and thyroid, pose substantial physical and psychological issues emerging as the sixth most common disease globally and in India, it affects one-quarter of the male and one-tenth of the female population, owing to tobacco and alcohol intake (Michaelraj, et al., 2023; Francis, 2018; Asthana & Patil, et al., 2016). These cancers often require aggressive therapies such as surgery, radiation therapy, and chemotherapy, which can result in changes in physical appearance and function ranging from deformity, skin changes, scarring, and the loss of a physical component (Manier & Rowe, et al., 2018). As a result patients are often subjected to body image distress, low self-esteem, and overall psychological well-being which has a great toll on their quality of life (Katherine et al., 2023; Samsøe et al., 2022; Vivek et al., 2022). When compared to other cancers, the deformity created by HNC tumour and the surgical extermination is very visible and has a significant impact on an individual's identity, especially for those who cannot afford prosthetic body parts. (Bethany et al., 2013) pin points disfigurement to be one of the leading cause of body discontentment in the medical milieu as surgical therapy, when compared to other therapies, generates greater visible bodily disfigurement, which causes psychological anguish in patients since it may alter the skin's natural uniformity. Similarly, radiation therapy can alter normal skin tone and integrity, resulting in fibrosis, edema, and pigmentation abnormalities. Furthermore, body disfigurement in HNC patients is produced not only by cancer treatment, but also as a sign of the disease, which is frequently marked by the presence and rapid growth of the tumour.

Body image dissatisfaction is a worldwide issue affecting people of all ages, sex and gender and is often characterised by the need for one to change or correct body problems (Richard et al., 2022). Oftentimes people who have body image concerns are subjected to stigmatisation and public stares which greatly hampers their self esteem (Choudhary et al., 2022). According to

(Falk et al., 2010) body image refers to the ideas, feelings, and actions associated with the entire body and all of its domains; it is a subjective sense of one's insight into one's own body, based on one's own interpretation and reactions to the judgements of others. With regards to cancer, body image disruption refers to an individual's recognized and observed changes in their appearance caused by cancer, which coexist with psychological agony and affliction (Shunmuga S. et al, 2019). Individuals respond to body image concerns differently. With some, at first when they are diagnosed with cancer, they pay less attention to changes to their physical appearance as all they want is just to be alive while others get so overwhelmed with their bodily changes from diagnosis to throughout the treatment process (Chindhu et al., 2022).

Therefore it is indisputable that patients with HNC frequently experience body image disorders, with high prevalence rates due to apparent alterations in the head and neck area that cannot be concealed (Melissant et al., 2021; Rhoten et al., 2013). The incidence of body image distress varies based on the type of HNC. However, there are some common characteristics which include interpersonal problems, social isolation, low self-esteem, physical deformity, stress, and mild to moderate anxiety and depression. In India, researchers have investigated body image dissatisfaction among breast and gynaecological cancer patients. Nonetheless, little or no study is known regarding body image dissatisfaction of head and neck cancer patients as a result of cancer and its treatment in visakhapatnam district. Therefore the purpose of this study is to investigate head and neck cancer patients' self-perceptions and body image problems, with an emphasis on feelings of self-consciousness, physical attractiveness, and general body dissatisfaction. The study hopes to quantify the prevalence and severity of these concerns, as well as find any notable patterns depending on demographic and treatment characteristics. The findings will be useful for oncologists and social workers by emphasising the importance of including psychological support into care for patients with head and neck cancer.

2. Material and Methods

Study design

Research methodology is the adoption and use of various logistic and scientific steps by the researcher to study the research problem (Kothari, 2004). This study was a descriptive research carried out at an oncology centre (HCG) hospital visakhapatnam. HCG is an acronym of Healthcare Global Enterprises Ltd with its headquarter located in bangalore which primarily focuses on providing quality healthcare and comfort to its patients. The study population comprised 73 head and neck cancer patients undergoing treatment in the hospital during the period of June 2023 to July 2023.

The sample group comprised 50 head and neck cancer outpatients undergoing treatment at the hospital at the time of data collection (June 2023 to July 2023) who were willing to participate in the study and were 20 years of age and above. The sampling method used for this study was convenient sampling where the patients were selected based on their accessibility and availability.

Instrumentation

An interview schedule was prepared by the researcher and administered to the patients . It comprised the following sections.

Section A included questions pertaining to the demographic and clinical details of the patient.

On the other hand, section B consisted of a modified 6 item Body Image Scale constructed based on the format of (Hopwood et al., 2014).

Section A

Demographic and clinical details: This pertains to personal information of the patient with regards to age, gender, cancer type, and treatment type.

Section B

The scale ranged from Not at all to Very much. The response categories were as follows.

1. Not at all- If the feeling was not present at all.
2. A little- If the feeling was 25% of the time
3. Not much- If feeling was present 50% of the time
4. Very much - If feeling was present 100% of the time

The categories were summed to arrive at a total range of the subject. Data was analysed using Microsoft excel.

Ethical Consideration

Prior authorization from the hospital administration (HCG) was acquired before the study started. Additionally, the patients took part in the trial voluntarily and were informed about the study's goals prior to its commencement.

3. Results and Discussion

Table 1 - Demographic and clinical distribution of respondents N=50.

Variables	Characteristics	Frequency	%
Age	20-39	23	46
	40-59	11	22
	60- above	16	32
Total		50	100
Gender	Male	31	62
	Female	19	38
Total		50	100
Cancer type	Oral cavity	29	58
	Throat	10	20
	Nasal cavity	7	14
	Thyroid	4	8
Total		50	100
Treatment type	Surgery	15	30
	Radiation therapy	2	4
	Chemotherapy	0	0
	Combined therapy	33	66
Total		50	100

Source: Authors.

Table 2 - Distribution of respondents based on body image dissatisfaction N=50.

Variable	Characteristics	Frequency	%
Do you feel self conscious about your appearance?	Not at all	3	6
	A little	6	12
	Not much	16	32
	Very much	25	50
Total		50	100
Have you felt less physically attractive because of the disease or treatment?	Not at all	2	4
	A little	7	14
	Not much	16	32
	Very much	25	50
Total		50	100
Have you felt dissatisfied with your appearance?	Not at all	4	8
	A little	5	10
	Not much	13	26
	Very much	28	56
Total		50	100
Do you avoid people because of your appearance?	Not at all	7	14
	A little	6	12
	Not much	14	28
	Very much	23	46
Total		50	100
Do you feel the disease/ treatment has rendered your body less whole?	Not at all	1	2
	A little	7	14
	Not much	13	26
	Very much	29	58
Total		50	100
Overall have you felt dissatisfied with your body?	Not at all	0	0
	A little	9	18
	Not much	12	24
	Very much	29	58
Total		50	100

Source: Authors.

Results and Discussion Related to Demographic and clinical aspects

Based on the findings, the majority of the respondents 46% were between the ages of 20-39 years with majority n=31 constituting male while n=19 constituted female. HNC is one of the leading cancers in India with oral cancer at the forefront due to high consumption of tobacco amongst the population as per (Asthana S, 2016). Also this can be supported by (Kusumanjali, 2019) who noticed high prevalence of oral cavity and larynx cancers amongst head and neck cancer patients. This can be evident in the findings which show the majority of HNC cases is that of oral cavity 58%. Meanwhile a previous study conducted by (Sunny et al., 2004) had witnessed a decline in the rates of oral cancer. Therefore the current hike in oral cancer is as a result of increased tobacco consumption as revealed by (Asthana, 2016). With regards to treatment type, the majority of the patients n=33 had a combined therapy of both surgery, radiation therapy and chemotherapy and no patient n=0 had just chemotherapy alone. Majority of the patients with combined therapy reported high body image dissatisfaction. This can be supported by (MacIas et al., 2021) who reported multiple treatment procedures to be a contributing factor to body image distress.

Results and discussion related to body image dissatisfaction scale

This section sought to examine the level of body image dissatisfaction experienced by the patients as a consequence of the disease and/ or treatment. A 4 point scale was used to rate their responses. The scale ranged from “ Not at all to Very much” as per (Hopwood et al., 2014).

Majority of respondents 50% responded “very much” to feeling Self conscious about their appearance. This is probably because of the tumour visibility and also disfigurement as a result of treatment. This can be supported by (Chindhu, S et al 2022) who mentioned that self consciousness about physical appearance is common phenomenon with Head and neck cancer patients with some individuals ignoring their body changes at the beginning of treatment, while some get so fixated about their body concerns from diagnosis to throughout the treatment process (Chindhu et al., 2022).

Also half n=25 of the respondents responded “ very much” to feeling less physically attractive because of the disease / treatment. While n=29 responded to ”very much” to their body rendered less whole due to cancer and the treatment. This is because cancer and its treatment is often associated with physical deformities as can be backed up by (Manier et al., 2018) who discovered that cancer therapies such as surgery, radiation therapy, and chemotherapy, causes changes in physical appearance and function ranging from deformity, skin changes, scarring, and the loss of a physical component. Over all, n=28 responded” very much” to feeling dissatisfied with their body. This will definitely have a toll on their self esteem as supported by (Mellor et al., 2010) who discovered that a higher body dissatisfaction leads to higher low self esteem.

Limitation of the study

The study's disadvantage is that it only included 50 outpatients with head and neck cancer from HCG Cancer Hospital. Thus, it is advised that more extensive research be conducted in this specific area in the future and further research should look into other factors that influence body image and self-perception in this patient population.

4. Conclusion

Body image dissatisfaction is widespread among cancer patients, but it is especially prevalent among HNC patients due to the fact that these damaged body areas cannot be entirely covered. The findings show that HNC patients have significant body image dissatisfaction as a result of the disease and treatment which impacts their self-esteem and confidence. Therefore these findings highlight the need of addressing psychological and emotional support in the treatment and care of head and neck cancer patients. Integrating mental health and body image counselling into cancer treatment programmes has the potential to greatly improve patients' overall well-being and quality of life. Therefore it will be appropriate for further research to be done to look into the efficacy of such integrative techniques, as well as other factors that influence body image and self-perception in this patient population and an extensive public sensitization and awareness be done to prevent HNC sufferers from being body shamed.

Significance on social work/ Recommendations

Social work is a practice based profession which promotes social change, social cohesion, empowerment and liberation of people (IFSW, 2014). This study is important to social work as it emphasises the necessity for social workers to address body image and self-perception concerns, as these are critical to cancer patients' well-being. It also reveals the need for advocacy by social workers in psychological support within the healthcare setting. Moreso, it underscores the need for social workers to offer targeted support and counselling relating to body image and self esteem, creating peer support groups to enhance the wellbeing of head and neck cancer patients.

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