

Psychological, Social, and Emotional Challenges in Cancer Patients

Gavin Sherlock^{*}

Department of Oncology, Stanford University School of Medicine, California, United States of America

DESCRIPTION

Cancer is an emotional and psychological struggle that deeply affects both patients and their families. The journey through cancer treatment is laden with complexities that extend far beyond the confines of hospitals and clinics. The intricate web of psychological, social, and emotional aspects of cancer shedding light on the challenges faced by the patients and their families crucial role as supporting systems in mitigating these difficulties. Upon receiving a cancer diagnosis, patients often experience different emotions ranging from fear and anger to sadness and anxiety. The uncertainty of the future and the rigorous nature of treatments can lead to overwhelming stress. Surgery, chemotherapy, and radiation can lead to changes in appearance, such as hair loss, scars, or weight gain, impacting self-esteem and body image. Patients don't have interest to do social activities due to physical symptoms, fear of judgment, or a lack of energy, leading to feelings of isolation. Moreover, the fear of mortality and the altered body image due to surgeries or treatments can severely impact self-esteem and self-worth. Some patients might experience a crisis of faith or spiritual distress while dealing with cancer.

Cancer affects not only the diagnosed individual but also their loved ones. Families also experience emotions such as helplessness, guilt, and sadness, as they witness their beloved family member going through immense pain and suffering. Balancing caregiving responsibilities with maintaining their own emotional well-being can be an immense challenge. Cancer can lead to social isolation as patients and families may withdraw from social activities due to physical symptoms or the emotional distress of the disease. Additionally, in this society the patients with cancer are prone to discrimination, making it difficult for

their families to openly discuss their experiences and seek support.

Despite the challenges, individuals and families facing cancer often exhibit remarkable resilience. Coping strategies such as seeking social support, practicing mindfulness and relaxation techniques, and engaging in creative outlets can significantly alleviate psychological distress. Moreover psychotherapy and counseling offers a safe space for patients and families to express their emotions and learn effective coping mechanisms. Supporting systems play an important role in the journey through cancer. Friends, family, support groups, and healthcare professionals offer emotional support, understanding, and encouragement, creating a nurturing environment where patients and their families can share their fears and hopes. Online communities and helplines provide avenues for connecting with others who have similar experiences, fostering a sense of belonging and understanding.

Caregivers, often family members, assume the responsibility of providing physical and emotional care to the patient. This role, while fulfilling, can lead to caregiver burnout due to the immense pressure and constant worry. Recognizing and addressing the caregiver burden is important, as their well-being is intertwined with the well-being of the patient. For patients in advanced stages of cancer, palliative care becomes a vital component of the treatment plan. It focuses on enhancing the quality of life by managing pain and other symptoms. Addressing end-of-life issues, such as advance care planning and emotional closure, is essential for patients and families to find peace and acceptance in the face of mortality. In this shared journey, the power of empathy and support shines as a beacon, guiding patients and their families through the darkest days toward the light of healing and acceptance.

Citation: Sherlock G (2023) Psychological, Social, and Emotional Challenges in Cancer Patients. Bio Med. 15:612.

Copyright: © 2023 Sherlock G. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Correspondence to: Gavin Sherlock, Department of Oncology, Stanford University School of Medicine, California, United States of America, Email: gavin@shlk.edu

Received: 23-Aug-2023, Manuscript No. BLM-23-23625; Editor assigned: 28-Aug-2023, Pre QC No. BLM-23-23625 (PQ); Reviewed: 11-Sep-2023, QC No. BLM-23-23625; Revised: 18-Sep-2023, Manuscript No. BLM-23-23625 (R); Published: 25-Sep-2023, DOI: 10.35248/0974-8369.23.15.612.