

**FACTORS RELATED TO THE QUALITY OF LIFE OF CERVICAL
CANCER PATIENTS AT ARIFIN ACHMAD REGIONAL HOSPITAL,
RIAU PROVINCE****Habibah Arbaiyah Nainggolan^{1*}, Deswinda¹, Afrida Sriyani Harahap¹, Nina Trisnawati¹**¹Program Studi of Profesi Ners, Faculty of Nursing, Institut Kesehatan Payung Negeri, Pekanbaru,
Indonesia***Corresponding author: arbaiyahnainggolan@gmail.com, fitridyna1781@gmail.com****Abstract**

The quality of life of cervical cancer patients is influenced by physical, psychological, social, and spiritual factors. Problems such as fatigue, anxiety, therapy adherence, and lack of support from healthcare professionals can reduce their quality of life. This study aims to identify factors related to the quality of life of cervical cancer patients in order to improve more effective care. This study aims to analyze factors related to the quality of life of cervical cancer patients at Arifin Achmad Regional General Hospital, Pekanbaru. This study uses a quantitative design with a correlation design using a cross-sectional approach. The study sample consisted of 78 respondents taken by accidental sampling technique and used research instruments in the form of a quality of life questionnaire OERTC QLQ-CX24, spirituality (Spiritual Well Being Scale/SWBS), therapy adherence MMAS-8 (Morisky Medication Adherence Scale), and a checklist instrument for support from healthcare professionals. Data were analyzed using the chi-square statistical test. The results of the study showed a significant relationship between spirituality ($p = 0.024$), therapy adherence ($p = 0.018$), and support from healthcare professionals ($p = 0.012$) with the quality of life of cervical cancer patients. This research is expected to provide input for healthcare professionals in health promotion programs for women, helping them understand the importance of early cervical cancer detection. This will help women become more aware of their health and take the necessary steps to improve their understanding of the early symptoms of cervical cancer.

Keywords: Quality of Life, Cervical Cancer, Spirituality, Therapy Compliance, Health Professional Support

INTRODUCTION

Cervical cancer is one of the most common types of cancer among women worldwide and is the leading cause of cancer death in developing countries. The primary cause of cervical cancer (over 95%) is the Human Papillomavirus (HPV). HPV is a type of virus that can infect humans. The incidence of cancer is increasing due to population growth and aging, as well as the increasing prevalence of risk factors such as smoking, poor diet, physical inactivity, and reproductive changes (Legianawati et al., 2019).

Cervical cancer is one of the most common cancers among women worldwide and is the leading cause of cancer death in developing countries. According to the 2020 Global Burden of Cancer Study (Globocan), the global incidence of cervical cancer reached 604,127 cases, resulting in 341,831 deaths. In Indonesia, the prevalence of cervical cancer reached 36,633 cases, or approximately 9.2% of total cancer cases. Arifin Achmad Regional General Hospital, Riau Province, recorded an increase in the number of cervical cancer patients, from 1,053 cases in 2020 to 1,201 cases in 2023.

The longer a patient has cancer, the more likely they are to be diagnosed with the disease, resulting in a delay in recognizing symptoms, resulting in patients seeking treatment at an

advanced stage. The longer a patient has cancer, the more accustomed they become to the treatment and its side effects. Upon receiving their initial diagnosis, cancer patients experience physical and psychological reactions, including a tendency to remain silent, depressed, in denial, have difficulty eating, and experience sleep disturbances. This impacts their quality of life (Afiyanti et al., 2019).

The quality of life of cervical cancer patients can be influenced by various factors, including spirituality, adherence to therapy, and support from healthcare providers. Therefore, this study was conducted to determine the relationship between these factors and the quality of life of cervical cancer patients at Arifin Achmad Regional General Hospital, Riau Province.

Based on a preliminary study conducted by researchers through brief interviews with 10 respondents with cervical cancer on November 2, 2024, at Arifin Achmad Regional Hospital, Riau Province, 50% of those with cervical cancer reported experiencing physical decline and expressed symptoms such as nausea, fatigue, and social problems. 20% of patients stated that spiritual beliefs provided a sense of hope and calm during treatment. 30% of patients reported difficulties in undergoing therapy, including the treatment location being too far from home. Research (Prasetyo & Suprayitno, 2021). "Quality of Life Factors in Cancer Patients." This study involved 30 respondents for one month. The instrument used was the SF-36 questionnaire. The results showed that age, gender, marital status, occupation, education level, body mass index, cancer stage, and family support did not affect the quality of life of cancer respondents at PKU Muhammadiyah Hospital, Yogyakarta, with a p value > 0.05.

METHODS

The type of research is quantitative with a correlation research design with a cross-sectional approach. Correlation research where researchers will see whether there is a relationship between independent variables (Spiritual, Therapy Compliance, Support from Health Workers) with dependent variables (Quality of Life) which are carried out simultaneously at one time. The population in this study were Cervical Cancer patients at Arifin Achmad Hospital, Riau Province in October, totaling 351 patients. Based on the results of sample determination using the Slovin formula above, it can be concluded that the number of samples is 78 respondents. In this study, the data collection tool used was a demographic questionnaire containing respondent data including age, marital status, number of children, duration of suffering, stage and using a quality of life questionnaire (EORTC QLQ-CX24), a spiritual questionnaire (Spiritual Well Being Scale/SWBS), a therapy compliance questionnaire (MMAS-8), a Health Worker Support Questionnaire Checklist, using bivariate analysis with the Chi-Square test.

RESULTS

Tabel 1. Frequency Distribution of Respondent Characteristics at Arifin Achmad Regional Hospital, Riau Province

Respondent Characteristics	Frequency	Percentage (%)
Age:	12	15,4
26-35 (Early Adulthood)	36	46,2
36-45 (Late Adulthood)	25	32,1
46-55 (Early Seniors)	5	6,4
56-65 (Late Seniors)		

Marital Status		96,2
Married	75	3,8
Widowed	3	
Number of children		20,5
1	16	70,5
2-3	55	9,0
>3	7	
Duration of Suffering:	12	15,4
<1 year	65	83,3
1-4 years	1	1,3
<5 years		
Cancer Stage		
I	2	2,6
II	26	33,3
III	45	57,7
IV	5	6,4
Total	78	100

Based on the data from table 1 above, it can be seen that almost half of the respondents were in late adulthood, namely 36 people (46.2%), almost all respondents with married marital status were 75 people (96.2%), more than half of the respondents with 2-3 children were 55 people (70%), almost all respondents with a duration of suffering of 1-4 years were 65 people (83.3%), more than half of the respondents with stage 3 were 45 people (57.7%).

Table 2. Frequency Distribution of Factors Associated with Quality of Life of Cervical Cancer Patients at Arifin Achmad Regional Hospital, Riau Province

Kualitas Hidup	Frekuensi	Persentase %
Rendah	8	10,3
Sedang	48	61,5
Tinggi	22	28,2
Total	78	100,0
Spiritual	Frekuensi	Persentase %
Rendah	11	14,1
Sedang	28	35,9
Tinggi	39	50,0
Total	78	100,0
Dukungan Tenaga Kesehatan	Frekuensi	Persentase %
Kurang	9	11,5%
Cukup	21	26,9%
Baik	48	61,5%
Total	78	100,0

Based on the data from Table 2, quality of life can be seen that more than half of the respondents with moderate quality of life are 48 people (61.5%), spirituality can be seen that half of the respondents with high spirituality are 39 people (50.0%), therapy compliance can be seen that

almost half of the respondents with high therapy compliance are 31 people (39.7%), and support from health workers can be seen that more than half of the respondents said that support from health workers is good as many as 48 people (61.5%).

Table 3. Spiritual Relationship with Quality of Life of Cervical Cancer Patients at Arifin Achmad Regional Hospital, Riau Province

Spiritual	Kualitas Hidup						Total	%	P Value
	Rendah	%	Sedang	%	Tinggi	%			
Rendah	0	0,0	11	100,0	0	0,0	11	100,0	0,024
Sedang	5	17,9	14	50,0	9	32,1	28	100,0	
Tinggi	2	5,1	23	59,0	14	35,9	39	100,0	
Total	7	9,0	48	61,5	23	29,5	78	100,0	

Based on Table 3, the analysis of the relationship between spirituality and quality of life shows that 23 (59%) respondents with high spirituality had a moderate quality of life. Meanwhile, 14 (35.9%) respondents with high spirituality had a high quality of life. The statistical test results obtained a p-value of 0.024, thus concluding that there is a difference in the proportion of quality of life and spirituality (there is a significant relationship between spirituality and quality of life).

Table 4. Relationship between Therapy Compliance and Quality of Life in the Seruni Oncology Polyclinic, Arifin Achmad Regional Hospital, Riau Province

Kepatuhan Terapi	Kualitas Hidup						Total	%	P Value
	Rendah	%	Sedang	%	Tinggi	%			
Rendah	0	0,0	16	88,9	2	11,1	18	100,0	0,014
Sedang	4	10,8	25	67,6	8	21,6	37	100,0	
Tinggi	0	0,0	12	52,2	11	47,8	23	100,0	
Total	4	5,1	53	67,9	21	26,9	78	100,0	

Based on Table 4, the results of the analysis of the relationship between therapy adherence and quality of life showed that there were 25 (67.6%) respondents with moderate therapy adherence and moderate quality of life. Meanwhile, of respondents with low therapy adherence, there were 16 (88.9%) who had moderate quality of life. The statistical test results obtained a p value of 0.014, so it can be concluded that there is a difference in the proportion of quality of life and therapy adherence (there is a significant relationship between therapy adherence and quality of life).

Table 5. Relationship between Support from Healthcare Workers and Quality of Life in the Oncology Clinic of Seruni, Arifin Achmad Regional Hospital, Riau Province

Kualitas Hidup									
Dukungan Tenaga Kesehatan	Rendah	%	Sedang	%	Tinggi	%	Total	%	P Value
Kurang	0	0,0	9	100,0	0	0,0	9	100,0	0,012
Cukup	0	0,0	16	76,2	5	23,8	21	100,0	
Baik	8	16,7	23	47,9	17	35,4	48	100,0	
Total	8	10,3	48	61,5	22	28,2	78	100,0	

Based on Table 5, the analysis of the relationship between healthcare support and quality of life shows that 23 (47.9%) respondents with good healthcare support had a moderate quality of life. Meanwhile, 16 (76.2%) respondents with adequate healthcare support had a moderate quality of life. The statistical test results obtained a p-value of 0.012, thus concluding that there is a significant difference in the proportion of quality of life with healthcare support (there is a significant relationship between healthcare support and quality of life).

DISCUSSION

Age The majority of respondents were 36-45 years old (46.2%), which is considered a productive age and can affect their quality of life. Age plays a role in patient adaptation to the disease, as well as the social support received during treatment. **Marital Status:** The majority of respondents (96.2%) were married. Support from a spouse is considered important in improving patients' quality of life, both emotionally, socially, and financially. **Number of Children:** 42.3% of respondents have three children, which impacts the emotional and social support patients receive from their families. **Duration of Suffering:** Nearly half of respondents had had cervical cancer for two years (41.0%). Duration of disease can affect quality of life, especially in terms of adherence to therapy and adapting to treatment side effects. **Disease Stage:** The majority of respondents (57.7%) were in stage III, indicating that most patients have experienced advanced disease progression, which can impact various aspects of their quality of life.

Quality of Life: The results showed that the majority of respondents had a moderate quality of life (61.5%), while 10.3% had a low quality of life, and 28.2% had a high quality of life. Factors such as social support, therapy adherence, and support from healthcare professionals play a role in determining a patient's quality of life. **Spirituality:** Most respondents had a high level of spirituality (59.0%). Religious belief was considered a factor that provided inner peace and reduced anxiety in the face of illness. **Therapy Adherence:** Respondents with a high level of therapy adherence accounted for 39.7%. Adherence to therapy contributed to treatment effectiveness and improved patients' quality of life. **Healthcare Professional Support:** Most respondents (61.5%) felt they received good support from healthcare professionals, who played a role in improving patients' understanding of the disease and assisting them in therapy. **Relationship between Spirituality and Quality of Life**

The analysis showed a significant relationship between spirituality and quality of life in cervical cancer patients (p-value = 0.024). Patients with higher levels of spirituality tended to have a better quality of life because they were better able to cope with the stress and emotional

challenges of their illness. Relationship between Therapy Adherence and Quality of Life: There was a relationship between therapy adherence and quality of life (p -value = 0.014). Patients who were more adherent to therapy reported a better quality of life compared to those who were less adherent. The Relationship Between Healthcare Professional Support and Quality of Life The analysis results show a significant relationship between healthcare professional support and patient quality of life (p -value = 0.012). Good healthcare professional support contributes to improving patients' psychological and physical well-being.

CONCLUSION

This study aims to analyze factors related to the quality of life of cervical cancer patients. It is known that there is a significant relationship between spirituality and the quality of life of cervical cancer patients at Arifin Achmad Regional Hospital ($p=0.024$) ($p<0.05$). There is a significant relationship between therapy adherence and the quality of life of cervical cancer patients at Arifin Achmad Regional Hospital ($p=0.014$) ($p<0.05$). There is a significant relationship between support from health workers and the quality of life of cervical cancer patients at Arifin Achmad Regional Hospital ($p=0.012$) ($p<0.05$).

REFERENCES

- Afiyanti, Y., Wardani, I. Y., & Martha, E. (2019). The Quality of Life of Women with Cervical Cancer in Indonesia: A Cross-Sectional Study. *Nurse Media Journal of Nursing*, 9(2), 128–140. <https://doi.org/10.14710/nmjn.v9i2.26014>
- Legianawati, D., Puspitasari, I. M., Suwantika, A. A., & Kusumadjati, A. (2019). Management Profile of Stage IIB–IIIB Cervical Cancer with Radiation Therapy and Chemoradiation at Dr. Hasan Sadikin General Hospital, Bandung, 2015–2017. *Indonesian Journal of Clinical Pharmacy*, 8(3). <https://doi.org/10.15416/ijcp.2019.8.3.205>
- Prasetyo, D. Y., & Suprayitno, E. (2021). Quality of Life Factors in Cancer Patients. *Care: Scientific Journal of Health Sciences*, 9(2), 322–333. <https://jurnal.unitri.ac.id/index.php/care>
- Ayu, I. G., & Yohana, R. (2023). The Relationship between Health Worker Support and Women's Behavior in Early Detection of Cervical Cancer Using the IVA Method in the Work Area of Community Health Center II, West Denpasar.
- Christiyanty, C., Sulistyarini, W. D., & Sirait, Y. (2021). Phenomenological Study: Quality of Life of Women with Cervical Cancer in Physical Health Aspects. *Wiyata Nursing Journal*, 2(1), 91. <https://doi.org/10.35728/jkw.v2i1.442>
- Debby Anestiyah, M., Family Support, H., Wahyuni, R., & Health Ministry of East Kalimantan, P. (2022). The Relationship between Family Support and Spiritual Level on Quality of Life in Cervical Cancer Patients. *JIDAN Scientific Journal of Midwives*, 10(1), 2581–1029. doi: <https://doi.org/10.47718/jib.v10i1.1855>
- Fransisca, Y. M., & Adhistry, K. (2021). Analysis of Family Support in Addressing Problems in Cervical Cancer Patients. *Proceedings of the National Nursing Seminar*, 7(1), 116–123. <http://conference.unsri.ac.id/index.php/SNK/article/view/2384>
- Frianto, D., Arfania, M., Suwantika, A. A., Setiawanliya, D., & Diantini, A. (2024). Evaluation of Quality of Life in Cervical Cancer Patients at RSHS Bandung. 1(1), 99–105.
- Kaplan and Sadock in Cohen et al. (2019). Clinical psychiatry. In *Progress in neurology and psychiatry* (Vol. 9).

- Karim, U. N., Dewi, A., & Hijriyati, Y. (2021). Analysis of cervical cancer risk factors associated with quality of life in patients at RSIA Bunda Jakarta. *Nursing and Midwifery Science*, Binawan University, 1–61.
- Karmilah, Utami, T., & Ma'arifah, A. (2024). An Overview of Spiritual Needs in Cervical Cancer Patients. *Journal of Professional Nursing Research*, 6(4), 1729–1736. <https://www.jurnal.globalhealthsciencegroup.com/index.php/JPPP/article/view/2950>
- Putri, R. D., & S. B. (2021). The Relationship between Healthcare Professional Support and Quality of Life in Cancer Patients. *Indonesian Nursing Journal*, 14(3), 200–210.
- Rahmawati, A., Putri, M, S., & Prasetyo, H. (2022). The Effect of Healthcare Support on Anxiety Levels in Cervical Cancer Patients. *Journal of Public Health*, 15(2), 120–130.
- Rifa, A., & Gayatri, D. (2023). Spiritual Well-Being Can Improve Quality of Life in Cancer Patients. *Silampari Nursing Journal*, 6(2), 1880–1889. <https://doi.org/10.31539/jks.v6i2.5743>
- Rizka, A., Iskandar, & Akramah, S. (2023). Analysis of the Relationship between Education Level and Knowledge on Chemotherapy Adherence in Breast Cancer Patients at Cut Meutia General Hospital, North Aceh. *Journal of Human and Health Sciences*, 69–77.
- Saputra, A. A., Mahmudah, R., & Saputri, R. (2021). The Relationship between Chemotherapy Adherence and Quality of Life in Cervical Cancer Patients. *Journal of Nursing Invention*.