Families of Children with Cancer
Kourkouta Lambrini¹, Iliadis Christos²*, Monios Alexandros³, Frantzana Aikaterini²

¹Professor, Nursing Department, Alexander Technological Educational Institute of Thessaloniki, Greece
²RN, Nursing Department, Alexander Technological Educational Institute of Thessaloniki, Greece
³Biologist, 7th Gymnasium, Secondary Education of Athens, Greece

*Corresponding author
Iliadis Christos
Email: ch.liiadis@yahoo.gr

Abstract: Cancer is a systemic disease that appears in many different parts of the human body. Its route is different each time; it depends on its localization and cell differentiation. The purpose of this study is to highlight the impact of cancer on both families and children and show the methods of care provision for children and their families. It was extensively conducted a relevant recent literature review of electronic databases (PubMed, Google Scholar) and scientific magazines. The keywords that were used were: cancer, impact, family, and children. Exclusion criteria of articles were the language, except for Greek and English. Not only does the course of cancer have impact on patients, but also on patient’s family and friends. The way the patient’s family behaves and their emotions differ widely due to the trajectory of the illness. Cancer in children is no longer considered a disease closely connected with death. It is considered as a chronic illness. Nowadays, emphasis is placed on both child’s survival and quality of life. These objectives are present not only during child’s treatment but also after its completion. Children’s mental and psychosocial maturation is affected by cancer and its treatment. Thus, children’s education and social inclusion are hampered. The whole family has to face the changes that arise from the course of the disease and its symptoms along with the psychological and social changes that may arouse.

Keywords: Cancer, Impact, Family, Children.

INTRODUCTION
Cancer is a systemic disease that appears in many different parts of the human body. Its route is different each time and depends on its localization and cell differentiation. The different types of manifestations of the disease are relevant to the range of therapies used [1]. It is estimated that cancer is the second most common cause of death exceeded only by heart disease. Although cancer usually affects older people, there are some types of cancer that occur in the young and even in children.

Patients who suffer from cancer are not alone in experiencing their disease. The way that people close to those patients feel is important for two reasons. First and foremost, they know very little about the impact of cancer on them. However, they are the most important sources of patients’ support. In many cases, those people are responsible for a large proportion of care and support that is needed between therapeutic interventions and hospitalization. Secondly, the family has a major role in the patient’s treatment result via their actions and reactions [2].

Not only does the course of cancer have impact on patients, but also on patient’s family and friends. The way the patient’s family behaves and their emotions differ widely due to the trajectory of the illness [3].

It is possible that the impact of the disease on both the family and friendly surroundings may be an equally burdensome task with repercussion that are difficult to be identified and managed.

Relationships within the family are dynamic. The cancer diagnosis in a family member resonates through the social group. It might change the relations amongst its members due to cancer. These proceedings are influenced by the level of development that each person has reached. Furthermore, the cancer experience is influenced by other parameters such as the relationship that an individual has with the patient, the person’s general perceptions and the degree of understanding of cancer or stressful factors that are related to cancer [4].

Purpose
On the one hand, the purpose of this study is to highlight the impact of cancer on the family in general and on children in particular. On the other hand, this study is about to highlight the methods of care
provision for children that suffer from cancer and their families. It is remarkable that the family of the child that suffers from cancer has to deal with the difficult living conditions, health status of the child and the relapse of the disease.

**METHODOLOGY**

The study material was based on searching and reviewing the latest five-year related research studies and scientific articles that were extracted from international databases. The material used was also extracted from the Greek bibliography. The keywords that were used were: cancer, impact, family, and children. Exclusion criteria of articles were the language, except for Greek and English.

**GENERAL CANCER FACTS**

Cancer is a disease that could affect each and every tissue and organ in the human body. The origin of the word cancer is credited to the Greek physician Hippocrates. Hippocrates likened a spreading cancerous tumor to a crab’s figure (Cancer). Cancer is considered to be the result of a series of genetic changes which lead to a progressive disorder of the physiological mechanisms that control growth [5].

Most tumors are clonal and arise from a transformed cell. The evolution of the tumor is often the result of the sequence of acquired genetic changes in a neoplastic clone that leads to a subpopulation of tumor cells with increased aggressive characteristics [6].

Premalignant conditions that come from local phenomena involve lots of cells. As a secondary effect, it is very rare and involves a single cell. Cancer is not simply a local problem but a generalized condition. It should be also clear that cancer is associated with many predisposing and causative factors which may be of organic and psychological origin. It is essential treatment all the factors above be taken into account so as the treatment to be effective. The therapy must be holistic, comprehensive, multifaceted and complex [7].

Cancer: a) may be a hereditary disease when there is a preliminary mutation in gametons that is a predisposition to cancer. Cancer occurs when another relevant mutation takes place b) might be caused by a spontaneous mutation which is independent to the surroundings c) can be created by environmental factors (chemical substances, rays, viruses) that are able to change the human genome by causing mutations or either by adding or losing genetic material, and d) will be caused if there are some defects that promote spontaneous or induced mutation. Thus, the risk of carcinogenesis or tumorogenesis increases [8].

Nowadays, modern molecular techniques are used to direct both the diagnosis and prognosis of childhood cancer. Early diagnosis is a key factor in order the treatment to be successful. Initially, the treatment included radical surgical tumor resection and radiation. In the late 1960s cytostatics were introduced. So, it is obvious that the main treatments for cancer are: surgery, radiotherapy and chemotherapy. Regarding the latter, it has lots of side effects. There is continual research to reduce these side effects and produce a cytostatic drug which can be administered by the oral route. The results of bone marrow transplantations are encouraging [9].

**THE EFFECTS OF CANCER ON THE FAMILY**

Not only does the course of cancer have impact on patients, but also on patient’s family and friends. The way the patient’s family behaves and their emotions differ widely due to the trajectory of the illness. Cancer does not obstruct the psychological, mental and physical behavior of the family members that take care of the patient [3].

Therefore, the family has a vital role in providing patients with care and help regarding their medication and emotional support. What’s more, patients and their family members report significant problems that relate to their physical and emotional well-being. Additionally, the quality of family life is affected due to the patient’s care. At the same time, the family experiences numerous psychosocial problems [10].

It is noteworthy that the feeling and fear of family members that look after a patient with cancer is much greater than the patient’s fear. Nevertheless, a key factor in a patient who suffers from cancer is the family care. The greater the psychosocial support the patient receives from his/her family, the better quality of life he/she experiences. It is important the mental suffering of the families that care patients with cancer be taken into consideration [11].

The relationship between the mother and her daughter should be particularly mentioned. Although the psychological anguish that a mother of an adult daughter who suffers from cancer is greater, psychological distress towards her daughter is of similar importance [12].

Importantly, relationship intimacy of couples’ psychosocial adaptation to cancer is another parameter that ought to be taken into consideration. It is manifested that when there is an intimate relationship between spouses, the anxiety lowers [13].

Some caregivers cannot work properly while there is a chance that a small number of them may recourse to drugs, especially, when the caregiver is a husband or a male partner who feels a lot of anxiety or suffers from depression [10].

The caregiver’s age, sex and education has a significant role, since the caregivers’ rates of depression
are high when the patient finally dies. Thus, the distinct lack of information regarding breast cancer could burden the depression that the caregivers of cancer patients may experience. The patient, as well as his/her family may use the internet to find information about breast cancer [14].

**THE IMPACT OF CANCER ON CHILDREN**

Cancer in children is no longer considered a disease closely connected with the death. It is considered as a chronic illness. This change related to the qualitative nature of the disease requires a simultaneous change regarding the psychosocial care of the patient and his/her family. Nowadays, emphasis is placed on both child’s survival and quality of his/her life. These objectives are present not only during child’s treatment but also after its completion [15].

Childhood is a particularly vulnerable period for a kid. Therefore, cancer makes an impact on a child’s physical, emotional and social development. Children’s mental and psychosocial maturation is affected by cancer and its treatment. Thus, children’s education and social inclusion are hampered [16].

According to Eiser (2004), in the course of the disease, the children’s reactions are closely linked to those of their parents and siblings. Thus, psychosocial intervention won’t be effective if the whole family is not included in the planning and implementation stage. At the same time, it is essential that the intervention continue after the completion of treatment and be aimed at psychosocial rehabilitation of the child and family in order to be considered complete [15].

Both the direct and indirect impacts on the child who suffers from cancer must be early evaluated with particularity, discretion and insight. If these effects are not consistently dealt, the kid’s adaptation to illness and treatment is very difficult. Also, the emotional and cognitive development of the child is impaired. Simultaneously, the psychological rehabilitation of both the child and family is at stake. The groups of doctors, nurses, psychologists, social workers and spiritual healers must cooperate with each other so as the whole atmosphere of the child’s support to be characterized by trust, familiarity and safety [16].

The impact of cancer on the children’s mental sphere is an issue of significant importance which has been studied by physicians and psychologists for decades [17].

The first psychological needs for a child start with his/her concern about the illness itself. The child is also concerned about the future regarding both his/her illness and family. A kid might experience nervousness, sadness, fear, need to talk to someone, sense of loss etc. Children commonly have difficulties in adjusting to the disease and maintain their social relationships. They usually experience isolation, loneliness, feelings of rejection and problems regarding communication. Depression often passes unnoticed through oncology departments. This happens because depression itself makes patients unwilling to seek help or therapists consider depression as an inevitable situation or even depression itself doesn’t exist [18].

Additionally, parents play an important role in supporting their kid to overcome the disease and they are a part of the diagnostic stage and treatment. Nevertheless, the child needs his/her parents’ support to overcome this phase with the least possible psychological consequences that affect the child’s mental health [19].

**CHILDREN’S AND FAMILY’S DIFFICULTIES OF ADAPTATION**

Children who suffer from cancer experience greater psychological, emotional and learning difficulties than healthy peers. What’s more, the negative impact of the disease on the child and his/her family has multiple levels (psyche, conduct, sociability, relationship amongst family members) [20].

Besides, mothers of these children face troubles regarding social support. Additionally, parents and children themselves admit facing lots of difficulties in trying to control the effects of the disease during school hours. The side effects of drugs such as fatigue, teachers’ lack of information as regards students’ medication and finally, reduced student’s encouragement to take part in sports because of his/her illness are some of those difficulties that must be dealt with [21]. Particularly, fatigue is one of the most excruciating symptoms that children experience during their treatment for childhood cancer [22].

Caregiver mothers are overcome by fatigue and constant concern. There seem to be feelings of deep melancholy and contemplation of suicide amongst mothers who take care of children with cancer [23].

Furthermore, childhood cancer burdens either the mother’s or father’s labor, for their child’s disease requires long-term hospitalization. Therefore, the family faces lots of economic problems. Thus, it is vital these children be supported and strengthened as regards practical issues such as problem solving related to daily situations or routine. Social support of the family and family functioning are of major importance. The problems caused by cancer will be reduced if the therapeutic approach is focused on these dimensions [24].

**CONCLUSION**

Once the child is diagnosed with cancer, the family life would be much more stressful than before. It is only the beginning of an adjustment path for the
whole family. Not only do the child and his/her family have to deal with the changes that arise from the course and symptoms of the disease, but also the psychological and social changes that are due to emerge.

It is essential medical, psychological, educational and social services should be coordinated in order the provision of comprehensive care to be delivered at a medical and psychosocial level. The care provided to the child must be focused on the heart of the family due to the fact that the child shares the effects of his/her illness with family members [19].

Simultaneously, when health services and local authorities in which the family belongs to, work in close collaboration, the negative effects that make the child visit the hospital frequently are prevented. Also, ways of dealing with the risk factors regarding the child and his/her family are promoted.

REFERENCES