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# A STUDY TO ASSESS THE LEVEL OF ANXIETY AMONG PATIENTS WITH CANCER DURING EARLY AND LATER STAGE OF DIAGNOSIS AT CANCER HOSPITAL, AGARTALA, TRIPURA

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***Abstract***

*Anxiety has been defined as a reaction to a threat, and cancer is a very serious threat to a person's well-being and life itself. Persons with caner will find that their feelings of anxiety may increase or decrease at different times and stages of illness period. To assess the level of anxiety perceived by the patient with cancer during early stage of diagnosis. To assess the level of anxiety perceived by the patient with cancer during later stage of diagnosis. To compare the level of anxiety perceived by the patient with cancer during early and later stage of diagnosis. To associate the level of anxiety perceived by the patient with cancer during early and later stage of diagnosis and their selected demographic variables. A descriptive research design has been chosen. The patients with cancer during early and later stage of diagnosis admitted for treatment in cancer hospital, Agartala, Tripura. The samples of 100 patients, each group had 50 samples, were selected by non probability sampling methods. The tool used for the study consisted of Beck Anxiety Inventory. This study demonstrates an anxiety is common in cancer patient population. The levels of anxiety in both early and later stage of cancer diagnosis are more or less similar and require psychological support.*

***Keywords**: Anxiety perceived by patients, early stage of cancer patient, later stage of cancer patient.*

***Citation** : MrsAmita Roy"A study to assess the level of anxiety among patients with cancer during early and later stage of diagnosis at Cancer Hospital ,Agartala, Tripura ."*

## INTRODUCTION

Every human being is exposed to different kinds of situations in life. These situations cause disturbance in the mind and arouse different kinds of feelings. Anxiety will differ from one individuals to another and influence his/her behavior. Individual who suffer from cancer regard their lives as more stressful than do their healthy peers. There are more restrictions and limitation in their life, there is more pain and worry, and they have to put more effort in order to cope. Studies indicate that most of the cancer survivors cope with their every day life if they are provided with positive attitude towards life.

Anxiety is a normal reaction to cancer. One may experience anxiety while undergoing a cancer screening test, waiting for test results, receiving a diagnosis of cancer, undergoing cancer treatment, or anticipating a recurrence of cancer. Person with cancer will find that their feeling of anxiety increased or decreased at different times. A patient may become more anxious as cancer spreads or treatment becomes more intense. The level of anxiety experienced by one person with cancer may differ from the anxiety experienced by another person. Intense anxiety associated with cancer treatment is more likely to occur in patients with history of anxiety disorders and patients who are experiencing anxiety at the time of diagnosis.

The disease of cancer creates emotional reaction of fear, anxiety and depression. The rates of psychological distress are high, and similar across patients with both early and advanced stage in cancer, although the illness related causes of distress are different. Some persons may have already experienced intense anxiety in their life because of situations unrelated to their cancer. These anxiety conditions may recur or become aggravated by the stress of a cancer diagnosis.

**BACKGROUND**

Cancer afflicts all communities world wide, approximately 10 million people are diagnosed with cancer and more than 6 million die of the disease every year. In India, it is estimated that there are approximately 2 to 2.5 million cases of cancer at any given point of time, with around 1.5 million new cases being detected each year (Cancer Patient Aid Association, 2005). Anxiety in cancer survivors is attributed to fear of recurrence, additional treatment, and the potential for adverse effects. Anxiety is some times difficult to assess in the cancer survivor population. Recent studies of adults of different ages and with different cancer diagnosis have addressed psychological features and psychiatric symptoms, possible neurobiological factors associated with anxiety, coping and personal growth in cancer survivorship. Moderate to severe level of anxiety can interfere with patient's ability to concentrate and comprehend new information.

Anxiety associated with cancer may increase feeling of pain, interfere with one's ability to sleep, cause nausea and vomiting, and interfere with the patients and the family's quality of life. Some persons may have already experienced an intense anxiety in their life because of situations unrelated to their cancer. The anxiety conditions may recur or become aggravated by the stress of a cancer diagnosis. If left untreated, severe anxiety may even shorten the patient's life .Anxiety can be a part of normal adaptation to cancer. Recent studies indicated that 44% of patients with cancer reported severe anxiety, 23% reported significant anxiety (Cancer information on Medicine Net.com 2007). Anxiety reactions that are prolonged or unusually intense, can negatively affect quality of life and interfere with cancer patient's ability to function socially and emotionally. The numbers of new cancer patients increases and per year 1200 patients are diagnosed as new cases (Agartala Cancer Hospital, Tripura, 2005).

**AIM OF THE STUDY**

The aim of the patient study was to evaluate the level of anxiety among patients with cancer during early and later stage of diagnosis between 21-70 years of age.

**OBJECTIVES OF THE STUDY**

- To assess the level of anxiety perceived by the patient with cancer during early stage of diagnosis.
- To assess the level of anxiety perceived by the patient with cancer during later stage of diagnosis.
- To compare the level of anxiety perceived by the patient with cancer during early and later stage of diagnosis.
- To associate the level of anxiety perceived by the patient with cancer during early and later stage of diagnosis and their selected demographic variables.

**ASSUMPTION**

- Most cancer patients suffer from some kind of anxiety.
- Many factors are attributed to anxiety in cancer patients such as diagnosis, treatment, and recurrence.
- Receiving the therapy & family support play a significant role reduce anxiety.

**HYPOTHESIS**

1. H1: There is significant association between the level of anxiety and early stage of cancer.
2. H2: There is significant association between level of anxiety and later stage of cancer.

**OPERATIONAL DEFINITIONS**

**Anxiety**

Refers to emotional response experienced by patients related to fear of illness, treatment, and the potential adverse effect of therapy.

**Patient**

It refers to the person (male & female) between the age group of 21 – 70 years who are attending the cancer unit in Cancer Hospital, Agartala, Tripura.

**Early Stage of Cancer Patient**

All the patients who are diagnosed with cancer in the first stage, attending the Cancer Hospital, Agartala, and Tripura.

**Later Stage of Cancer Patient**

All the patients who are in the advance stage of cancer that is with metastasis to other organs attending Cancer Hospital, Agartala, and Tripura.

**CONCEPTUAL FRAME WORK**

The investigator adopted the modified conceptual framework based on Dorthy E. Johnson, Behavioral system model (1980). Johnson noticed that nursing care should be directed toward caring for the patient before, during, and after on illness to facilitate effective behavioral functioning and believes the four goals of nursing care to assist the person.

Johnson believes that both the internal and external environments of the overall behavioral system need to be orderly and predictable to maintain balance. If subsystems are out of balance, 'anxiety' and disequilibrium result. Nursing as part of the external environment, can help the patient return to a state of balance.

**DELIMITATION**

The study is delimited to cancer patient who are;

- Attending and admitted in cancer hospital Agartala.

**METHODOLOGY**

**Research Approach**: a quantitative descriptive research approach was chosen for the present study.

**Research Design:** Non experimental research design.

**Variables:** According to Polit and Hunglar (1999), "A variable is the name implies something that varies. A variable is any quality of an organization, situation that takes different values". Variable is an attribute of an person that varies and it takes on different values.

**Research Variable:** Research variable include anxiety among patient with cancer during early and later stage of diagnosis.

**Demographic Variable:** Demographic variable in the study are age, sex, religion, education, occupation, monthly income, area of living, marital status and family status.

**Setting of the study:** The study was conducted in the Cancer Hospital, Agartala, Tripura.

**Population:** The populations for the study were both male and female clients between the age group of 21 to 70 years, in the early and later stage of cancer attending the Cancer Hospital in Agartala, Tripura, during the time of data collection.

**Sample Size:** A sample size of 100 patients with early and later stage of cancer between 21-70 years of age, who were admitted in cancer ward of Cancer Hospital, Agartala, Tripura were included in the study.

**Sampling Technique :** In this study investigator used non probability convenient sampling technique in which convenient sampling method was used to draw the sample.

**CRITERIA FOR SELECTION OF SAMPLE**

**Inclusion criteria for patients**

- All the patient who were diagnosed with cancer in the first stage i.e. localized cancer was considered as early stage in cancer.
- All the patient who were in the advance stage i.e. with metastasis to other organ was considered as later stage in cancer.
- Patients in the age group of 21-70 years who were admitted in Cancer Hospital, Agartala, Tripura.
- Patients who were able to communicate in Bengali and English.

**Exclusion Criteria**

- Patients who were very chronically ill and were admitted in Cancer Hospital Tripura.
- Patients who were in the age group of below 21 years of old and above 70 years of age admitted in Cancer Hospital, Agartala, Tripura.
- Patients who were not willing to participate in the study.

**Selection and development of Tool**

The following steps were carried out while preparing te tool:

- Review of literature
- Based on expert opinion
- Consultation with the guide, co-guide
- Investigators personal opinion

**Selection of Tool**

A standardized Back Anxiety Inventory with demographic data was selected for the study to collect he data from early and later stage of cancer patient to asses their anxiety level.

**Development of the tool**

The following steps were carried out in preparing the tool:

a) Preparation of Socio demographic data.
b) Standardized Back Anxiety Inventory (BAI) was used to asses the anxiety.
c) Consultation with guide and co-guide, subject expert, psychiatrist.
d) Establishment of validity and reliability.

**Ethical Consideration**

1) Permission was obtained from the Research Committee of S,R.M. College of Nursing.
2) Permission was obtained from the Ethical Committee of S.R.M. College.
3) Permission for pilot and main study was taken from the concern authority of selected area.
4) Written consent was taken from the subject.

**Data Collection Procedure**

- Permission from the concern authority.
- Period of data collection.
- Semi structure interview schedule.

**Plan for data analysis**

The plan of data analysis areas follows:

- Organization of data in master sheet.
- Personal data were analyzed in terms of frequency and percentages.
- The anxiety level of cancer patient during early and later stage of diagnosis were analyzed in terms of frequency, percentage, mean, median, standard deviation were presented in the forms of different graphs and chart.
- Chi-square is used to make comparison of level of anxiety between early and later stage.
- Paired‘t’ test. one way Anova test, chi-square test is used to associate the level of anxiety with selected demographic variables.

**Descriptive Statistics**

Frequency and percentage were used in the study, the demographic variables of early and later stage of cancer patient such as age, sex, religion, education, Occupation, income, area of living, marital status, family status were described by frequency and percentage distribution.

Means and Standard deviationwere used to determine the level of anxiety between early and later stage of cancer patient.

**Inferential Statistics**

- Chi-square test is used to make comparison of mean anxiety between early and later stage of cancer patient.
- Paired ‘t’ test, Chi-square test, Anova test was used to associate the level of anxiety with selected demographic variables in both early and later stage of cancer diagnosis patient.

**RESULT**

**Section 1: Description of the demographic variables of patient with cancer in early and later stage:**

Among hundred cancer patient (15 early and 15 later stage, majority 15(30 %) to 61-70 years, 12% were 21-30 years 20 % were 31-40 years, 24% were 41-50 years, 40 % were 51-60 years of age in early stage.In the later stage among the 50 cancer patient 42 percent belongs to 61 -70 years, 4% percent were 21-30 years, 12 % percent were 31-40 years, 14 % were 41-50 years, 28% were 51-60 years of age group.

Regarding sex, 56% of the patients are male and 44% were female in early stage and 70% of the patients are male and 30 % were female in later stage.

Considering the religion, 92% in Hindu, 4% in Christian and 4% Muslim in early stage cancer patients. In the later stage 84% were Hindu, 6% were Christian and 10% were Muslim.

Regarding education, in early stage majority 42% were primary, 34% were uneducated, 12 % were High school, 4% were higher secondary and 8% were graduate. In the later stage, both uneducated and primary education equals to 36%, 22% were High school, 4% were higher secondary and 2% were graduate.

On analysis of occupation, in the early stage majority 34% were unemployed, 22% were labour, 18 % were Govt. employee, 6% were private employee and 20% were business. In the later stage majority 40% were labour, 24% were unemployed, 18% were Govt. employee, 2% were private employee and 16% were business.

Considering the income per month, in the early stage patient majority 32% were >Rs.3000, 22% were below Rs.1000, 26% were Rs.1001-2000, 20% were Rs. 2001-3000 in income. In the later stage majority 32% were Rs.1001-2000, 30% were below Rs. 1000, 20% were Rs. 2001-3000, 18% were above Rs.3000.

On analysis of residence, in the early stage patients majority 66% were rural, 26% were urban and 8% were semi urban. In the later stage majority 68 % were rural, 12% were urban and 20% were semi urban.

Considering the marital status, in the early stage majority 94% were married, 2% were unmarried and 4% were widow. In the later stage, majority 86% were married, 2% were unmarried and 12 % were widow.

Regarding the family status, in the early stage, majority 60% were nuclear and 40% were joint family. In the later stage, majority 56% were joint family and 44% were nuclear.

**Section 2**

1.1 Assessment of level of anxiety among patients with cancer in early stage.

1.2 Assessment of level of anxiety among patients with cancer in later stage.

**1.1 Distribution of level of anxiety perceived by early and later stage of cancer patient.**

**Table – 1:Anxiety score in early stage cancer patients.**

N = 50

| Anxiety Score | | Frequency | Percentage |
|---|---|---|---|
| Level of Anxiety | Low anxiety (0-21) | 37 | 74.0% |
| | Moderate anxiety (22-35) | 11 | 22.0% |
| | High anxiety (> 36) | 2 | 4.0% |

This table reveals the anxiety score in early stage cancer patients on level of anxiety. The early stage cancer patients with different anxiety score. 37(74%) had low anxiety, 11 (22%) had moderate anxiety and 2 (4%) had high anxiety score.

**1.2 Distribution of level of anxiety among patients with cancer in later stage**

**Table – 2:Anxiety score in later stage of cancer patients.**

N = 50

| Anxiety Score | | Frequency | Percentage |
|---|---|---|---|
| Level of Anxiety | Low anxiety (0-21) | 34 | 68.0% |
| | Moderate anxiety (22-35) | 14 | 28.05 |
| | High anxiety (> 36) | 2 | 4.0% |

This table depicts the anxiety score in later stage cancer patients on level of anxiety. The later stage cancer patients with different anxiety score 34(68%) had low anxiety levels, 14(28%) had moderate anxiety and 2(4%) had high anxiety score.

**Section 3: Comparison between level of anxiety perceived by earlyand later stage of cancer patient**

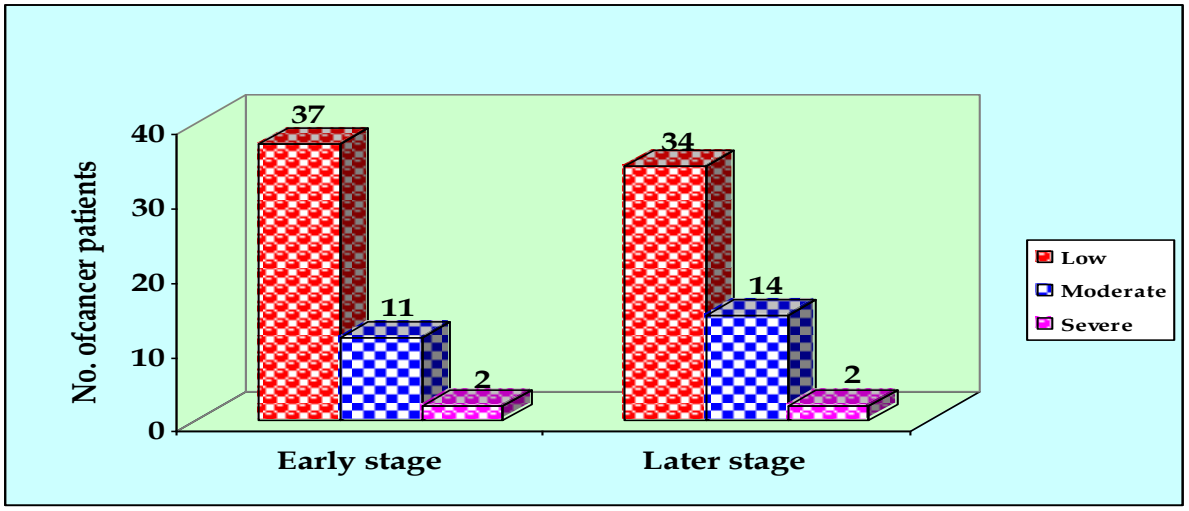


**Fig. 1: – Bar diagram represented Frequency distribution of sample in relation to Beck Anxiety inventory Score Comparison**

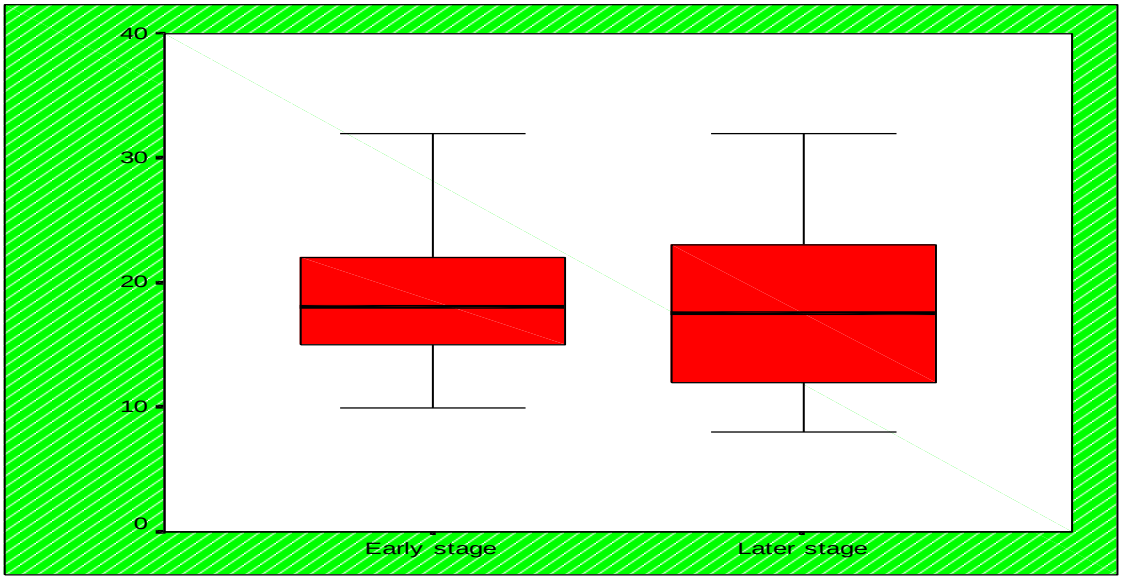


*Fig 2: Comparison of Mean Anxiety score between Early stage and Later stage cancer patients*

**Section 4: Association between demographic variables and anxiety level of early and later stage of patients with cancer.**

**Comparison between level of anxiety perceived by early and later stage of cancer patient.**

**Table – 3:Stage of the disease & anxiety score.**

N=100

| Group | Anxiety Score | | | | | | |
|---|---|---|---|---|---|---|---|
| | Low Anxiety (0-21) | Moderate Anxiety (22-35) | High anxiety > 36 | Significance | Mean | Std. Deviation | Significance |
| Early Stage (50) | 37(74%) | 11(22%) | 2(4%) | Chi-square $X^2$=0.49 P=0.78 Not significant | 19.82 | 7.093 | Student independent 't' test t=0.75 p=0.45 Not significant |
| Later Stage (50) | 34(68%) | 14(28%) | 2(4%) | | 18.66 | 8.287 | |
| Total | 71 | 25 | 4 | | | | |

**Association between demographic variables and anxiety level of early and later stage of cancer patient**

**Table – 4 : Association between age and anxiety score.**

**N = 100**

| Group | Age | N | % | Mean | Std. Deviation | One way ANOVA F-test |
|---|---|---|---|---|---|---|
| Early stage (50) | 21-30 yrs | 6 | 12% | 15.83 | 2.994 | |
| | 31-40 yrs | 10 | 20% | 17.83 | 5.812 | F=2.95 |
| | 41-50 yrs | 12 | 24% | 18.00 | 5.149 | P=0.03 |
| | 51-60 yrs | 7 | 14% | 19.14 | 9.118 | significant |
| | 61-70 yrs | 15 | 30% | 24.53 | 7.624 | |

| | | | | | | |
|---|---|---|---|---|---|---|
| | Total | 50 | | 19.82 | 7.093 | |
| Later stage (50) | 21-30 yrs | 2 | 4% | 14.17 | 2.828 | F=3.01 P=0.03 significant |
| | 31-40 yrs | 6 | 12% | 15.57 | 3.189 | |
| | 41-50 yrs | 7 | 14% | 19.00 | 5.503 | |
| | 51-60 yrs | 14 | 28% | 19.07 | 7.671 | |
| | 61-70 yrs | 21 | 42% | 20.67 | 10.209 | |
| | Total | 50 | | 18.66 | 8.287 | |

**Table 5 : Association between Sex and Anxiety score.**

| Group | Sex | N | % | Mean | Std. Deviation | Student t-test |
|---|---|---|---|---|---|---|
| **Early stage (50)** | **Male** | **28** | **56%** | **20.07** | **7.216** | **t=1.30 P=0.28 Not significant** |
| | **Female** | **22** | **44%** | **19.50** | **7.090** | |
| **Later stage (50)** | **Male** | **35** | **70%** | **19.06** | **9.010** | **t=1.30 P=0.28 Not significant** |
| | **Female** | **15** | **30%** | **17.73** | **6.475** | |

**Table – 6: Association between Educational status and Anxiety score.**

| Group | Education | N | % | Mean | Std. Deviation | One way ANOVA F-test |
|---|---|---|---|---|---|---|
| Early stage | Uneducated | 17 | 34% | 20.76 | 7.102 | F=1.17 P=0.33 Not significant |
| | Primary | 21 | 42% | 21.10 | 7.609 | |
| | High school | 6 | 12% | 17.83 | 7.139 | |
| | Higher secondary | 2 | 4% | 15.00 | 1.414 | |
| | Graduates | 4 | 8% | 14.50 | 1.915 | |
| | Total | 50 | | 19.82 | 7.093 | |
| Later stage | Uneducated | 18 | 36% | 19.28 | 7.843 | F=1.30 P=0.28 Not significant |
| | Primary | 18 | 36% | 21.17 | 10.268 | |
| | High school | 11 | 22% | 14.45 | 4.108 | |
| | Higher secondary | 2 | 4% | 16.00 | 2.828 | |
| | Graduates | 1 | 2% | 14.00 | . | |
| | Total | 50 | | 18.66 | 8.287 | |

**Table – 7: Association between Occupational status and Anxiety score.**

| Group | Occupation | N | % | Mean | Std. Deviation | One way ANOVA F-test |
|---|---|---|---|---|---|---|
| Early stage | Unemployed | 17 | 34% | 20.18 | 7.100 | F=0.31 P=0.86 Not significant |
| | Labour | 11 | 22% | 21.55 | 9.678 | |
| | Govt. employee | 9 | 18% | 18.67 | 7.649 | |
| | Private employee | 3 | 6% | 19.67 | 8.083 | |
| | Business | 10 | 20% | 18.40 | 2.503 | |
| | Total | 50 | | 19.82 | 7.093 | |
| Later stage | Unemployed | 12 | 24% | 16.83 | 5.921 | F=0.33 |

| | | | | | | |
|---|---|---|---|---|---|---|
| | Labour | 20 | 40% | 19.50 | 9.838 | P=0.86 |
| | Govt. employee | 9 | 18% | 19.44 | 8.904 | Not significant |
| | Private employee | 1 | 2% | 24.00 | . | |
| | Business | 8 | 16% | 17.75 | 7.667 | |
| | Total | 50 | | 18.66 | 8.287 | |

**Table – 8: Association between Income status and Anxiety score.**

| Group | Income | N | % | Mean | Std. Deviation | One way ANOVA F-test |
|---|---|---|---|---|---|---|
| Early stage | <Rs.1000 | 11 | 22% | 19.18 | 6.047 | F=0.60 P=0.61 Not significant |
| | Rs.1001-2000 | 13 | 26% | 21.77 | 8.955 | |
| | Rs.2001-3000 | 10 | 20% | 20.40 | 6.433 | |
| | >Rs.3000 | 16 | 32% | 18.31 | 6.690 | |
| | Total | 50 | | 19.82 | 7.093 | |
| Later stage | <Rs.1000 | 15 | 30% | 18.93 | 6.840 | F=1.29 P=0.26 Not significant |
| | Rs.1001-2000 | 16 | 32% | 15.69 | 6.008 | |
| | Rs.2001-3000 | 10 | 20% | 19.60 | 5.967 | |
| | >Rs.3000 | 9 | 18% | 22.44 | 14.001 | |
| | Total | 50 | | 18.66 | 8.287 | |

**Table 9: Association between Area of Living and Anxiety score.**

| Group | Area of Living | N | % | Mean | Std. Deviation | One way ANOVA F-test |
|---|---|---|---|---|---|---|
| Early stage | Urban | 13 | 26% | 17.62 | 4.426 | F=1.37 P=0.27 Not significant |
| | Rural | 33 | 66% | 21.00 | 8.051 | |
| | Semi urban | 4 | 8% | 17.25 | 2.630 | |
| | Total | 50 | | 19.82 | 7.093 | |
| Later stage | Urban | 6 | 12% | 20.33 | 12.501 | F=0.13 P=0.87 Not significant |
| | Rural | 34 | 68% | 18.41 | 8.410 | |
| | Semi urban | 10 | 20% | 18.50 | 5.061 | |
| | Total | 50 | | 18.66 | 8.287 | |

## DISCUSSION

**The study attempted to interpretation of findings in order of objectives: -**

**1) The first objectives was to assess the level of anxiety perceived by the patient with cancer during early stage of diagnosis.**

According to Beck-anxiety inventory score, the table 2 early stage cancer patient data analysis showed that 37(74%) had low anxiety (0-21), 11 (22%) had moderate anxiety (22-35), 2(4%) had high anxiety (>36).

**2) The second objectives was to assess the level of anxiety perceived by the patient with cancer during later stage of diagnosis.**

According to Beck anxiety inventory score, in table 3 later stage cancer patients data analysis showed

that 34(68%) had low anxiety (0-21), 14(28%) had moderate anxiety (22-35), and 2 (4%) had high anxiety (>36).

**3)The third objective was to compare the level of anxiety perceived by the patient with cancer during early stage and later stage of diagnosis.**

The table 4 showed that in early stage 37(74%) had low anxiety (0-21) and incase of later stage 34(68%) had low anxiety. Increase of early stage 11(22%) had moderate anxiety and in later stage 14(28%) had moderate anxiety.

High anxiety in both early stage and later stage of cancer patient had 2(4%). The anxiety score are same. The mean scare of anxiety in early stage are 19-82 and standard deviation are 7.093. In case of later stage the mean score of anxiety had 18.66 and standard deviation are 8.287. Early-stage patients are having slightly higher anxiety score than later stage cancer patients. But the difference is not statistically significant by student independent 't' test.

**4) The fourth objectives was to associate the level of anxiety perceived by the patient with cancer during early and later stage of diagnosis and their selected demographic variables.**

The association between age and anxiety score of cancer patient in early and later stage, shows there is a statistically significant association between age and level of anxiety. Moderate and high anxiety score is more in above age group of patients. Age increases their anxiety score also increases in both early and later stage patients.

There is no significant association between the other demographic variables and levels of anxiety in early and later stage of cancer patient like sex, educational status, occupational status, income, area of living.

The overall findings of the study showed that cancer patient in both early and later stage of diagnosis period having similar level as anxiety score.

**Major Finding of the study:** Major findings of the study were summarized as below:

**Findings related to demographic proforma of early stage of cancer:**

- Among hundred cancer patient (15 early and 15 later stage, majority 15(30 %) to 61-70 years, 12% were 21-30 years 20 % were 31-40 years, 24% were 41-50 years, 40 % were 51-60 years of age in early stage.
- Regarding sex, 56% of the patients are male and 44% were female in early stage.
- Regarding education, in early stage majority 42% were primary, 34% were uneducated, 12 % were High school, 4% were higher secondary and 8% were graduate.
- On analysis of occupation, in the early stage majority 34% were unemployed, 22% were labour, 18 % were Govt. employee, 6% were private employee and 20% were business.
- Considering the income per month, in the early stage patient majority 32% were >Rs.3000, 22% were below Rs.1000, 26% were Rs.1001-2000, 20% were Rs. 2001-3000 in income.
- On analysis of residence, in the early stage patients majority 66% were rural, 26% were urban and 8% were semi urban.
- Considering the marital status, in the early stage majority 94% were married, 2% were unmarried and 4% were widow.

- Regarding the family status, in the early stage, majority 60% were nuclear and 40% were joint family.

**Findings related to demographic proforma of later stage of cancer**

- In the later stage among the 50 cancer patient 42 percent belongs to 61 -70 years, 4% percent were 21-30 years, 12 % percent were 31-40 years, 14 % were 41-50 years, 28% were 51-60 years of age group.
- In the later stage 70% of the patients are male and 30 % were female.
- In the later stage 84% were hindu, 6% were Christian and 10% were Muslim.
- In the later stage, both uneducated and primary education equals to 36%, 22% were High school, 4% were higher secondary and 2% were graduate.
- In the later stage majority 40% were labour, 24% were unemployed, 18% were Govt. employee, 2% were private employee and 16% were business.
- In the later stage majority 32% were Rs.1001-2000, 30% were below Rs. 1000, 20% were Rs. 2001-3000, 18% were above Rs.3000.
- In the later stage majority 68 % were rural, 12% were urban and 20% were semi urban.
- In the later stage, majority 86% were married, 2% were unmarried and 12 % were widow.
- In the later stage, majority 56% were joint family and 44% were nuclear.

**Findings related to distribution of level of anxiety among patients with cancer in early stage:**
The results shows the in early stage of cancer diagnosis out of 50 sample, 74% had low anxiety, 22% had moderate and 4% had high anxiety. In early stage cancer patient showed 26% moderate to high anxiety.

**Findings related to distribution of level of anxiety among patients with cancer in later stage:**
Regarding the later stage of cancer diagnosis out of 50 sample, 68% had low anxiety, 28% had moderate and 4% had high anxiety. the later stage had 32% of moderate to high anxiety level.

**Findings related to Comparison between level of anxiety perceived by early and later stage of cancer patient.**
The comparison between level of anxiety perceived by early and later stage of cancer patients. 37(74%) had low anxiety in early stage and 34(68%) had low anxiety in later stage. 11(22%) had moderate anxiety in early stage and 14 (28%) had later stage. Both early and later stage patients had 2(4%) in high anxiety score.

Mean score of early stage patients was 19.82 and later stage was 18.6. Standard deviation in early stage patients was 7.093 and later stage patients was 8.287.

The table shows there is no significant associated between stage of the disease and level of anxiety score both in chi-square test and student independent ‘t’-test
It is proved by p value $p > 0.05$.

**Findings related to association between age and anxiety score:**
ANOVA values calculated the association between age and level of anxiety among the patients with

cancer in early and later stage of diagnosis. In early stage cancer patients with cancer age group of (21-30) years has mean anxiety score 15.83 and age group (61-70) years has mean anxiety score 24.53. In later stage cancer patients age group of (21-30) years has mean anxiety score 14.17 and (61-70) years age group has mean anxiety score 20.67. mThere is a statistical significant association between age and anxiety in both early and later stage of cancer patient. Level of anxiety is high in above age group in compared to young age group. It is applicable in both early and later stage of cancer patient. There is no significant association between level of anxiety with their, sex, religion, education, occupation, income and area of living, marital status and family status.

## CONCLUSION

Anxiety is common in cancer patient population. This study demonstrated that the levels of anxiety in both early and later stage of cancer diagnosis are more or less similar. Moderate and height anxiety score is more in above age group as patients in both early and later stage of cancer patients. Study suggests that psychological support is necessary for both early and later stage of cancer diagnosis individuals.

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