

Systematic Review of the Present Situation and Effect of Psychological Resilience Intervention for Tumor Patients

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Abstract: Tumors are a major life-threatening stress event that causes serious physical and mental trauma to patients, reducing their quality of life. However, some people also adapt well to the same negative events. With the development of positive psychology, psychological resilience has gradually become a research hotspot. This article analyzes the psychological resilience intervention for cancer patients. Committed to exploring the influencing factors and mechanisms of psychological resilience, there are relatively few intervention studies that truly attempt to improve the level of psychological resilience, and there is a lack of practical and recognized specific intervention methods to effectively improve psychological resilience. The possible reason for this may be that patients with low psychological resilience scores cannot demonstrate good psychological adaptability when facing stress conditions such as gynecological malignancies, surgery, and chemotherapy. They cannot alleviate emotions such as denial and fear by strengthening communication with others, and pay too much attention to the discomfort and consequences caused by the disease, resulting in a pessimistic prognosis.

1. Introduction

At present, due to the aggravation of environmental pollution and the change of people's lifestyle, the incidence of tumors is rising, which greatly affects people's life safety. Chemotherapy, as an effective treatment, will also produce side effects such as nausea and vomiting, which will affect the quality of life of patients. This disease is usually incurable, and it can only help to prolong life through chemotherapy, so the patient's psychological condition is easily affected, and it is prone to negative emotions such as anxiety [1]. Tumor is a life-threatening major stress event. It causes serious trauma to patients' body and mind and reduces their quality of life, but some people adapt well to the same negative events. With the development of positive psychology, resilience has gradually become a research hotspot. Resilience refers to the ability of individuals to withstand high-level destructive changes and show as few bad behaviors as possible [2]. Studies have shown that patients who face the diagnosis of tumor diseases with a good attitude and state generally have good psychological resilience. Therefore, if patients can keep their psychology and spirit in a good and stable state, their quality of life will be higher [3-4]. It is very important to give psychological nursing intervention in time. The purpose of this study is to suggest that it is of high value to apply

psychological nursing intervention to tumor patients receiving radiotherapy in clinic through qualitative research methods [5]. Psychological nursing takes psychological theory as the guidance of the whole work in practice, and the basis is the need to establish a good nurse-patient relationship and make full use of skills and methods to help improve patients' bad psychological state and bad behavior, thus promoting rehabilitation [6]. To comprehensively explain the content of psychological experience and psychological needs of cancer patients. Committed to exploring the influencing factors and mechanism of psychological resilience, but there are relatively few intervention studies that really try to improve the level of psychological resilience, and there is a lack of operational and recognized specific intervention methods to effectively improve psychological resilience [7]. To provide a basis for the subsequent psychological support of tumor patients, tumor patients are in a special state of physical and mental stress, and they are high-risk groups of psychological problems such as anxiety, depression and insomnia [8]. Attention should be paid to screening patients' mental health problems, timely psychological intervention, strengthening psychological and drug treatment when necessary, and strengthening patients' family and social support to improve their psychological resilience and coping ability, so as to promote patients' physical and mental recovery and improve their quality of life [9-10].

2. Materials and methods

2.1. General information

80 patients with malignant tumor who received radiotherapy in our hospital from November 2020 to December 2022 were selected, and all the clinical data were retrospectively analyzed. Based on whether psychological care was carried out, they were divided into control group and observation group, with 40 patients in each group. In the control group, the ratio of male to female is 21:17, the oldest is 80 years old and the youngest is 20 years old, with an average of 47.35 years old. There are 10 cases of head tumor, 13 cases of stomach cancer, 5 cases of lung cancer, 8 cases of liver cancer and 4 cases of breast cancer respectively. The ratio of male to female in the observation group was 20:18, with the oldest being 78 years old and the youngest being 21 years old, with an average of 46.44 years old. There were 10 cases of head tumor, 13 cases of gastric cancer, 5 cases of lung cancer, 9 cases of liver cancer and 3 cases of breast cancer respectively. Comparison of data between groups ($P > 0.05$).

2.2. Method

The control group used routine nursing, that is, treatment nursing, disease management, medication nursing and so on. Based on this, the observation group increased psychological care, because the psychological scale and measurement indicators used in each experiment are very different, it is impossible to quantitatively synthesize the effects of these intervention measures on psychological resilience by Meta-analysis. Therefore, qualitative methods are used to systematically summarize the information and results included in the literature. First, psychological resilience intervention measures are summarized, and the specific contents of different interventions are described, and then the effects of intervention implementation are described respectively. Although some progress has been made in the research of psychological resilience intervention for cancer patients, most of the research is still in the exploratory stage. This paper combs the intervention research status of psychological resilience of tumor patients. Qualitative research on systematic evaluation of psychological experience of tumor patients, the methods are as follows.

① Psychological state analysis

Before radiotherapy, nurses need to accurately evaluate the patient's actual condition,

psychological status and family status, communicate with them, establish a good nurse-patient relationship, and help vent their bad emotions correctly through heart-to-heart talks. Most cancer patients have bad psychological state. In view of the bad psychology, corresponding psychological care should be taken, that is, those with anxiety are mainly caused by patients' poor understanding of cancer for a long time and poor tumor treatment effect, which easily leads to anxiety, nervousness, fear and other psychology. At this time, responsible nurses need to cooperate with their families in time, give certain psychological support, care more about patients and take careful care to help patients improve their confidence in treatment, so as to improve the degree of treatment cooperation.

② implementation of psychological nursing

During the period of radiotherapy, psychotherapy should also be used rationally to help improve negative emotions; After admission, patients need to carry out health knowledge education according to the stage, and introduce the rules and regulations of the hospital and the professionalism of the staff. According to the analysis of the above psychological state, it is found that patients have different psychological States, so targeted nursing intervention is needed to improve the nursing effect.

After completing radiotherapy, nurses need to comfort them in time, correct their misconceptions, do a good job in education, make them understand the effectiveness and purpose of chemotherapy, and play soothing music and movies to help divert their attention, thus alleviating negative emotions. According to the examination results, targeted guidance should be given, such as those with leukopenia, which can guide patients to eat more foods that can enhance their immune system, go to public places as little as possible, and strengthen their own protection to prevent infection when going out; For those with anemia, guide the diet structure and remind patients to wear makeup when going out.

3. Result

3.1. Comparison of psychological status scores

The intervention subjects included in the study were all tumor patients, ranging from 14 to 200 cases. The implementers of psychological intervention are psychology professionals who ensure the normal implementation of intervention measures through training before implementing them. The psychological scores of paranoia, terror, depression, and other factors in the observation group were higher than those in the control group (P values<0.05), as shown in Table 1.

Table 1: Comparison of psychological status scores

Group	Number of cases	Time	Paranoia	Terror	Depressed
Observation group	40	Before intervention	2.13 ±0.77	2.19 ±0.81	2.08 ±0.78
		After intervention	0.89 ±0.31	0.76 ±0.25	0.74 ±0.18
Control group	40	Before intervention	2.09 ±0.75	2.13 ±0.77	2.11 ±0.75
		After intervention	1.23 ±0.68	1.16 ±0.65	1.03 ±0.58

3.2. Comparison of quality of life

After intervention, the scores of physical function, social function, material biology, and psychological function in the observation group were higher than those in the control group (P values<0.05). As shown in Table 2.

Table 2: Comparison of Quality of Life Scores

Group	Number of cases	Physical functioning	Social function	Material life	Psychological function
Observation group	40	86.23±10.23	86.98±10.41	84.23±11.12	81.23±11.25
Control group	40	70.25±11.23	74.26±11.45	72.58±11.85	75.23±11.85

4. Discussion

Tumor is a common disease that has a serious impact on patients' lives and physical health. At present, radiation therapy is commonly used for tumors, but radiation therapy drugs can increase adverse reactions, coupled with the influence of other factors, making tumor patients prone to negative psychological states such as anxiety, fear, hostility, etc., which affect treatment and prognosis. Therefore, it is very important to scientifically cooperate with psychological care in tumor radiotherapy. Adverse psychological factors can have an impact on the immune function of patients, thereby promoting the further development of malignant tumors. When their psychological condition improves, they can view each treatment issue correctly and objectively, maintain a good attitude, actively cooperate with the entire treatment and nursing work, and also help establish a good nurse patient relationship. This article summarizes the current status of intervention research on psychological resilience in cancer patients. Researchers should summarize and analyze the current situation of psychological resilience intervention in tumor patients. They must also systematically evaluate qualitative research on the psychological experience of tumor patients, explore new ideas for tumor psychological rehabilitation research, and provide a solid theoretical and reference basis for psychological resilience intervention in tumor patients. The possible reason for this may be that patients with low psychological resilience scores cannot demonstrate good psychological adaptability when facing stress conditions such as gynecological malignancies, surgery, and chemotherapy. They cannot alleviate emotions such as denial and fear by strengthening communication with others, and pay too much attention to the discomfort and consequences caused by the disease, resulting in a pessimistic prognosis.

The intervention methods and content adopted are consistent with group psychological counseling. Group counseling is a form of psychological counseling that utilizes the power of the group and various psychological counseling techniques in the context of the group, enabling group members to become self-aware and self-help, achieving the goal of eliminating symptoms, improving adaptation, and developing healthy personalities. Clinical nursing staff should not only pay attention to the physiological status of postoperative chemotherapy patients with gynecological malignant tumors, but also pay attention to their psychological status. During each admission period of patients undergoing chemical therapy, a psychological resilience scale can be used to measure their psychological resilience level, and patients with low psychological resilience levels can be selected. According to patients' psychological characteristics, psychological activity rules, etc., and based on psychological problems, a series of psychological intervention plans are carried out to affect patients' psychological cognition and feelings, so as to change their psychological state and behavior, so that patients can adapt to treatment in a short time and improve the treatment effect. Patients with low levels of psychological resilience can be predicted by clinical nurses to have poor quality of life, and communication with doctors should be strengthened to pay attention to the patient's psychological condition. The reasons for the low psychological resilience level of patients can be investigated and analyzed through various forms such as observation, interviews, and questionnaire surveys, and targeted intervention measures can be actively taken. It is suggested that patients have different needs during different treatment stages, and it is possible to mobilize their caregivers and family members to participate in the patient's psychological development. The intervention time can be extended from the hospital until after discharge.

5. Conclusions

To sum up, at present, there are limited psychological resilience intervention tests for all kinds of people in China, and the overall quality is not high, which has some limitations, such as small sample size, limited intervention objects and single intervention methods. This paper combs the intervention research status of psychological resilience of tumor patients. Medical researchers and psychologists should summarize and analyze the intervention status of tumor patients' psychological resilience. They should also systematically evaluate the qualitative research of tumor patients' psychological experience, and explore new ideas of tumor psychological rehabilitation research, so as to provide a certain theoretical basis and reference for tumor patients' psychological resilience intervention. The psychological resilience and quality of life of patients undergoing chemotherapy after tumor surgery are in the middle level, and they are significantly positively correlated. Medical staff should pay attention to the level of psychological resilience of patients and take targeted intervention measures to improve their psychological resilience, thus improving their quality of life. For patients with malignant tumor who receive radiotherapy, psychological nursing intervention can effectively improve their psychological status, so as to maintain a good attitude and actively cooperate with the treatment. A rigorous and high-quality psychological resilience intervention experiment is designed, and various psychological interventions are considered, such as the combination of group psychological training and timely individual psychological counseling. While evaluating the immediate effect of intervention, the long-term effect after intervention is further tracked. Future research can further expand the sample size, extend the observation time, and measure it in combination with qualitative research to reflect the psychological resilience level of patients from many angles.

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