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# The use of spiritual practice in the treatment of cancer person pain

Or use of spiritual practice does not treatment of pessoas com câncer

O uso da prática espiritual no tratamento da dor de pessoas com câncer

## ABSTRACT

**Objective:** To identify whether cancer patients use spiritual practice to cope with the physical pain caused by cancer and what spiritual strategies are used. **Method:** This is a cross-sectional and descriptive study, conducted at a referral hospital for chemotherapy treatment and a cancer support center, located in southern Bahia, between August and September 2019. For the collection, a questionnaire was used, with sociodemographic variables and questions about spirituality. **Results:** Most people pursued spiritual strategies: prayer, bible reading, attending mass/worship, hymns of praise, lighting candles, praying the rosary, meditation, and having faith in physicians and God. **Conclusion:** The use of spiritual practice is a strategy used by people with cancer who participated in the study to relieve the physical pain caused by the disease, and that such a strategy reduces pain.

**DESCRIPTORS:** Neoplasms; Cancer Pain; Spirituality.

## RESUMEN

**Objetivo:** Identificar si los pacientes con cáncer utilizan la práctica espiritual para hacer frente al dolor físico causado por el cáncer y qué estrategias espirituales se utilizan. **Método:** Este es un estudio transversal y descriptivo, realizado en un hospital de referencia para tratamiento de quimioterapia y un centro de apoyo para el cáncer, ubicado en el sur de Bahía, entre agosto y septiembre de 2019. Para la recolección, se utilizó un cuestionario con variables sociodemográficas y preguntas sobre espiritualidad. **Resultados:** La mayoría de las personas siguieron estrategias espirituales: oración, lectura de la Biblia, asistir a misa/adoración, himnos de alabanza, encender velas, rezar el rosario, meditar y tener fe en los médicos y en Dios. **Conclusión:** El uso de la práctica espiritual es una estrategia utilizada por personas con cáncer que participaron en el estudio para aliviar el dolor físico causado por la enfermedad, y que dicha estrategia reduce el dolor.

**DESCRIPTORES:** Neoplasias; Dolor de Cáncer; Espiritualidad.

## RESUMO

**Objetivo:** Identificar se os pacientes com câncer utilizam a prática espiritual no enfrentamento da dor física causada pelo câncer e quais são as estratégias espirituais utilizadas. **Método:** Trata-se de estudo transversal e descritivo, realizado em um hospital de referência em tratamento quimioterápico e uma casa de apoio a pessoas com câncer, localizados no sul da Bahia, entre agosto e setembro de 2019. Para a coleta foi utilizado um questionário com variáveis sociodemográficas e perguntas acerca da espiritualidade. **Resultados:** A maioria das pessoas realizavam estratégias espirituais: oração, leitura da bíblia, ir à missa/culto, hinos de louvor, acender velas, rezar o terço, meditação e ter fé nos médicos e em Deus. **Conclusão:** O uso da prática espiritual é uma estratégia utilizada pelas pessoas com câncer que participaram do estudo para o alívio da dor física causada pela doença, e que tal estratégia reduz a dor.

**DESCRIPTORIOS:** Neoplasias; Dor do Câncer; Espiritualidade.

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**INTRODUCTION**

**N**eoplasms represent the second cause of mortality in Brazil, because of this cancer is a condition surrounded by fears and uncertainties<sup>(1)</sup>. Faced with the prospect of end of life, people with cancer may go through stages in their process of accepting the disease: denial (does not believe in exams and in the health team); anger (has feelings of anger, revolt, and resentment); bargain (makes promises for life extension or reduction / cessation of pain or physical ailments); depression (feels sadness combined with other feelings); acceptance (accepts the disease and treatment)<sup>(2)</sup>.

In this context, cancer is seen as a condition that is associated with suffering and death, so at the time of diagnosis, people are faced with negative feelings (affliction, anxiety, depression, hopelessness and aggression), this context needs to reduce the emotional overload, using coping strategies to obtain psychic rebalancing<sup>(3)</sup>.

Among coping strategies, it is common for cancer patients to adopt religious and spiritual strategies to deal with stress, to relieve suffering and improve hope. Although distinct, spirituality and religiosity are interconnected, since spirituality consists of the human being's search for the meaning of life, contemplating aspects related to nature, culture, society, among others; religiosity is characterized by the segment of norms and doctrinal principles defined by an entity, with attitudes of devotion, belief and effort to live religiously<sup>(4)</sup>.

Spirituality helps people in vulnerable conditions to survive with pain and everyday situations, by reframing the experiences they live<sup>(5)</sup>. From the context of the theme, the following guiding questions were listed: Does spirituality appear as a

**Among coping strategies, it is common for cancer patients to adopt religious and spiritual strategies to deal with stress, to relieve suffering and improve hope.**

strategy for coping with physical pain in cancer patients? What spiritual practices are used? The aim of this study was to identify whether cancer patients use spiritual practice to cope with physical pain caused by cancer and what spiritual strategies are used.

**METHODOLOGY**

This study is an excerpt from the project entitled "Spirituality in coping with pain in cancer patients" approved by the Research Ethics Committee of the State University of Santa Cruz, under opinion No. 3,022,500 through CAAE 01564218.2.0000.5526. This is a cross-sectional and descriptive study, carried out in a reference hospital for chemotherapy treatment and a support house for people with cancer, located in southern Bahia, between August and September 2019.

The study population in the hospital were people admitted with a diagnosis of cancer and, in the support house, it was people undergoing cancer treatment who were staying during the collection period. The inclusion criteria were people diagnosed with cancer, aged 18 years or older, who reported the diagnosis of cancer and who agreed to participate in the study by signing the Informed Consent Form (ICF). The exclusion criteria were absence of current or past pain, diagnosis of mental illness and impossibility or difficulty in communication.

For the collection, a questionnaire with sociodemographic variables and questions about spirituality was used (Did your religiosity interfere in coping with your disease?; Do you do any spiritual practice? If so, which one?; Do you think your spiritual practice reduces pain? caused by the disease?), which was applied by two trai-

ned nurses. The people admitted to the hospital were interviewed individually in bed, and in the support house they were approached during educational activities and directed to the interview.

The data were entered and analyzed using the Statistical Package for the Social Sciences software, version 21.0. Descriptive analysis was performed, with absolute and relative frequencies being calculated.

## RESULTS

About the 60 people with cancer selected, 39 were excluded for not meeting the study criteria, of which 17 did not present current or past pain, 14 did not report a cancer diagnosis and 8 were unable or unable to communicate at the time of collection. Thus, 21 people were included, noting that there was a predominance of females and the average age presented was 51.1 years. Regarding marital status, 12 (57.1%) reported not having a partner, 13 (61.9%) lived at home with one to two people and 11 (52.4%) had family income of one to three salaries.

Regarding the clinical profile, 05 (23.8%) had breast cancer, 03 (14.3%) in the cervix, 02 (9.5%) in the lung, 02 (9.5%) in the stomach, 02 (9.5%) on the head and neck, 02 (9.5%) on the esophagus, 01 (4.8%) on the prostate, 01 (4.8%) on the bladder, 01 (4.8%) on the ear, 01 (4.8%) in the rectum and 01 (4.8%) multiple myeloma.

Regarding the religious profile, 20 (95.2%) the people had religion and, of these, 10 (50%) declared themselves Catholic, 09 (45%) evangelical and 01 (5%) Jewish. It was found that most patients reported that religiosity helped them cope with cancer 18 (58.7%). As for spirituality, most people performed spiritual strategies 20 (95.2%), namely: prayer, reading the bible, going to mass/worship, hymns of praise, lighting candles, praying the rosary, meditation and having faith in doctors and God. Among people who carried out spiritual strategies, 16 (80%) stated that spirituality reduced the physical pain caused by cancer.

**Spiritual practice in the treatment of pain in people with cancer was presented as a strategy capable of reducing the physical pain caused by cancer in the study population. Spirituality occurs through faith, which is related to the hope of comfort, it is a source of support that makes it possible to believe in something positive, reducing anxiety and fears<sup>(6)</sup>.**

## DISCUSSION

Spiritual practice in the treatment of pain in people with cancer was presented as a strategy capable of reducing the physical pain caused by cancer in the study population. Spirituality occurs through faith, which is related to the hope of comfort, it is a source of support that makes it possible to believe in something positive, reducing anxiety and fears<sup>(6)</sup>.

Faith is an inner process that may or may not contain a religious search<sup>(7)</sup>. In this study, only one person reported not having a religion. Most people with cancer use religion as a coping tool, especially in adverse situations, religion is a necessary item to improve living with cancer, relieve the impacts caused and improve knowledge<sup>(8)</sup>. The disease and the proximity to death call people to approach a higher being in search of a cure, the treatment is no longer an exclusively medical assignment, and starts to be directed to a magical cure, related to religion<sup>(9)</sup>.

Religiosity helped in coping with cancer for most of the participants in this research, who besides being dealing with the disease, had the pain related to cancer as an aggravation. Pain is present in approximately 30% of people with cancer, being considered the fifth vital sign, therefore its periodic evaluation is essential, in order to offer adequate conditions for the management of the disease and guarantee the quality of life of patients<sup>(10)</sup>.

Pain management goes beyond pharmacological measures, spirituality being a strategy used by many patients, particularly those with serious illnesses, and patients depend on it as a positive coping mechanism<sup>(11)</sup>. Spirituality was used by most participants in this research, being reported as a relevant tool capable of reducing physical pain caused by cancer.

According to Sousa et al<sup>(12)</sup>, people with cancer resort to spirituality to find a meaning for this illness experience, since it activates the transmitters triggering a feeling of well-being, improves the immune system, reduces stress and anxiety. Spirituality occurs

through activities that seek to strengthen the meaning of life, faith or existential components, peace with oneself and with others, grouped with the term spiritual strategies<sup>(13)</sup>.

The findings of the present study, regarding the use of spiritual strategies, confirm the idea that they support and transmit strength to people. As in Arrieira et al<sup>(14)</sup>, faith in God and reading the bible were used as a spiritual practice in this study. Faith represents a driving force, acting as a positive point in coping with the disease, has the ability to explain what seems to be inexplicable during adverse situations and the difficult and sad moments experienced by illness<sup>(15)</sup>.

The main or second coping strategy used to deal with pain is prayer, as revealed in studies of Koenig<sup>(16)</sup> and Rippentrop<sup>(17)</sup>. The effectiveness of the prayer, through a Christian prayer without invocation of saints or sanctities, proved to be positive in reducing anxiety of cancer patients undergoing chemotherapy, for which the researchers used the quotation from salm 138 of the Holy Bible as an intervention, that deals with divine omniscience: God knows everything and sees everything<sup>(18)</sup>.

Religiosity and spirituality are effective practices that help resignify the trajectory of people with cancer, relieving suffering in difficult and stressful situations<sup>(7)</sup>. Thus, the religious/spiritual as-

pects must be understood by health professionals in the face of the illness process of a person with cancer.

## CONCLUSION

The findings of the present study corroborate the knowledge about the use of spiritual practice in people with cancer, as they show that spirituality is a strategy used by people with cancer to relieve physical pain caused by the disease, and that this strategy reduces pain. In this study, spirituality was linked to religiosity, since the spiritual strategies predominantly used by people with cancer studied were of a religious character. ■

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