

Wives of many prostate cancer sufferers made ill or feel undermined by the disease

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Many wives of advanced prostate cancer sufferers feel that their lives are being undermined by their husband's illness, with nearly half reporting that their own health suffered. In addition a focus subgroup has revealed that many feel isolated and fearful, and worry about the role change in their lives as their husband's cancer advances. This study, developed with the wives of men with metastatic prostate cancer who were being treated with hormone therapy, is amongst the first carried out on how prostate cancer affects the partners of sufferers. It was presented yesterday at the EAU conference in Copenhagen.

Prostate [cancer](#) is the most common male cancer. Prostate cancer which metastasises to other parts of the body is often difficult or impossible to cure, and so is often treated with [androgen deprivation therapy](#) (ADT), which slows down the tumour growth. ADT shuts down production of the hormone testosterone, but that leads to fatigue, frailty, and loss of sexual drive. The effects of [prostate](#) cancer and its treatment have been extensively studied in men, but there is almost no work on how this affects their partners.

A team of Danish researchers from Herlev and Gentofte University Hospital, led by registered nurse Jeanne Avlastenok and Dr. Peter Østergren, have been working with the wives and partners of men who had been undergoing exercise therapy to maintain body strength and resilience during [prostate cancer treatment](#). They questioned 56 [women](#) on how the cancers were affecting the lives of their husbands. Nearly half of these women (26 women, i.e. 46%) reported that their partner's

health problem had affected their own health.

The researchers randomly selected 8 women for in-depth, focus-group style interviews – aimed at encouraging the women to express how they are being affected by their partner's illness.

"We worked with the women as a group, encouraging them to be open about what they felt in a supportive group environment", said Jeanne Avlastenok.

"Three of the women – those with early stage disease – were less burdened than the others, but the remaining five expressed some significant concerns.

Many felt increasingly socially isolated. Their husbands were fatigued both by the illness and by the treatment, which meant that they couldn't socialize as a couple, which made the women feel cut off from social support".

Sample Comment: "Because he sleeps so much we do not visit the family or our friends and do not have many guests" said one.

RN Jeanne Avlastenok continued, "They also gradually developed a real fear of being alone, even within the relationship. They felt that they had to be strong, which meant that they couldn't share the burden of the illness.

The last theme which worried the women was over the role change in their relationship. As their men became less able to fulfil their usual roles, the women had to undertake tasks which had previously fallen to the men. Many of these are simple tasks but for the women they represented a sea change in the way their lives were structured".

Sample Comment: 'We have 22 windows and my husband thinks that he still can polish them and also do all the gardening. But nothing happens and he doesn't want me to arrange professional help'

All of the women were worried that their husbands would develop significant pain as the disease progressed.

The team stresses that the focus group findings is very much qualitative work on a small sample. "But in any study, you need to do the qualitative work before moving to any larger sample", said Dr. Peter Østergren, "We needed to let the women express their concerns first, so we can understand which questions to ask

Commenting, Professor Hein van Poppel (Leuven, Belgium), EAU Adjunct Secretary General for Education, said:

"Many [prostate cancer](#) patients have a hard time, both physically and emotionally, and this work shows that this stress can spill over and affect wives and partners. This is good for neither of them. Good mental and emotional health needs to be part of how we judge a treatment, and we need to try to ensure that both patients and their partners get the support they both need".

Provided by European Association of Urology

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