



**FORECAST QUALITY OF LIFE IN CONNECTION WITH PERFECTIONISM AND
PERCEIVED STRESS IN CANCER PATIENTS**

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ABSTRACT

The main purpose of this research is predicting the quality of life based on perfectionism and perceived stress in cancer patients. So among the referred cancer patients to a cancer doctor's office in the Shiraz city in 2015, 150 person (75 women and 75 men) with Cancer purposive were selected by sampling method and the samples were evaluated using a quality of life questionnaire (sf-36), Frost Multidimensional Perfectionism questionnaire, questionnaire of Perceived Stress Cohen et al (2014). The obtained data were analyzed using single variable and multi variable regression and MANOVA regression method, and the results showed that: Concern variables over mistakes and parental expectations from components variable of perfectionism can predict physical health are part of the variable component of quality of life in cancer patients. The components worry about mistakes, personal standards and practices vary doubt about perfectionism, are able to predict mental health and quality of life for cancer patients. From the other hand, perceived stress variable in the analysis carried out, can predict the quality of life of cancer patients. In this study it was found that the life quality of cancer does not differ between men and women

Keywords: quality of life, perfectionism, perceived stress, cancer

INTRODUCTION

Cancer and cell differentiation is a disorder that can occur at any age and in any tissue of the body and cause serious illness and death by attacking the body's tissues (Fotokian et al. 2008). However, today cancer is not synonymous with death imminent, many studies in Western countries and some Asian countries has shown that such diagnostic cause severe emotional problems and emotional to be patient and his family. Studies have shown that between 50 and 85 percent of cancer patients simultaneously suffer from a psychiatric disorder. The most common psychiatric disorders in these patients, according to studies, adjustment disorders such as adjustment disorder with depressed emotional sub groups and with anxiety and stress associated (Mesy, 2009). Other observations and studies have shown that both symptoms and the main complaint, suffered depression and anxiety in patients with cancer (Fotokian, et al, 2008). According to the World Health Organization, health is one of the indicators of development. Psychological health is one of the aspects of the overall concept of health as well as health concept has multiple definitions the variations can result from differences in the definitions of the various approaches in psychology and different beliefs to authors a variety of

factors which are related to mental health Or in some cases due to the results of some studies achieved. According to the definition of mental health, mental health is a state of well-being and recovery, in which each the person can realize their potential abilities, coping with stress and routine of life the fruitful and productive to work and to play an effective role in the community where it belongs (World Health Report, 2001). The role of coping strategies on how health psychology places great importance on physical and mental health strategies coping as mediator between stress and disease are known. One of the variables that deal extensively studied in the context of Health Psychology was identified as a significant mediator to deal effectively forms of stress - disease, Frontline Research in this area is allocated In general, much of the research results as the most effective medium of emotional stress - illness have introduced stress diseases orbit and worsening public health in those observed The continuous use of emotional coping. Avoidant coping as a short-term strategy is efficient, but in the long run to prevent compromise psychological distress and symptoms like depression increase, in the process of coping, (the model of Folkman and Lazarus, 1999), Cognitive skills can be used to solve a problem. Even

with the use of problem-focused coping style came from the cognitive skills to solve a problem. The way to deal with the problem directly check. Accordingly, picked usually find a way solutions for the problem of psychological satisfaction is achieved dynamism in common coping strategies. The circuit is known. Dynamics necessary facilities to deal with the stressful situation to the puts the person. This person's full potential for positive coping and problem solving calls and increase his chances of success. Thus, efficient strategies to cope by increasing self confidence, their problem-solving skills improved and leads to more satisfaction. Other features of coping efficient problem-oriented use, Low stress levels. Low levels of emotional stress causes the individual mental relaxation in the shade better cognitive skills and dynamism to tackle issues of use and therefore achieve satisfaction. On the other hand denial and inaction both those who use emotion-oriented dysfunctional coping style they deny to avoidance behavior and inaction in the face of stressful situation stressful situation the inability to use one's capabilities and potential leads initiative. With this style counter the problem remains unresolved, resulting in increased dissatisfaction. Characteristics and consequences of their denial and inaction

counter dysfunctional emotional stressful situations by reducing the individual's self-esteem problems and grievances adds) Ghazanfari and Ghadam Poor, 2008). In addition to a lot of stress on the individual and family cancer that does not affect the quality of life for all people. Quality of life is one of the most important issues facing the world today and the major issues in the development of social policy is that issues such as welfare, health-focused quality of life, basic needs, growing and satisfying life, altruism and self-sacrifice among communities included) Karimi, 2013). Given the importance of the quality of life for people, trying to promote the principles and priorities of the main social planners and policy makers, managers and government officials in each community and country. It is safe to say all programs, policies and operations executive in a community in order to improve the quality of life of the community) Karimi, 2013). Raise the living standards of the modern world, in this stuck with the disease, especially cancer and incurable diseases is an important issue that makes people the cost, time and energy to overcome their problem. Raise the living standards of the modern world, in the throes of dealing with the disease, especially cancer and incurable diseases is an important issue that makes the of the cost, time and energy to solve

this problem too. Perfectionism is a personality trait that psychologists believe that many of the affected environment a person grows and its objectives are formed and the individual feathers And if not for various reasons, internal or external person to his will lead to mental disorders, anxiety, stress and depression and psychosomatic problems (Ghorbani, 2006). Perfectionism and its effect on human behavior throughout history as a whole and especially the theory of motivation theorists extensively by psychologists psychology approach, is discussed. However, that perfectionism has a long history, but little empirical research has been done to study these structures. However, evidence of individual differences in the tendency to perfectionism, there are many, but the most important features of perfectionism, an ambitious, ambitious, ambiguous and non-accessible and extreme efforts to achieve these goals (Najarian and Khodarhmi, 2007). Psychologists perfectionism associated with several psychiatric disorders assessed at the same time have a high prevalence of psychiatric disorders,

especially depression and anxiety with chronic physical illness has been reported (Pour Afkari, 2006).

Therefore, this study tries to predict the quality of life in cancer patients with perfectionism and stress in check. Therefore, this study tries to predict the quality of life in cancer patients with perfectionism and stress in check.

RESEARCH METHODOLOGY

The study was descriptive and correlation studies that examined the predictive quality of life associated with perfectionism and perceived stress in cancer patients studied.

The population of subjects

The study population included all patients with cancer of the city. Number of samples 150 (75 cancer patients and 75 normal) and the sampling was targeted and conducted research in many physicians' offices, cancer was.

Using a demographic questionnaire was completed by cancer patients results in relation to marital status, education level and other diseases, as well as the following tables are obtained.

Demographics

Table 1: Participants age

More than 60 years	41to 60 years	21to 40 years	Less than 20 years	Man
9	12	30	19	Female
2	13	37	18	Sum
11	25	67	37	Man

Measuring tool

1. Quality of Life Questionnaire

Quality of life is the removal of any person from their health status and

satisfaction of this condition (Hamidi Zadeh et al., 2008). The World Health Organization quality of life, one's perception of his

position in life in the context of culture and value system in which he lives knows in relation to the goals, expectations, standards and concerns he (Shah et al., 2011).

2. Frost Multidimensional Perfectionism Scale (FMPS)

Frost Multidimensional Perfectionism Scale in 1990 by Frost and colleagues based on multi-dimensional model of perfectionism was built. Multidimensional Perfectionism model that was introduced in 1990 by Frost and co-workers consists of six components.

3. Perceived Stress Scale

Perceived Stress Scale by Cohen and colleagues developed in 1983 and has 3 versions of 10, 4 and 14, a substance that is common to measure perceived stress in the past month is used.

STATISTICAL METHODS AND DATA ANALYSIS

Information and extracted data using two methods of descriptive and inferential statistics were used. That the descriptive statistics of mean and standard deviation and inferential statistics to analyze the data obtained The main hypothesis of regression and multivariate and MANOVA simultaneous application within 18 - SPSS was used.

Table 1: Total value scores, mean, standard deviation, minimum and maximum variable component of quality of life, perceived stress, perfectionism and for all subjects

Maximum	At least	standard deviation	Average	Total	Variable name	Row
315	20	51/55	170/42	23859/77	physical health	1
270/5	59/5	43/37	173/03	24224/5	mental health	2
117	37	12/44	86/02	12044	Perfectionism (total score)	3
38	9	4/75	26/37	3693	Concern over mistakes	4
18	4	2/92	12/82	1795	Doubts about actions	5
21	5	2/95	14/2	1989	Parental expectations.	6
17	4	2/49	11/99	1679	Parental criticism	7
29	11	3/48	20/62	2888	Personal standards	8
25	6	3/53	18/35	2570	Organization	9
46	13	5/63	29/82	4175	Perceived stress	10

Table 2: Total amount and average scores, the components of quality of life variables, perfectionism and stress Perceived differentiated by gender subjects

Women (70)		Men (70)		Variable name	Row
Average	Total	Average	Total		
166/47	11653/1	174/38	12206/67	physical health	1
169/76	11883/66	176/29	12340/84	mental health	2
82/27	5759	89/78	6285	Perfectionism (total score)	3
25/51	1786	27/24	1907	Concern over mistakes	4
12/47	873	13/17	922	Doubts about actions	5
13/55	949	14/85	1040	Parental expectations.	6
11/44	801	12/54	878	Parental criticism	7
19/28	1350	21/97	1538	Personal standards	8
17/95	1257	18/75	1313	Organization	9
29/61	2073	30/02	2102	Perceived stress	10

Table 3: results of the correlation coefficient between the variables

10	9	8	7	6	5	4	3	2	1	And variable row
									1	1-health
								1	0/576**	2. Mental health
							1	-0/072	0/047	3. Perfectionism (total score)
						1	0/807**	-0/202*	-0/184*	4. worry about mistakes
					1	0/408**	0/706**	0/185*	0/254*	5. doubts about actions
				1	0/566**	0/565**	0/799**	0/094	0/174*	6. The expectations of parents
			1	0/404**	0/400**	0/328**	0/640**	-0/032	0/198*	7. parental criticism
		1	0/440**	0/468**	0/357**	0/462**	0/740**	-0/194*	-0/083	8. personal standards
	1	0/401**	0/366**	0/515**	0/620**	0/403**	0/608**	-0/098	0/204*	9. Organization
1	0/115	-0/104	-0/027	0/01	0/052	-0/087	-0/053	0/283**	0/293**	10. perceived stress

< 0/01P ** ; < 0/05 P * : Hypothesis 1: perfectionism, the quality of life in cancer patients predicts.

Table 4: Multivariate linear regression analysis to predict physical health by variable Perfectionism and its components

dF	F	R ²	P (Sig)	t	B	Predictor variables	Criterion variable
5	7/92	0/199	0/0001	7/28	143/39	Constant	physical health
			0/057	1/91	3/56	Doubts about actions	
			0/297	1/04	1/54	Organization	
			0/085	1/73	3/08	Gary's parents	
			0/0001	-5/11	-5/21	Concern over mistakes	
			0/043	2/04	3/76	Parental expectations	

Table 5: Multivariate linear regression analysis to predict mental health by changing perfectionism and its components

dF	F	R ²	P (Sig)	t	B	Predictor variables	criterion variable
3	8/56	0/159	0/0001	9/18	218/35	Constant	Mental Health
			0/007	-2/75	-2/33	Concern over mistakes	
			0/025	-2/27	-2/55	Personal standards	
			0/0001	4/12	5/38	Doubts about actions	

H2: Perceived stress, variable quality of life in cancer patients predicts.

Table 6: univariate linear regression analysis to predict physical health by changing perceived stress

dF	F	R ²	P (Sig)	t	B	Predictor variables	criterion variable
1	12/98	0/086	0/0001	3/99	90/33	Constant	physical health
			0/0001	3/6	2/68	Perceived stress	

Table 7: univariate linear regression analysis to predict mental health by changing perceived stress

dF	F	R ²	P(Sig)	t	B	Predictor variables	criterion variable
1	11/97	0/08	0/0001	5/66	108/1	Constant	Mental Health
			0/001	3/46	2/17	Perceived stress	

Hypothesis 3: There is a difference between the quality of life for cancer patients, male and female.

Table 8: Effect of Pillay and Wilks Lambda effect on Hetelling and the largest root

Statistical power	Significance level	F	Value	
0/132	0/602	0/51	0/007	Pillay effect
0/132	0/602	0/51	0/993	Lambda Wilkes
0/132	0/602	0/51	0/007	Hotelling effect
0/132	0/602	0/51	0/007	The largest root

Table 9: multivariate analysis of variance to investigate the differences in the quality of life for cancer patients, male and female

Statistical power	Significance level	F	average of squares	sum of squares	Degree of freedom		References
1	0/0001	1527/86	4066347/31	4066347/31	1	physical health	quality of life Group
1	0/0001	2224/66	4191618/29	4191618/29	1	mental health	
0/147	0/36	0/82	2188/85	2188/85	1	physical health	Intergroup (error)
0/143	0/37	0/79	1492/93	1492/93	1	mental health	
			2661/46	367282/12	138	physical health	References quality of life Group
			1884/15	260013/58	138	mental health	
				4435818/3	140	physical health	
				4453124/8	140	mental health	

CONCLUSIONS

As the first hypothesis is that perfectionism, the quality of life in cancer patients predicts. According to the results, it is clear that a significant component worry about mistakes ($P=0.0001$) and parental expectations with significance level ($P=0.034$) is be part of the variable component of the health of the quality of life in cancer patients to predict. Perfectionism is a personality trait that psychologists believe that many of the affected environment a person grows and its objectives are formed and the individual feathers And if not for various reasons, internal or external person to his will lead to mental disorders, anxiety, stress and depression and psychosomatic problems (Ghorbani, 2006). Perfectionism and its effect on human behavior throughout history as a whole and especially the theory of motivation theorists extensively by psychologists psychology approach, is discussed. However, that perfectionism has a long history, but little empirical research has been done to study these structures. However, evidence of individual differences in the tendency to perfectionism, there are many, but the most important features of perfectionism, an ambitious, ambitious, ambiguous and non-accessible and extreme efforts to achieve these goals (Najarian and Khodarhmi,

2007). Psychologists perfectionism associated with several psychiatric disorders assessed at the same time have a high prevalence of psychiatric disorders, especially depression and anxiety with chronic physical illness has been reported (Pourafkari, 2006). The second hypothesis perceived stress, quality of life in cancer patients predicts.

To evaluate the predictive ability of perceived stress in relation to the quality of life of simple linear regression was used. According to data obtained, we can conclude that perceived stress with a significant variable ($P=0.001$), in an analysis carried out, can be part of quality of life for cancer patients to predict. The results showed that the significant level of regression ($P=0.0001$) can be introduced that model, generalize to society. Physical and mental health in later life is great and undeniable quality. That the lives of all people depends on the health of these two dimensions. As mentioned hypothesis to the view of many theorists to this point.

Hypothesis 3: There is a difference between the quality of life for cancer patients, male and female.

In order to evaluate the difference in quality of life, perceived stress and perfectionism multivariate analysis of variance male and female cancer patients (MANOVA) and t-test was used.

The results show that F values were analyzed by $P=0.36$ and $P=0.37$ not significant, which means that the quality of life scores (physical health and mental health) between groups (men and women) were not significantly different and not confirmed the hypothesis. Yamasaky (2009) showed that all cancer patients in a depression or stress after hearing about the disease and their quality of life will be equally affected. Harold review and Nice (2010) showed that the quality of life in cancer patients affected by psychiatric disorders. Jacobs and Riley (2009), showed that benign or malignant cancer and male or female it does not impact on quality of life and quality of life of all people with cancer. The third hypothesis is consistent with the findings of these studies and general studies of cancer in both sexes is But different cancer types, eg more women to breast and cervical cancer and men with prostate cancer or blood Any person seeking cancer treatment and how to cope with the disease is different. Although the development of a successful treatment options exist for the treatment of many cancers The name of the disease still threatens a person's mental and social health and therefore puts a devastating effect on the quality of his life. Of course, every individual should be given the power resiliency to deal with negative thoughts

and dysfunctional mind deals and on ways of treatment and adapting to cope with the new situation, he can return to society. The deal has the support of the people most affected by Vicki studies (2013) quotes Mahdavi, 2014) has shown no significant difference between men and women.

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