Health-Related Quality of Life in Women With Breast Cancer in Korea: Do Sociodemographic Characteristics and Time Since Diagnosis Make a Difference?

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Breast cancer is the most common cancer among women worldwide. Breast cancer accounts for 23% of all cancers in women, with an estimated 1.15 million new cases each year (Centers for Disease Control and Prevention, 2010; Parkin, Bray, Ferlay, & Pisani, 2005). In the Republic of Korea, breast cancer also is the most frequently occurring cancer in women. The incidence rate has increased continuously since the late 1990s (Lee et al., 2007; Ministry of Health and Welfare, 2007). Although breast cancer remains one of the leading causes of cancer death worldwide in women, favorable long-term survival rates are increasing in Korea and other developed countries, including the United States (Jemal et al., 2006; Lee et al., 2007; Parkin et al., 2005).

Quality of Life—Global Change

Research reveals that quality of life is a prognostic predictor of survival in patients with breast cancer (Efficace et al., 2004; Gupta, Granick, Grutsch, & Lis, 2007). Given the increasing prevalence of breast cancer and the number of breast cancer survivors, quality of life can be considered an essential variable (King, 2006). In general, quality of life can be considered one's sense of well-being in multiple aspects of life (Ferrans & Powers, 1992; Haas, 1999; Padilla, Ferrell, Grant, & Rhiner, 1990). The definition of quality of life given by the World Health Organization Quality of Life Group (1998) stated that quality of life is a subjective judgment embedded in a cultural and social background. The meaning and domains of quality of life in patients with cancer differ across cultures and ethnicities (Ashing-Giwa, Tejero, Kim, Padilla, & Hellemann, 2007; Kim, Ashing-Giwa, Kagawa Singer, & Tejero, 2006; Meyerowitz, Richardson, Hudson, & Leedham, 1998). For example, Koreans with

Purpose/Objectives: To describe whether levels of health-related quality of life (HRQOL) differ by sociodemographic characteristics and time since breast cancer diagnosis in women in Korea.

Design: A descriptive, cross-sectional study of women with breast cancer.

Setting: An outpatient clinic of one large hospital in Seoul, Republic of Korea.

Sample: A convenience sample of 244 women with breast cancer after mastectomy.

Methods: Study participants completed sociodemographic characteristics and HRQOL questionnaires. Medical charts were reviewed to determine time since breast cancer diagnosis.

Main Research Variables: Sociodemographic characteristics (age, marital status, employment status, education, monthly household income, and religion), time since diagnosis, and HRQOL.

Findings: The psychological well-being domain scored the lowest among domains of HRQOL. Women who are younger, married, unemployed, highly educated, or religious, with higher monthly household income or with greater than one year elapsed time since diagnosis, had higher HRQOL.

Conclusions: Study findings will be useful to establish priorities in planning nursing interventions to enhance HRQOL in care of women with breast cancer.

Implications for Nursing: Nursing interventions can be provided to Korean women with breast cancer who are not religious, who are older, single or widowed, or employed, with lower education level, with lower monthly household income, or with one year or less elapsed time since breast cancer diagnosis.

breast cancer showed lower quality-of-life scores across various dimensions than Europeans or other Asians with breast cancer (Shim et al., 2006). In a qualitative study on the experience of women with breast cancer