Purpose/Objectives: To examine symptom severity’s relationship to symptom interference, education, age, marital status, and type of chemotherapy treatment in Israeli women with stage I or II breast cancer.

Design: Cross-sectional, descriptive, correlational design.

Setting: Hadassah University Hospital’s oncology daytime care unit in Israel.

Sample: 51 women with stage I or II breast cancer who were receiving an adjuvant chemotherapy protocol that included doxorubicin.

Methods: Women receiving adjuvant chemotherapy were given the M.D. Anderson Symptom Inventory (MDASI), a modified version of the Breast Cancer Prevention Trial Hot Flashes Subscale (BCPT-HFS), and a demographic and treatment questionnaire to assess their symptoms toward the end of their chemotherapy treatment.

Main Research Variables: Symptom severity, symptom interference, education, age, marital status, and type of chemotherapy treatment.

Findings: The most frequent and severe symptoms were fatigue, sleep disturbance, and drowsiness. The MDASI symptom severity total scores were positively correlated with total scores of interference with activities of daily life, with most individual symptoms being significantly related to the total interference scores. The strongest relationships were found with fatigue, distress, and sadness. Education was inversely related to the MDASI general symptom severity total scores; age was inversely related to the BCPT-HFS total scores. Patients who received treatment with doxorubicin plus cyclophosphamide or doxorubicin, cyclophosphamide, plus fluorouracil had greater symptom severity than those who received doxorubicin plus cyclophosphamide followed by paclitaxel and had their symptoms evaluated after receiving paclitaxel.

Conclusions: Increased symptom severity disrupts daily function and life in women with breast cancer.

Implications for Nursing: Evidence-based symptom profiles for different chemotherapy protocols are needed.