

Assessing the defining characteristic of nursing diagnosis spiritual distress in colorectal cancer patients: a cross-sectional study

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BACKGROUND AND AIM

Spiritual distress is a nursing diagnosis according to NANDA-International, Inc. (NANDA-I), which is defined by “a state of suffering associated with the meaning of his/her life, related to a connection to self, others, world, or a Superior” which embraces sixteen defining characteristics ⁽¹⁾. The American Cancer Society estimates that in 2019 the number of new cases of colorectal cancer in the United States will be 145,600 ⁽²⁾. Cancer affects all human dimensions, in particular the spiritual dimension.

AIM: To assess the prevalence of spiritual distress in colorectal cancer patients, according to the nursing diagnosis listed in NANDA-I.

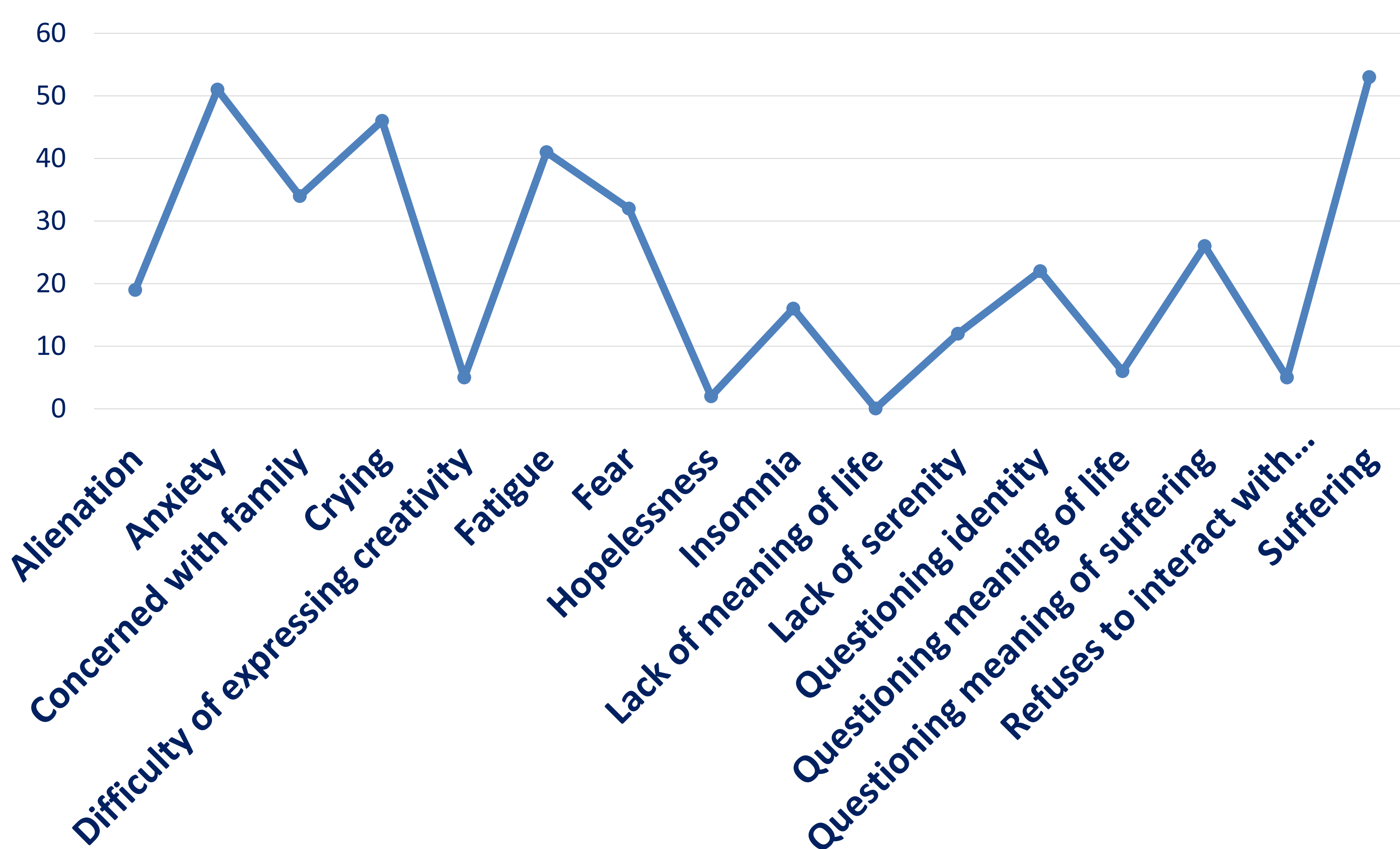
Keywords: cancer; colorectal; nursing diagnosis; prevalence; spiritual distress.

METHODS

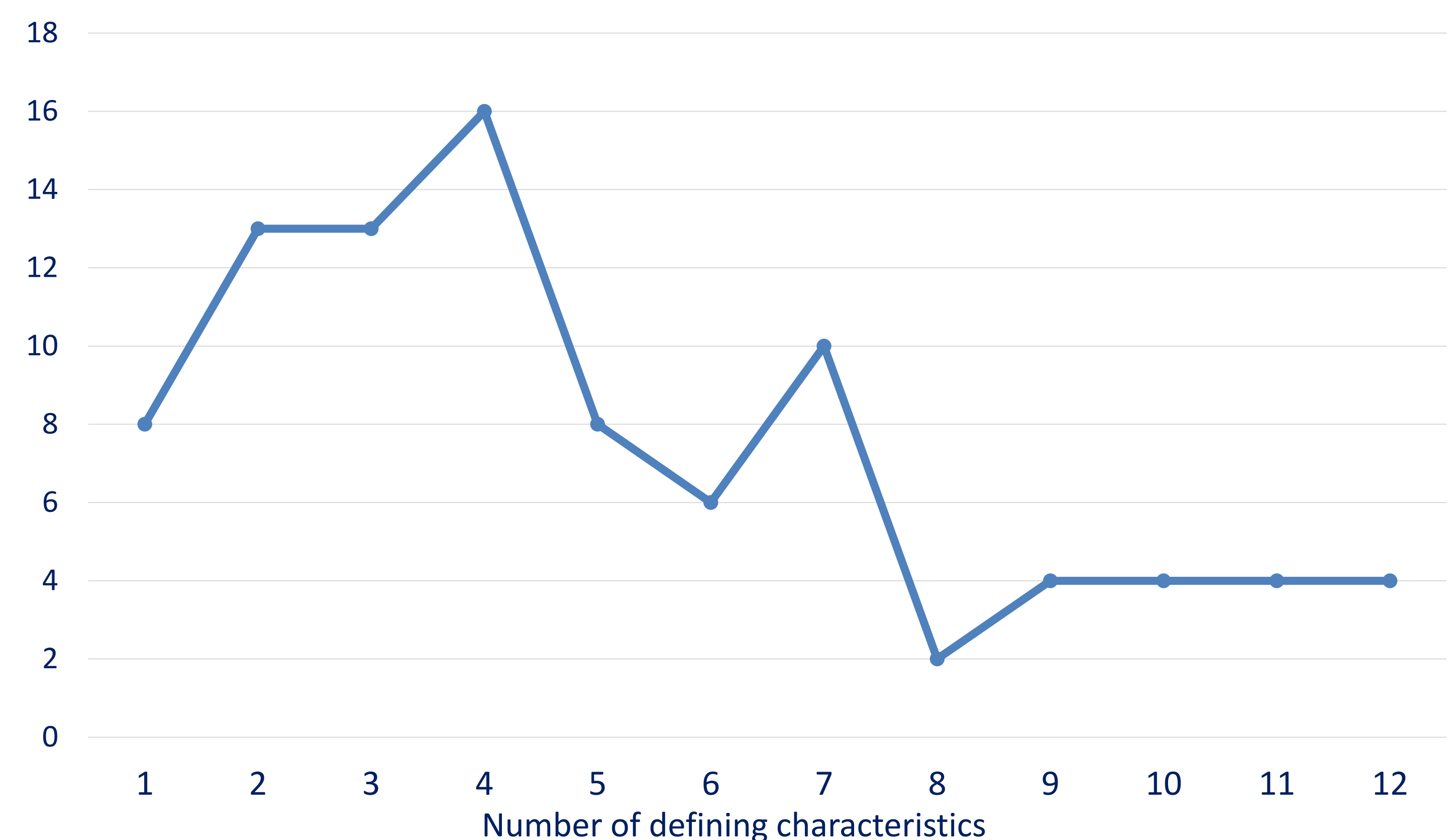
- **Study**
Quantitative, observational and cross-sectional.
- **Participants**
79 colorectal cancer patients in outpatient setting in a hospital.
- **Sampling**
Random sampling technique.
- **Data collection**
Defining characteristics of the nursing diagnosis spiritual distress, according to NANDA-I.
- **Data analysis**
Analysis using software SPSS version 23.
- **Ethics approval**
Was obtained by the Ethics Committee and with written consent of the participants.

RESULTS

Defining characteristics of spiritual distress experienced in colorectal cancer patients



Number of defining characteristics of the nursing diagnosis spiritual distress in colorectal cancer patients



Sample characteristics (N=92)

Gender	53.2% males
Mean age	61.75 (SD=± 10.42)
Marital status	67.1% married
Religious affiliation	93.7%
Tumor stage	I – 3.8%; II – 7.6%; III – 54.4%; IV – 34.2%

The prevalence of spiritual distress



32.9%

CONCLUSION

The findings highlight that suffering, anxiety, crying and fatigue are the most common defining characteristics of the nursing diagnosis of spiritual distress. The prevalence of spiritual distress in colorectal cancer patients underlines the need for awareness of nurses in clinical practice to include the assessment of the spiritual needs of cancer patients, aiming to provide nursing interventions that could promote spiritual well-being.