Effect of Breast Cancer on Some Psychological Variables for Saudi Women

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Abstract: Breast cancer is a disease of the times and one of the main concerns of the female, wherever they are on the surface of the Earth, which is the common for all women in the world. The overall understanding of the psychological reactions of women to breast cancer is essential to determine the standards of care and treatment guidelines for women with breast cancer health. Breast cancer often turns into a health problem intractable by the barriers of silence in closed societies, such as the Arab societies. The study aims are to assess the psychological pressures and adjustment to breast cancer in the Kingdom of Saudi Arabia. In addition to the relationship between stress and psychological adjustment among women with early breast cancer breast in Saudi Arabia. The student population is made up by the married Saudi women who effected with breast cancer and had undergone surgery to remove a malignant tumor. As well as, who is between the ages of (20-70) years and knowing that they have a breast cancer. The choice of the sample and place was not random, where the sample has been selected for the married patients. The researcher has prepared and built a special measure of psychological pressure with breast cancer and the work of the validity and reliability. The results indicate that the women with early breast cancer do not suffer from psychological stress. The psychological adjustment among members of the study sample is higher from the middle of the measurement tool. This indicates that the greater the stress in with early breast cancer in Saudi Arabia, the lower the contrast level of psychological adjustment. The finding recommended that there is a need to provide social and psychological care for women with breast cancer. Through, Building and providing educational outreach programs, as well as a collective psychological therapy sessions to increase confidence and optimism among women with breast cancer. This can be achieved through the spiritual support through the distribution of printed brochures. [Ayman Ramadan Sulyman Zahran, Safa' Jaber Ali Salem, Khaled Ramadan Abd Elfattah Soliman. Effect of Breast Cancer on Some Psychological Variables for Saudi Women. Life Sci J 2013;10(2):2181-2190] (ISSN:1097-8135). http://www.lifesciencesite.com. 305

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Introduction:

The chronic diseases, including cancer a stressful on life events, which have a direct relationship incidence of mental disorders and multiple physical (Cofer and Apply, 1984).

Many of the cancer treatments cause physical changes permanent or temporary, which lead to changes in body image and a decline in self-esteem in people with cancer.

Even after the loss of therapeutic interventions member or scars surgery or hair loss due to chemotherapy to be experienced frightening and threatening to self-esteem (Fewzy, et al., 1995).

Compatibility is affected by psychological diagnosis and treatment of cancer by several factors such as: family, friends, and religious beliefs, all of which are important in giving hope to the patient. (Feher and Maly, 1999; Raleigh, 1992).

The psychological pressure on the causes of poor compliance and can take various forms these compressors on the level of groups or on an individual level (as in the case of illness). The main key to the understanding responses to pressure does not depend on the nature and sources of compressors and depends on how an individual responds to these

pressures, some people collapse, while others strive to deal with the emergency situation. This depends on each person's point of collapse itself and differ from person to person, depending on the nature and sources of pressure, The structure of the personality, temperament and age and gender and mental health (Peter, 2008).

The psychological impact of cancer is clear through the stress that lasts for a long time for patients with a ratio ranges between (20-66%), (Zabora, et al., 2001).

Many patients with breast cancer believe that, it is not easy to see if they stress the continued suffering of health (Brennan, 2001).

The overall understanding of the psychological reactions of women to breast cancer is essential to determine the standards of care and treatment guidelines for women with breast cancer health. As well as, suffering from a psychological disorder that could delay and complicate treatment (Payne, et al., 1996)

Physicists and personal looking do not work alone, but through the influence that caused by the others to realize the rights of these appearances. Also, the satisfaction of human for his physical appearance is important incompatibility, and the individual's sense of inferiority, especially by the standards of cultures prevailing in the society in which they live. The appearances of the physical impact is often affected on the response of the others about the individual than rather in his view of himself.

Some studies have shown, with the especial rest to the study made by Zhiquan et al. (1985), women living with breast cancer and who were willing to vent their sympathetic and feelings become the fastest compressor for healing of those who have no such inclination or aptitude. This association between the expression of feeling and lifestyle of cancer is certainly significant, but does not know of any reasons back, one of them believed to be linked to the secretion of hormones that in turn help the growth of cancerous tumors, and these with the increase in the secretion of hormones due to the sympathetic activity in cases of repression of the emotions and the pressing matters and non-disclosure and disposal (Adess and touq, 2005).

Problem of the study

Breast cancer is a disease of the times and one of the main concerns of the female, wherever they are on the surface of the Earth, which is the common for all women in the world. It is one of the most cancers prevalent among women, and is the leading cause of death with rates to the high incidence and increasing rate (5%) per annum. This shows the seriousness of the situation, prompting the World Health Organization to put it in (2005) on the agenda and called for concerted efforts to strengthen programs to support breast cancer to reduce the mortality rate and improve the quality of life for patients and their families (Khoja, 2006). Globally, diagnosed more than 1.1 million breast cancer patients new each year, which constitute the proportion of deaths (410,000) per year. This disease happens in men as well, but by (1%) of all registered cases (Khoja, 2006; Pfizer and Oncology, 2006).

Breast cancer ranks the first among the causes of death among women in Europe and the United States of America, so that one of every fourteen women develop breast cancer during her lifetime (Mufti, 1428 Hijri). Statistics indicate that the ratio in the Netherlands and the United States, France and Japan are: 91.6, 91.4, 83.4, 31.4 case per 100 thousand women.

It seems that Arab women are no longer completely isolated from the diseases of modern, especially fatal ones. The studies showed that many of several Arab countries, the spread of breast cancer among Arab women. In Egypt, the study confirmed that the Egyptian medical rate of breast cancer is the top of the cancers list with a rate of 42 cases per 100

thousand of the population. While, in Saudi Arabia one of the statistics issued recently, showed that the number of cases of breast cancer in Saudi is approximately 11.8 ladies out of every 100 thousand inhabitants, the estimated number of women in Saudi Arabia in 2741 cases. In Lebanon, statistics indicate that the Ministry of Health was recorded 700 new cases of breast cancer in Lebanon annually. (CNN Arabic, 2006).

Breast cancer often turns into a health problem intractable by the barriers of silence in closed societies, such as the Arab societies, saluting considered cancer synonymous with death, but it affects a member of nerve in a woman's body, we find that with respect to this member of the tests will be something exciting for sensitivity, if not rejection.

Therefore we must take into account the nature of society and Its ideological and social heritage when you ask these social problems or researched, Valsrtan the does not mean that there are sick, but sick beds (Khoja, the Middle East - Arab International Newspaper, 2006).

The family member when affected by cancer, puts the family in severe crisis, as well as the impact on marriage and family relations, which lead to substantial changes in social roles performed by the family (Ell, 1996).

The rate of breast cancer has increased in recent decades, and has increased her chances of survival for infected alive, followed by an increase in the number of women living with the results of the disease. Which include psychological reactions to disease and treatment side effects and reflection on their lives. (Massie & Popkin, 1998)

There are currently more than 2 million breast cancer survivors are continuing and women alive, so that early detection and appropriate treatment helps to give positive results and an improvement in the image of women (National Cancer Institute, 2006).

According to the American Cancer Society that (95%) of women with breast cancer are expected them to survive for 15 years or more, and that more than 95% of women with breast cancer early survive for five years or more (American Cancer Society, 2001).

The suppression of feelings, emotions and not being able to express them with free cause psychological stress, which increases the risk of cancer and vice versa. The cancer patients who express their emotions freely, at least have the stress and survive for longer than other patients who do not express their emotions (Cox & Mackay, 1982).

Many studies have shown that cancer returning to the psychological disorders in more (50%) Among women with breast cancer. (Hall, et al., 1996; Jenkins, et al., 1991)

As well as, an increased risk of death when a setback, because of pressures on breast cancer, including non-cooperation (deficit) and pessimism. (Watson, et al., 1999)

Guelph et al. (2000) illustrated that cancer patients once they express their emotions and talk about it, and hear their experience in the face of illness, gives them hope and optimism for the continuation of their lives (Chelf, et al., 2000).

So we should know the level of psychological pressure of living with first for the purpose of taking appropriate psychotherapy. (Block & Kissane, 2000; Classen, et al., 2001)

The program for solving problems during the phase detector feelings and emotions to be effective in facilitating the process compatibility, and vice versa. The failure to disclose and to clarify the effects of psychological, emotional and other effects of the disease is evidence of increased tension (Price, et al., 2001).

The breast cancer patients, show the results of psychological after surgery sometimes larger than the actual results, as reflected in the reaction process on the public psyche for Women (Ansari, 1983).

All of the above mentions was a motivation for the current study, which can be identified in the following questions:

- 1 What is the prevalence of psychological pressure with breast cancer in the Kingdom of Saudi Arabia.
- 2 What are the psychological adjustment rate among women with breast cancer in the Kingdom of Saudi Arabia.
- 3 What is the relationship between stress and psychological adjustment among women with early breast cancer in Saudi Arabia

Objectives of the study:

Current search is to identify targets on:

- 1. Psychological pressures with breast cancer in the Kingdom of Saudi Arabia.
- 2. Psychological adjustment in women with breast cancer in the Kingdom of Saudi Arabia.
- 3. The relationship between stress and psychological adjustment among women with early breast cancer breast in Saudi Arabia

The limits of the study:

The current study will be limited to the sample, which meet the following conditions:

- 1. Posts on the study of Saudi married women, aged (20 70) years.
- 2. Who had undergone surgery to remove a malignant tumor (cancer), which was in its infancy (metastatic cancer).

3. Posts in the study are known by the affectionate of the breast cancer and who wish to answer this research tool.

Posts in the study, the women who are following the Oncology Hospital in Jeddah, Saudi Arabia for the purpose of receiving treatment decision for them or for the purpose of monitoring and periodic inspection during the year 2011.

The method and procedures

This section includes a description of the members of the study who have been selected to conduct the study, and also describes the procedures for building study tools and verification of sincerity and stability. Also, includes procedures for the application of the study, and statistical methods used in the study data processing.

Study population:

The student population is made up by the married Saudi women who effected with breast cancer and had undergone surgery to remove a malignant tumor. As well as, who is between the ages of (20-70) years and knowing that they have a breast cancer. But the inability of a researcher from the inventory of society and there is no point can be referenced for this limited, the study of cancer tumors with subjected to the Hospital in Jeddah. Where the total number of women with breast cancer who have tumors in the hospital for cancer during the year 2011 (2435) infected.

The study sample:

The sample of the study population was selected, the number of its members (198) post. The choice of the sample and place was not random, where the sample has been selected for the married patients, because breast cancer affects mostly women with older age and be married more often than not, especially in Saudi Arabia, which is common for girls to get married at the age of early. As well as, the hospital has been selected for cancer tumors as the main hospital for the treatment of cancer, especially breast cancer, where there were all the necessary supplies for the treatment and care of patients.

Tools of the study:

First: the measure of psychological stress

The researcher has prepared and built a special measure of psychological pressure with breast cancer and the work of the validity and reliability, based on the following steps:

- Collecting previous references and literature (Arab and foreign countries) on the subject of the study, which dealt with the problems and

stress of living with cancer, particularly breast cancer.

In addition, referring to previous studies on the pressure, psychological, and interviews with four of the women with breast cancer than women who are following the tumors hospital in Jeddah, who are outside of the study sample, for the pressures they face due to the disease, in order to take advantage of them in during the construction of the paragraphs of the stress scale.

Based on the above, enables a researcher to formulate (33) each paragraph referring to the problem or experiencing pressure with breast cancer.

Confidence Scale:

The sincerity measure was extracted after its reviewing as the initial set of arbitrators specialists in the fields of psychology, in the field of nursing, psychological and social care for cancer patients, the number of arbitrators was nine. As well as, the internal honesty was extracted to measure by calculating the correlation with the degree of the scale with the overall scale. The study found that all the link paragraphs with the total score was a function of the level of 0.05 or less, and that all transactions were higher than 0.30, with the exception of paragraph (17), which has a coefficient of association of the overall (0.17), which was kept. As, is the correlation coefficients paragraph of the overall degree is greater than 0.10 and less than 0.30. will be suitable if the number was a bit of a total of paragraphs of the scale. This would indicate that the scale is truly appropriate semantics that paragraph good are those which discriminate among individuals and different response of individuals. In this case, the paragraph is her ability to measure attributes have different levels and degrees to individuals, as it is an indicator of sincerity and measure for measure a Meet the purposes of the current study.

The stability of the scale:

To check the stability of the stress scale, stability was calculated internal consistency using Cronbach's alpha equation, where the reliability coefficient (0.93), and this indicates that the measure enjoys a high level of stability is suitable for use in the present study.

Second: a measure of psychological adjustment

The measure of psychological adjustment has been built based on the following steps:

Literature review and previous references (Arab and foreign), which addressed the issue of compatibility, as well as the adaptation and compatibility when living with cancer, especially breast cancer. The previous research and studies which relating to compliance, including compliance with breast cancer and these studies (Premier, 1989; Chick, 1989; Shammari, 1997; 2002 Stanton,; Shahrouri, 2004; Clough-Gorr, 2007), was conducted interviews with four of the women with breast cancer who are following Oncology Specialist Hospital in Jeddah. These women are outside the study sample, and for the purpose of seeing how compatibility, the pressures and problems they face During the disease, in order to take advantage of them in during the construction of the paragraphs of the compatibility scale.

So that, the measure of psychological adjustment to breast cancer patients has become consisted of (20) paragraph, is from the first and until twenty paragraphs (1-20) of the total measure of compatibility. The paragraphs express synch positive and negative with breast cancer in that measure, where the contents of the single paragraphs were expressed as negative and the contents of the double paragraphs as positive. The responsive participation on a scale of psychological adjustment discretion to the applicability of the content of the paragraph in the grade of five points, individual (negative) begins staging that indicates the number (1) to apply to very much, the number (2) indicates to apply to a large extent, the number (3) indicates to apply to moderate, the number (4) indicates to apply to a low degree, and the number (5) indicates to not apply to. While, for paragraphs double (positive) to arrive numbering them in a manner opposite, i.e., that the number (5) refers to apply to very much, indicates the number (4) to apply to a large extent, the number indicates (3) to apply to a medium degree, indicates the number (2) to apply to a low degree, and indicates the number (1) does not apply to. Then, calculating the measure of the psychological adjustment degree by combining the mathematical sum of the degrees paragraphs of the scale. The total score for the measure of psychological adjustment ranges between (20-100) degrees, class (20) indicates to the lack of psychological adjustment, and the class (100) indicates about having the highest level of compatibility psychological in participating. In order to calculate the middle to measure psychological adjustment the number of measure primarily paragraphs has been multiplied by (3) as representing the midpoint of the scale used to measure and thus become the average value to measure psychological adjustment (60).

Validity of the measure of compatibility:

To see the validity of the scale, the scale has been introduced as the initial to nine of the arbitrators and specialists in the fields of psychology, nursing and psychosocial care for cancer patients, where they were asked to express their opinion and comments in paragraphs standards and amendments that they deem appropriate for these paragraphs. As well as, the internal honesty has been extracted by calculating the correlation coefficient between paragraph and total degree. It turns out that all the link paragraphs with the total score was a function of the level of 0.05 or less, and that all transactions were higher than 0.30, with the exception of paragraph (2) that the coefficient of association with total degree (0.27). which was kept. As is the correlation coefficients paragraph of the total degree greater than 0.10 and less than 0.30 is suitable, if the number was a bit of total paragraphs scale, and this would indicate that the measure has connotations sincerity suitable.

Stability of the measure of consensus:

For the calculation of the stability of compatibility scale, the internal stability of consistency was calculated, with the use of the equation Cronbach's alpha. Where the reliability coefficient of the internal consistency calculated equation Cronbach's alpha for the degree of overall scale compatibility (0.92), and these transactions to the standards compatibility has enjoyed high levels of the stability of the internal consistency and is suitable for use in the present study.

Procedures of the study:

The researcher visited the oncology hospital in Jeddah, Saudi Arabia and after the approvals, the researcher applied study on the posts who are available to have limitations that were mentioned in the study sample and who are following the oncology

Jeddah hospital, Saudi Arabia. To create posts, the researcher receipt lists daily the names of revisions were interviewed patient individually and after consent to participate in the study, began researcher filling of personal data on participation, and explain how to fill out the questionnaire by completing the first paragraphs of each questionnaire to clarify the method of packing well. Then leaves participation alone to fill, it took to fill out the questionnaire for the study tools around (30-45) minutes.

Statistical methods:

- 1. Averages and standard deviations for the performance of the study sample study tools (psychological pressure measure, a measure of psychological adjustment).
- 2. t-test for a single sample in order to identify the degree of psychological pressure and the total degree of compatibility of the study sample, as well as the t-test for two independent samples.
- 3. Pearson correlation coefficient in order to extract the link between psychological stress and psychological adjustment

Results

The results of the first goal:

To identify the psychological pressures of breast cancer Saudi Arabia.women.

Mean, standard deviations and (T) testing, Were calculated for a single sample, the virtual mean of the sample for the total degree to measure the psychological pressure (99), on the grounds that the number of paragraphs of the test 33 and the middle for each paragraph (3), table (9) shows the results of the first question .

Table (1) The average, mean, standard deviation and the value of T for the psychological pressure to breast cancer

Sample	Standard deviation	Spreadsheet (T)	Virtual mean	Mean	Level of significancy
198	22.55	-20.00	85	46.94	0.00

From the above table it is clear that the value of statistical (T) was (-20.00), this value is significant at the level of 0.05 or less. By reviewing the arithmetic mean and compared in virtual mean show that, the sample mean less than the virtual middle and are statistically significant. This suggesting that the degree of psychological stress among members the study sample less from the virtual middle of the measurement tool, this would indicate that women with early breast cancer do not suffer from psychological stress.

The second goal: is the recognition to psychological adjustment among women with

early breast cancer in the Kingdom of Saudi Arabia.

The total score of the scale was awarded by multiplying the number of paragraphs (1) as a lower value to scale, so that the lowest value of the scale as a whole (20), while the maximum score of the scale has been calculated by multiplying the number of paragraphs weight (5) as the highest degree to include the user in the meter, and thus the total score ranging from (20-100).

To answer this goal arithmetic mean, standard deviation and a t-test for one sample have been calculated, the virtual mean test sample was (60) on the grounds that the number of paragraphs of the test

20 and the virtual middle of the each paragraph (3). So the total virtual middle of the psychological

adjustment scale was 60) and Table, 2 shows the results of this goal .

Table (2) Mean, virtual middle, standard deviation and the spreadsheet (T) value for the measure of psychological adjustment for women with early breast cancer.

Sample	Mean	Virtual median	Standard deviation	Spreadsheet (T) value	Level of significance
198	69.20	60	13.95	9.28	0.00

From the above table it is clear that the statistical (T) value (9.28), and this value is significant at 0.05 or less. Reviewing the arithmetic average, it shows that the sample mean is greater than the virtual median and is statistically significant. This suggests that the psychological adjustment among members of the study sample is higher from the middle of the measurement tool.

The third objective: is to identify the relationship between stress and psychological adjustment of breast cancer in the Kingdom of Saudi Arabia.

The Pearson correlation coefficient was calculated to find a relationship between psychological stress and psychological adjustment among women with breast cancer in Saudi Arabia the following table (3) shows the results of that.

Table (3) Pearson correlation coefficient between psychological stress and psychological compatibility with early breast cancer in the Kingdom of Saudi Arabia.

Correlation	Significance	
-0.34	*0.01	

^{*} correlation function at the level of ≤ 0.05

From the table (3) it is clear that the link between stress and psychological adjustment in women with breast cancer early, Saudi Arabia reached the level of Statistical function at the level of 0.05 or less, where the value of the Pearson correlation coefficient was (-0.37). This indicates that the greater the stress in with early breast cancer in Saudi Arabia, the lower the contrast level of psychological adjustment.

Discussion:

The results related to the first objective: to identify the psychological pressures of early breast cancer in the Kingdom of Saudi Arabia.

The results in table (1) showed that the arithmetic mean of the sample (66.94), which is lower than the virtual middle and are statistically significant at the level of 0.05 or less, which indicates that the degree of stress in the study sample is less than the virtual middle of the measurement tool. This

shows that the women with early breast cancer in Saudi Arabia, they do not have psychological pressure.

The medical treatments for cancer have negative side effects that can cause stress for cancer patients and these treatments include surgery, radiotherapy, chemotherapy and hormonal therapy. The first three immunotherapy though treatments are the most widely used and influential (Andersen, 1989).

The economic variables as the costs of hospital, physician fees, the cost of treatment and medical examinations are leading to many psychological and social pressures (Koocher, 1986). Lack of social support from friends, family and husband cause high stress (Roberts and Cox,1994).

This result can be explained to what's referred to by both Cox and McKee (Cox & Mackay, 1982), that the suppression of feelings and emotions as well as, the inability to express them freely, cause psychological pressure which increases the risk of cancer, and vice versa. The cancer patients who express their emotions freely, at least have the stress and survive for longer than other patients who do not express their emotions. In addition the training of cancer patients to avoid thinking about the exciting events of hardship through reminding them of memories unpleasant past in their memories were more effective in reducing the Psychological hardship compared with the control group (Boden & Baumeister, 1997). The mere talk about their emotions and hear the experience of others in confronting the disease of cancerous tumors provides them with optimism and hope in the continuation of their lives (Chelf, et al., 2000).

The psychological support was the most important types of support to cancer patients, either from friends or couples, either performing support which is the best when the couples, both causing a reduction in discomfort after surgery (Alferi, etal., 2001).

MC Quellon, et al., 1998, reached to the result that patients newborn diagnosis of cancer and after taking them on a tour and guidance on sections of the medical center shows them a decrease in anxiety and mood disorder and depressive symptoms. As well as, they have more information about the Medical Center procedures and more confident for doctors and more

convinced and hopeful than the control group that did not receive the tour and guidance.

So, the author explains this result which is a low degree of stress for women with breast cancer in the Kingdom of Saudi Arabia to psychological support. which provides by the family represented by the husband, family members and allowing the patient to express their feelings and emotions and remind them of the positions good fun. As well as help them when doing daily chores and routines, and also support and psychological support of relatives and friends, and to get the patient information on the disease, treatment and how to confront raised by the medical staff and psychiatrist at the medical center. In addition learn about the experience of other patients in confronting the disease during the waiting role for treatment or examination by a doctor, where recognize a number of patients, especially those who have recovered from cancer and come for the purpose of monitoring and examination, which feel optimism and hope in life. As well as free examination and treatment in its different forms from the moment of the discovery of the disease because of the enjoyment of living with cancer applicable to health insurance in Saudi Arabia and this significantly reduces the suffering and psychological stress resulting from the treatment costs on the economic side of the family.

Second: the second objective: to identify the psychological adjustment for women with early breast cancer in the Kingdom of Saudi Arabia.

The results in table (2) show that, the arithmetic mean of the sample (69.20) is greater than virtual median (60) and is statistically significant at the 0.05 level or less, which indicates that the psychological adjustment among members of the study sample above the virtual middle of the measurement tool

That mental health is the science of psychological compatibility or adaptation to the coherence and unity of the personality and accept individual and accepted by others. So this whole give a sense of happiness and psychological comfort. (Fahmy, 1967), and (Helgeson, etal., 1999) eached to outcome that education about the disease has a positive effect on compliance directly after the experiment after six months of trial and might explain this result to changes in self-esteem, body image, and coercive ideas about the disease in the patient.

The program for solving problems during the phase detector of feelings and emotions to be effective in facilitating the compatibility process, and vice versa, the failure to disclose and to clarify the effects of psychological, emotional and other effects of the disease is evidence of increased tension (Price, et al., 2001). The actively carry out in order to satisfy the need and reduce stress and access to an

equilibrium psychic life cycle experienced by everyone in his quest for compatibility neighborhood consensus continues (Raho, 2005).

The author can interpret this result which is the high level of psychological adjustment, to the position of the affected psychological pressure or how to respond when feeling nervous, and understanding of the behavior and thoughts as well as feelings degree can draw a strategy to cope with the pressures and demands of everyday life. Also, can explain this result, is that the cancer Jeddah hospital, Saudi Arabia, which provides ways to help women with breast cancer in the face of pressures, which are suffering through the medical and psychological staff, and all these factors make it easier to satisfy the need and reduce the tension and thus the psychological sense of relief.

The Third Objective: to identify the relationship between psychological stress and psychological adjustment among women with early breast cancer in the Kingdom of Saudi Arabia.

The results indicated that the link between psychological stress and compatibility mental with early breast cancer patient in Saudi Arabia reached the level of significance was 0.05 or less, where the value of the Pearson correlation coefficient (-0.37). This indicates that the greater the stress in women with early breast cancer, on the other hand the dropper the level of psychological adjustment.

The psychological pressure is the situation faced by the organism to conditions or demands imposed upon some sort of consensus, and getting that case to the degree of risk the greater the severity of the conditions (Mohammed, 1995). The causes of illcompatibility are psychological stressors as in case of illness and that the intensity of the pressures, sources, the number of recurrence and quality as well as the experiences of one's life are all factors that affect it and that the sensations associated with the disorder, poor compatibility vary greatly in terms of grades, intensity and in terms of the experiences of individuals who are exposed to it (Peter, 2008). Stress are those stimuli internal or environmental, that are on the degree of severity and permanence, including weighing the ability harmonic of the individual and that lead in certain circumstances to dysfunction and behavioral (Abdel Muti, 2006),

because it is not up to the state to reduce stress and remove anxiety related to suffering, then we say that the individual has bad compatibility because the types of adaptive behavior that resorted have not succeeded in achieving a goal access to the state of satisfaction and contentment (Miller, 1987).

The researcher explained this result that women infected with cancer suffer from a range of problems

and challenges, stress and physical, functional, social, and these problems include: adapt to the shock diagnosis and concerns about their health and the future and purpose of physical side effects of treatment, such as nausea, fatigue and changes physical in the appearance of the body and its function, and costs finance relating to the disease and its costs and loss of a job and work, and the difficulties. In addition to the psychological problems resulting from body image and the sexuality to severe disruptions, such as anxiety and depression, and all these difficulties and challenges feel women tired and the situation overloaded and their sources and their means, therefore, lose their sense of comfort, happiness and satisfaction.

Recommendations

The author based on the findings of the results of this study, including the following:

- 1. The need to provide social and psychological care for women with breast cancer, especially young patients forty years of age or less.
- Building and to provide educational outreach programs and related to infected guidance to how to deal with the effects of the disease and treatment, especially those with medium level of education.
- 3. Provide the collective psychological therapy sessions to increase confidence and optimism among women with breast cancer by encouraging them to develop specific goals for new lifestyle commensurate with their situation, such as nutrition, exercise, smoking, personal and professional relationships and ways to improve the appearance.
- 4. Providing spiritual support through the distribution of printed brochures, and put mural releases in sections and lounges centers and private hospitals with cancer, to establish the concept of calamity and contentment and faith as much good and evil.
- 5. The hospitals and cancer centers provide the means and tools to help and improve the image of the body such as clothing, headgear and artificial organs.
- 6. Future studies concerning the nature of the psychological and social pressures and physical suffering of women with breast cancer and cancer in general, and the relationship of these variable pressures on age, educational level, duration of treatment and the stage of the disease.

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