Depression is one of the common psychiatric issues manifesting in the form of sad mood, hopelessness, worthlessness, disturbed sleep or appetite, fatigue and poor concentration. Depression is the psychiatric syndrome that has received the most attention in individuals with cancer. Gonadal cancer patients may be overwhelmed by feelings of despair, panic, and other emotions including severe feelings of depression and apathy.1

Most cancer patients experience depression after the diagnosis of cancer, but when the clinical depression is used as criterion, its prevalence among cancer patients may not be greater than that of other hospitalized patients. Many hospitalized patients with or without cancer suffer from depression. Depression is more common in hospitalized cancer patients than in hospitalized patients suffering from other medical illnesses. Proper treatment of depression in hospitalized patients can enhance their quality of life.2

Hospital environment can affect the emotional and physical state of cancer patients. Hospitalization alters rest-activity rhythm and decreased quality of life of cancer patients.3 Fear of death, side effects of chemotherapy, radiotherapy and associated pain and distress become major preoccupations for cancer patients. These factors contribute in the development of depression in these patients and some of them may even attempt suicide. Hospitalized patients have rates of depression as high as 77%, which reflects that the hospital environment affects the psychological health of patients.4

The present research data was collected from two tertiary public care hospitals (Jinnah Postgraduate Medical Centre and the Civil Hospital, Karachi). After receiving the approval of the ethical committee from these Hospitals, written informed consent was obtained from each participant. After this, the semi-structured interview proforma and the Siddiqui Shah Depression Scale were administered.5 The scale carries test re-test reliability of 0.85, calculated through inter item consistency measures of Cronbach Alpha. It is a 36 items scale, which provides measures of depression, along a 4 point rating scale, where 0 denotes no sadness, 1 normal sadness, 2 mild depression, and 3 severe depression. A score of 26 is taken as the lower limit and a score of 36 is taken as the upper limit, indicative of mild depression. Scores ranging from 37 to 49 are interpretable as moderate depression, whereas scores of 50 and above depict the presence of severe depression. A uniform procedure was followed and the participants were contacted in wards (admitted patients) as well as in OPD (outdoor patients). All the procedures followed and the materials used were reviewed and approved by the Board of Advance Studies and Research (BASR), University of Karachi.

Out of the total 100 participants, 60 were females, and 40 were males. Moreover, this group included 30 hospitalized and 70 non-hospitalized patients. The participants’ age ranged between 20 to 27 years with the mean age of 23.85 ± 1.44.

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The results clearly indicate that there are significant differences in the levels of depression among non-hospitalized and hospitalized Gonadal Cancer patients. Sixty percent hospitalized patients were found to be severely depressed whereas only 1.4% of non-hospitalized patients were severely depressed \( p < 0.001 \). Table I indicates percentages in the levels of depression in hospitalized and non-hospitalized gonadal cancer patients.

Those with non-hospitalized category are less likely to have depression. It can be concluded that depression persists in all Gonadal cancer patients but there are significant differences in their levels of depression, as the mean of depressive symptoms of non-hospitalized Gonadal cancer patients is 32.71 whereas it was 54.97 in hospitalized patients.

On the basis of the present research findings, it is recommended that training of nursing or medical staff in communication skills is undertaken in order to improve their abilities to address special psychological needs of the in-patients. This may also prevent the development of emotional disturbances and enable them to identify depressed patients with special needs to be referred to professionals like psychologists, psychiatrists and other mental health professionals. Furthermore, it is not only the quantity but also the quality of life that is an important goal in the management of cancer patient, especially gonadal cancer patients. Therefore, it is essential to give due attention to gonadal cancer patients' psychological well-being during their stay in hospitals.

### Table I: Percentages of depression levels of hospitalized and non-hospitalized gonadal cancer patients.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Groups</th>
<th>Depression level</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Low</td>
<td>Moderate</td>
</tr>
<tr>
<td>Depression</td>
<td>Hospitalized patients (n=30)</td>
<td>0 (0%)</td>
<td>12 (40%)</td>
</tr>
<tr>
<td></td>
<td>Non-hospitalized patients (n=70)</td>
<td>52 (74.3%)</td>
<td>17 (24.3%)</td>
</tr>
</tbody>
</table>

* \( p < 0.05 \) was considered as significant. Fisher's exact test was applied.

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### REFERENCES