

Abstract

Objectives: The main aim of this thesis is to study selected risk factors for and consequences of cancer in women from a psychosocial perspective. A secondary aim is to verify the accuracy of cancer registration based on a population study, with regional and national registration as a reference.

Study population and methods: The Prospective Population Study of Women in Göteborg, a longitudinal study of 1462 women aged 38-60, started in 1968-69. At baseline, 1462 of 1622 invited women (90.1%) participated. The subjects have been followed up and data have been recorded three times: in 1974-75, 1980-81 and 1992-93. Currently the data from a fourth follow-up is under evaluation. A prospective study was conducted with cancer as an endpoint in order to study selected psychosocial risk factors for cancer. Quality of life was studied cross-sectionally by using a questionnaire (SF-36). Women who had been diagnosed with cancer were compared to women who had not.

Results:

●Paper I. The association between socioeconomic status and cancer, cardiovascular disease and diabetes mellitus was investigated by using two socioeconomic indicators, the husband's occupational category for married women and a composite indicator combining women's educational level with household income for all women. High socioeconomic status was associated with increased cancer mortality but decreased cardiovascular disease mortality.

●Paper II. The association between mental stress and breast cancer was investigated using 24-year incidence data. Women who reported that they had experienced continuous mental stress during the five years preceding the baseline examination had a two-fold increased risk of developing breast cancer compared to women reporting no stress, even after adjusting for potential confounders.

●Paper III. The relationship between cancer and quality of life was investigated. The SF-36 instrument has eight scales measuring quality of life. Among the cancer survivors a lower feeling of "general health" was associated with having had cancer more than four years before the interview. Survivors of breast cancer had a significant reduction of "vitality". Having had cancer during the last four years before the interview was associated with a higher degree of poor health in 3 of 8 scales, compared to cancer-free subjects. In summary women who had survived cancer more than a few years experienced their health to be more similar to that of women with no history of cancer.

●Paper IV. A comparison of data obtained from the Cancer Registry and from the Population Study showed a high degree of similarity. Only one cancer case was unknown in the Registry but documented by the Population Study and one case was reported to the Cancer Registry but not registered in the Population Study. This indicated a high level of accuracy in the Population Study data.

Conclusions: When examining most risk factors for cancer in women from a psychosocial perspective, prospective studies are appropriate since there is a representation across all sectors of society and data on psychological characteristics are unbiased before onset of disease. We found that high socioeconomic status was associated with excess cancer mortality and decreased cardiovascular disease mortality, and, inversely, that low socioeconomic status was associated with decreased cancer mortality and excess cardiovascular disease mortality. We also found that mental stress was an independent risk factor for breast cancer. Quality of life was found to be negatively affected by cancer during the first four years, after which subjective health improves.

Key words: Cancer, prospective study, breast cancer, social factors, mental stress, symptoms, SF-36, quality of life, women.

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