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## Religion/spiritual beliefs and oncology team who care for cancer patients

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Spirituality is an essential element of person-centered care and a critical factor in the way patients with cancer cope with their illness from diagnosis through treatment, survival, recurrence and dying. Despite the difficulty in clearly defining and measuring spirituality, a growing literature describes its importance in oncology and survivorship. Studies have indicated a significant relationship between spirituality and quality of life. Spirituality, in its broadest sense speaks to the meaning patients find in their lives especially during times of stress, illness and dying. Religious/spiritual beliefs influence patients' decision-making with respect to both complementary therapies and aggressive care at the end of life. Measures of spirituality and spiritual well-being correlate with quality of life in cancer patients, cancer survivors, and caregivers. Spiritual needs, reflective of existential concerns in several domains, are a source of significant distress, and care for these needs has been correlated with better psychological and spiritual adjustment as well as with less aggressive care at the end of life. Spiritual distress, as a diagnosis, requires attention and treatment just as any other clinical symptom. Spiritual resources of strength need to be identified and recognized as positive factors in patients' coping. Finally a treatment plan needs to include the spiritual as well as the physical and psychosocial issues of patients. Studies also show that while nurses and physicians regard some spiritual care as an appropriate aspect of their role, patients report that they provide it infrequently. Many clinicians report that their religious/spiritual beliefs influence their practice, and practices such as mindfulness have been shown to enhance clinician self-care and equanimity. Challenges remain in the areas of conceptualizing and measuring spirituality, developing and implementing training for spiritual care and coordinating and partnering with chaplains and religious communities. Integrating spirituality as an essential domain of care will result in better health outcomes, particularly quality of life for patients across the trajectory of cancer care.

### Biography

Mahdi Shahriari has obtained a Diploma from north of Iran and then in 1978 he entered Shiraz University of Medical Sciences. After 9 years of training in Medicine (1988), he was accepted as Pediatric Resident then he had practiced 2 years as Pediatrician. From April 1992 till July 1994, he was trained as Pediatric Hematologist-Oncologist and then became a Scientific Member of Shiraz University of Medical Sciences. He has more than 50 publications in the field of Hemostasis, Anemia and Pediatric Oncology. At present, he is Member of Board Certification of Pediatric Hematology - Oncology of Iran.

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