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Coping with Psychological Stress and Depression in Terminal III Diagnosis

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Depression and stress are the two universal factors that pre-occupied the terminal ill patient in the most degraded way. ough the concept of psychological depressive symptoms a ecting the terminal ill patient



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making quality decision, psychomotor agitation and suicidal motive because of the disease e ects, in which the psychological symptoms of depression is seen as the main characteristic of its outcomes. us, the early initiation of the psychological treatment within the adequate time period needs to be assessed. If the depressive symptom of hopelessness are not address in its early period it can easy combine with the grief response that usually causes the loss of certain abilities in patient terminal experience. e primary concern of the clinician should be the adequate control over pain and symptom management and other disease risks in patient advance illness and to prevent the patient from certain depressive disorders through any possible means.[11, 13]Most importantly the assessment should be in a regular basis, which includes the appropriate time and place, intensity, quality, acknowledgement of the factors that exacerbate and the element that elevate the level of stress and depression in patient terminal experience. It is also important for the clinician working in palliative end-of-life care to identify the di erence between the physiological tolerance, physical and psychological dependency, and pseudo-addiction in assessing the patient.[14]

Suggested Coping Strategies

 $Among all the \ e \ ective coping mechanism against stress and depression in terminal, drawing positive attitude to self and the given environment 12 (t) -4.9 (\underline{v}) 8.1 (en en) 23 (t) 1. Td[(cer) -10 (t) -5 (ni) 2.9 (s) 0.5 (t) -6 (t) -12 (n) 19 (s (wa) 9) (exception of the context of th$

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and other depressive stressors. e psychological stress and depression not only destroyed the patient peace of mind, but also possess the ability for cancer metastasis growth in the body parts and to disable the organs. e interplay between the environmental challenges, stressors and patient socio-economic, culture and religious background needs special consideration in cancer diagnosis to produces quality of life and wellbeing of the whole in the clinical practices. Developing positive mental health and healthy lifestyle is the core to cope with the psychological stress and depression in any terminal experiences. Moreover, even in the terminal stage when cure is not possible nding purpose and meaning in life can bene t self and other and is also an e ective coping mechanism to overcome mental health problems.

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