Purpose

This research tested how ways of coping and personality traits are associated with HRQOL in patients with breast cancer, after controlling for age, education, disease severity, and sleep disorders.

Methods

In a cross-sectional study of 207 patients with breast cancer, they completed a set of questionnaires at two general hospitals. The measures used were demographic and individual characteristics, personality traits, ways of coping, sleep quality, and health surveys.

We used correlations and hierarchical regressions to determine all relationships among factors, sleep disorders, personality, coping, and HRQOL.

Results

Most participants were reported as having stage II (77, 37.2%) breast cancer. About 60% patients with breast cancer have poor sleep and sleep disorders having a negative association with HRQOL.

Participants using more active coping, with lower neuroticism, and higher agreeableness traits are more likely to have a better physical quality of life (PQOL).

In the PQOL regression model, clinical conditions (duration since cancer diagnosis; sleep disorders) and two personality traits (neuroticism and agreeableness) significantly explained 23% of variance. Moreover, fewer sleep disorders and two personality traits (neuroticism and conscientiousness) significantly explained 31% of variance in the mental quality-of-life (MQOL) regression model.

Conclusions & Implications

A high prevalence of sleep disorders for patients with breast cancer has occurred.

Sleep disorders were negatively associated with PQOL and MQOL.

People with extraversion and agreeableness had significantly positive correlation with the three coping styles and had strong positive relationships with PQOL and MQOL.

In addition, neuroticism was positively related to sleep disorders and could be relevant to psycho-educational interventions.

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