Supplementary Materials

Pain Severity, Social Functioning and Analgesic Patterns in Cancer Outpatients with Pain: A Cross-Sectional Study of 272 Patients in Türkiye

The questionnaire was developed and administered in Turkish. Supplementary File S1 gives a literal English translation followed by the original Turkish version as administered. Where an SPSS value label used in data entry differed from the printed response option, the printed wording governs and the discrepancy is noted. Response options that group more than one drug or concept are reported as grouped, because the underlying components were not recorded separately.

Table S1. *Demographic and clinical characteristics of participants (n = 272).*

Variable / response category	n	%	Notes
Sex			
Female	145	53.3	
Male	127	46.7	
Age group (years)			
18–24	8	2.9	
25–34	16	5.9	
35–44	50	18.4	
45–54	62	22.8	
55–64	63	23.2	
65 and over	73	26.8	
Educational attainment			
Illiterate	56	20.6	
Primary school	109	40.1	
Secondary school	44	16.2	
High school	34	12.5	
University or above	29	10.7	
Income status relative to the national minimum wage			Single item asking how the participant would describe their income status, with response options anchored to the statutory national minimum wage. The interviewer asked participants to consider their own net monthly income. No absolute income figure was collected.
Below the minimum wage	119	43.8	
At the minimum wage level	145	53.3	
Above the minimum wage	8	2.9	
Stage of the cancer treatment pathway			
At diagnosis	3	1.1	
Currently receiving treatment	250	91.9	
Treatment completed	8	2.9	

Variable / response category	n	%	Notes
Under follow-up	11	4.0	
Time since diagnosis			
0–6 months	95	34.9	
6 months to 1 year	77	28.3	
More than 1 year	100	36.8	
Cancer type			
Breast	84	30.9	
Lung	78	28.7	
Colorectal	16	5.9	
Pancreas	15	5.5	
Prostate	6	2.2	
Gastro-oesophageal	14	5.1	
Malignant melanoma	10	3.7	
Head and neck	9	3.3	
Bladder	10	3.7	
Gynaecological	18	6.6	
Other	4	1.5	
Renal cell carcinoma	2	0.7	
Central nervous system	1	0.4	
Hepatobiliary	4	1.5	
Testicular	1	0.4	
Treatment modality currently received			Multiple-response item; participants could select more than one modality and combinations were entered as single coded responses. The printed options were chemotherapy, radiotherapy, surgery, immunotherapy and other; 'not currently receiving treatment' was not a printed option and was recorded for the 8 participants who stated that they were not on any anticancer treatment at the time of interview. Option-level frequencies are given in Table S5.
Chemotherapy	205	75.4	
Radiotherapy	3	1.1	
Chemoradiotherapy	29	10.7	
Surgery	1	0.4	
Immunotherapy	6	2.2	
Other	7	2.6	

Variable / response category	n	%	Notes
Chemotherapy and surgery	9	3.3	
Chemotherapy and immunotherapy	4	1.5	
Not currently receiving treatment	8	2.9	

Table S2. *Pain experience (n = 272).*

Pain intensity (0–10 numeric rating scale): mean 4.93 ± 2.46; median 5 (IQR 3–7). Mild (0–3) n = 91 (33.5%); moderate (4–6) n = 100 (36.8%); severe (7–10) n = 81 (29.8%). Full distribution in Figure 1.

Variable / response category	n	%	Notes
Informed about the source or cause of the pain			
Yes	235	86.4	
No	37	13.6	
Site of pain			Multiple-response item; participants could select more than one option, and the combinations actually chosen are listed as separate categories.
Head	8	2.9	
Neck	10	3.7	
Chest	75	27.6	
Abdomen	61	22.4	
Back	22	8.1	
Legs	10	3.7	
Other	6	2.2	
Chest, abdomen and legs	4	1.5	
Chest, abdomen and back	12	4.4	
Head, neck and back	7	2.6	
Chest and back	15	5.5	
Head and neck	10	3.7	
Widespread whole-body pain	14	5.1	
Head, neck and chest	4	1.5	
Chest and abdomen	4	1.5	
Abdomen and back	10	3.7	
How often pain is troublesome during the day			
Rarely	117	43.0	
Often	126	46.3	
All the time	29	10.7	
Effect of pain on activities of daily living			
No effect	6	2.2	
Slight effect	112	41.2	
Moderate effect	96	35.3	
Severe effect	58	21.3	

Variable / response category	n	%	Notes
Time of day when pain is felt most			
In the morning	54	19.9	
At midday	123	45.2	
In the evening	42	15.4	
Through the night	53	19.5	
Circumstances in which pain increases			Multiple-response item; participants could select more than one option, and the combinations actually chosen are listed as separate categories.
During movement	109	40.1	
At rest	24	8.8	
Under stress	90	33.1	
In cold or hot weather	25	9.2	
Other	8	2.9	
Movement and cold or hot weather	8	2.9	
All of these	8	2.9	
Usual duration of a pain episode			
A few minutes	63	23.2	
A few hours	124	45.6	
All day	49	18.0	
Continuous	36	13.2	
Descriptor that best fits the pain			
Sharp and stabbing	120	44.1	
Burning	80	29.4	
Squeezing	48	17.6	
Dull and continuous	24	8.8	
Behaviour adopted when in pain			Multiple-response item; participants could select more than one option, and the combinations actually chosen are listed as separate categories.
Stay still	76	27.9	
Turn my attention elsewhere	57	21.0	
Take medication	132	48.5	
Other	6	2.2	
All of these	1	0.4	

Table S3. *Pain management and treatment (n = 272).*

Variable / response category	n	%	Notes
Uses analgesics			

Variable / response category	n	%	Notes
Yes	269	98.9	
No	3	1.1	
Perceived effect of analgesics			Denominator is the 269 participants who reported regular analgesic use. Three further participants who reported not using an analgesic regularly nevertheless answered this item (they used a non-opioid intermittently); they are excluded here, as stated in Methods Section 2.9, and retained in the class-level denominators below.
Very effective	36	13.4	
Effective	136	50.6	
Slightly effective	90	33.5	
Not effective at all	7	2.6	
Analgesic class reported			Single item listing drug classes; a participant reporting more than one class had the combination entered as one coded response. The first option grouped paracetamol with NSAIDs as printed in the instrument, so paracetamol exposure cannot be separated from true NSAID exposure. Class-level frequencies derived by counting every response containing that class are given in Table S5.
Non-opioid (paracetamol or NSAID), grouped	176	64.7	
Tramadol	38	14.0	
Morphine	4	1.5	
Transdermal fentanyl	4	1.5	
Other	5	1.8	
Non-opioid (grouped) and tramadol	36	13.2	
Non-opioid (grouped), tramadol and fentanyl	8	2.9	
Morphine and fentanyl	1	0.4	
Methods used to manage pain			Multiple-response item; participants could select more than one option, and the combinations actually chosen are listed as separate categories.

Variable / response category	n	%	Notes
Prescription analgesics	238	87.5	
Prescription and over-the-counter analgesics	20	7.4	
Acupuncture	1	0.4	
Physiotherapy	1	0.4	
Phytotherapy	4	1.5	
Prescription and OTC analgesics plus phytotherapy	7	2.6	
Prescription and OTC analgesics plus meditation	1	0.4	
Perceived effectiveness of pain treatment overall			
Very effective	36	13.2	
Effective	115	42.3	
Moderately effective	119	43.8	
Ineffective	2	0.7	
Received sufficient information about pain management from the physician or health care team			The item asks about information received, not about support in general; the SPSS value label used the word 'support' and has been corrected here to match the printed item.
Yes, I received sufficient information	217	79.8	
No	55	20.2	
Uses alternative methods to cope with pain			
Yes	110	40.4	
No	162	59.6	
Frequency of analgesic use			
Regularly every day	89	32.7	
Only when pain worsens	153	56.3	
Very rarely	30	11.0	
Method considered most effective for reducing pain			
Increasing analgesic medication	136	50.0	
Alternative therapies (phytotherapy, acupuncture, massage, etc.)	69	25.4	
Provision of psychological support	43	15.8	
Education and information activities	24	8.8	
Greatest difficulty experienced in pain management			Multiple-response item; participants could select more than one option, and the combinations actually chosen are listed as separate categories.
Side effects of medication	132	48.5	
Difficulty accessing treatment	32	11.8	
Insufficient support from health care staff	18	6.6	
Persistence of the pain	82	30.1	

Variable / response category	n	%	Notes
Other	8	2.9	
Physician created an individualised pain management plan			
Yes	132	48.5	
No	90	33.1	
Not sure	50	18.4	
Satisfaction with the pain management methods used			
Very satisfied	48	17.6	
Satisfied	114	41.9	
Moderately satisfied	100	36.8	
Not satisfied	10	3.7	
Health professionals from whom support was received			Multiple-response item; participants could select more than one option, and the combinations actually chosen are listed as separate categories.
Physician	124	45.6	
Nurse	27	9.9	
Physician and nurse	112	41.2	
Psychologist	7	2.6	
Other	2	0.7	
Consulted about adjusting the dose of pain medication			
Yes	136	50.0	
No	85	31.3	
Sometimes	51	18.8	
Methods that were financially burdensome			Multiple-response item; participants could select more than one option, and the combinations actually chosen are listed as separate categories.
Medications	129	47.4	
Alternative treatments	78	28.7	
Psychological support	36	13.2	
Other	20	7.4	
Nothing was financially burdensome	9	3.3	

Table S4. *Psychological and social status (n = 272).*

Variable / response category	n	%	Notes
Effect of pain on quality of life			
Not affected at all	12	4.4	
Slightly affected	84	30.9	

Variable / response category	n	%	Notes
Moderately affected	100	36.8	
Severely affected	76	27.9	
Emotional states experienced more often because of pain			Multiple-response item; participants could select more than one option, and the combinations actually chosen are listed as separate categories.
Anxiety	46	16.9	
Depression	22	8.1	
Stress	69	25.4	
Hopelessness	13	4.8	
None of these	19	7.0	
Depression and hopelessness	7	2.6	
All of these	18	6.6	
Anxiety and hopelessness	13	4.8	
Anxiety and stress	21	7.7	
Stress and hopelessness	7	2.6	
Anxiety, depression and stress	16	5.9	
Anxiety, depression and hopelessness	7	2.6	
Anxiety, stress and hopelessness	14	5.1	
Effect of pain on social life			
No effect	32	11.8	
Reduced communication with friends and family	102	37.5	
Makes participation in social activities difficult	108	39.7	
Has caused complete isolation	30	11.0	
Receiving professional support for the psychological effects of pain			
Yes	50	18.4	
No	222	81.6	
Areas of difficulty attributed to pain			Multiple-response item; participants could select more than one option, and the combinations actually chosen are listed as separate categories.
Sleep pattern	62	22.8	
Concentration and attention	39	14.3	
Loss of appetite	34	12.5	
Carrying out daily tasks	16	5.9	
All of these	45	16.5	
Sleep pattern and daily tasks	28	10.3	
Sleep pattern and appetite	44	16.2	

Variable / response category	n	%	Notes
Daily tasks and appetite	4	1.5	
Type of support considered most helpful			
Psychological counselling	84	30.9	
Support of family and social circle	100	36.8	
More effective analgesic treatment	62	22.8	
Education and information programmes	26	9.6	
Methods tried to reduce the psychological effects of pain			Multiple-response item; participants could select more than one option, and combinations were entered as single coded responses. The printed options were meditation, keeping a diary, breathing exercises and other; the SPSS value label for the first option read 'meditation / religious ritual' and has been corrected here to the printed wording. Participants who endorsed none of the listed methods are reported as 'None of the listed methods'.
Meditation	63	23.2	
Keeping a diary	21	7.7	
Breathing exercises	55	20.2	
Other	60	22.1	
None of the listed methods endorsed	73	26.8	
Perceived contribution of psychological support to pain management			
Very beneficial	20	7.4	
Beneficial	110	40.4	
Moderately beneficial	103	37.9	
Not at all	39	14.3	

Table S5. Option-level endorsement frequencies for every item that permitted more than one response (n = 272).

Item	Response option	n	%
Treatment modality currently received	Chemotherapy	247	90.8
	Radiotherapy	32	11.8
	Surgery	10	3.7
	Immunotherapy	10	3.7
	Other	7	2.6
	Not currently receiving treatment	8	2.9
Site of pain	Chest	114	41.9
	Abdomen	91	33.5
	Back	66	24.3
	Neck	31	11.4
	Head	29	10.7
	Legs	14	5.1
	Widespread whole-body pain	14	5.1
	Other	6	2.2
Circumstances in which pain increases	During movement	125	46.0
	Under stress	98	36.0
	In cold or hot weather	41	15.1
	At rest	32	11.8
	Other	8	2.9
Behaviour adopted when in pain	Take medication	133	48.9
	Stay still	77	28.3
	Turn my attention elsewhere	58	21.3
	Other	6	2.2
Analgesic class reported	Non-opioid (paracetamol or NSAID), grouped	220	80.9
	Tramadol	82	30.1
	Transdermal fentanyl	13	4.8
	Morphine	5	1.8
	Any strong opioid (morphine or fentanyl)	17	6.2
	Other, unspecified	5	1.8
Methods used to manage pain	Prescription analgesics	266	97.8
	Over-the-counter analgesics	28	10.3
	Phytotherapy	11	4.0
	Acupuncture	1	0.4

Item	Response option	n	%
	Physiotherapy	1	0.4
	Meditation or yoga	1	0.4
Emotional states attributed to pain	Stress	145	53.3
	Anxiety	135	49.6
	Hopelessness	79	29.0
	Depression	70	25.7
	None of these	19	7.0
Areas of difficulty attributed to pain	Sleep disturbance	179	65.8
	Appetite loss	127	46.7
	Inability to perform daily tasks	93	34.2
	Impaired concentration	84	30.9
Health professionals from whom pain-management support was received	Physician	236	86.8
	Nurse	139	51.1
	Psychologist	7	2.6
	Other	2	0.7
	Physiotherapist	0	0.0
Component of pain management perceived as most costly	Medication	129	47.4
	Alternative treatments	78	28.7
	Psychological support	36	13.2
	Other	20	7.4
	Nothing was financially burdensome	9	3.3
Methods tried to reduce the psychological effects of pain	Meditation	63	23.2
	Breathing exercises	55	20.2
	Keeping a diary	21	7.7
	Other	60	22.1
	None of the listed methods endorsed	73	26.8

Each participant's recorded response was a single code that could represent one option or a named combination of options; the frequencies above count every participant whose recorded response contained the given option, so they sum to more than 100% within an item. The combination-level distributions, as entered, are given in Tables S1–S4. The non-opioid analgesic option grouped paracetamol with NSAIDs as printed in the instrument, and individual agents were not recorded, so exposure to paracetamol cannot be separated from exposure to a true NSAID. 'Not currently receiving treatment' was not a printed option (see Table S1).

Table S6. Reported analgesic regimen class by pain severity band (n = 267 participants whose recorded response could be classified).

Pain severity band	Non-opioid only, n (%)	Weak opioid only, n (%)	Strong opioid-containing, n (%)	Total
Mild (NRS 0–3)	66 (75.0)	20 (22.7)	2 (2.3)	88
Moderate (NRS 4–6)	69 (69.7)	25 (25.3)	5 (5.1)	99
Severe (NRS 7–10)	41 (51.2)	29 (36.2)	10 (12.5)	80
Total	176 (65.9)	74 (27.7)	17 (6.4)	267

Percentages are column-wise within each severity band. Five participants who reported an unspecified 'other' analgesic could not be classified and are excluded. Non-opioid only = the grouped paracetamol/NSAID option without an opioid; weak opioid only = tramadol, with or without a non-opioid, and no strong opioid; strong opioid-containing = morphine or transdermal fentanyl, alone or in combination. Monte-Carlo approximation to the exact test (200,000 permutations) $p = 0.005$; Pearson $\chi^2 = 14.35$, $df = 4$, $p = 0.006$, with no expected count below 5 (minimum 5.09). Cochran–Armitage test for trend in strong-opioid use across the three ordered bands, computed on all 272 participants: $z = 2.72$, $p = 0.007$. Pain severity refers to worst pain in the preceding seven days.

Supplementary File S1. Study questionnaire

The instrument was developed for this study on the basis of a literature review, reviewed for content by three medical oncology specialists and pilot-tested in 10 patients who were not included in the analytic sample. It was written and administered in Turkish. The English translation below is provided for readers; the Turkish version as administered follows it. Items marked *(multiple responses permitted)* allowed more than one option to be selected.

Pain Experience and Management in Cancer Patients: Assessment of Psychological and Social Effects

Dear participant, this questionnaire aims to understand the pain experiences of patients with cancer, the methods used in pain management and the difficulties encountered in this process. Your answers will be kept confidential and used solely for academic research. Thank you for taking part.

Consent. Do you agree to participate?

- □ Yes
- □ No

Section 1. Demographic information

1. What is your sex?

- □ Female
- □ Male

2. What is your age?

- □ 18–24
- □ 25–34
- □ 35–44
- □ 45–54
- □ 55–64
- □ 65 and over

3. What is your level of education?

- □ Illiterate
- □ Primary school
- □ Secondary school
- □ High school
- □ University or above

4. How would you describe your income status? [Translator's note: the Turkish stem reads "Gelir durumunuzu nasıl değerlendirirsiniz?" and carries no reference to the minimum wage; the anchor is carried

by the response options below. The interviewer asked participants to consider their own net monthly income.]

- □ Below the minimum wage
- □ At the minimum wage
- □ Above the minimum wage

5. At which stage of the cancer treatment process are you?

- □ At the diagnostic stage
- □ I am receiving treatment
- □ I have completed treatment
- □ I am under follow-up

6. When were you diagnosed with cancer?

- □ 0–6 months ago
- □ 6 months to 1 year ago
- □ More than 1 year ago

7. What is your cancer type?

- □ Breast cancer
- □ Lung cancer
- □ Colorectal cancer
- □ Pancreatic cancer
- □ Prostate cancer
- □ Gastro-oesophageal cancer
- □ Malignant melanoma
- □ Head and neck cancer
- □ Bladder cancer
- □ Gynaecological cancer (ovarian, endometrial, etc.)
- □ Other: …

8. Which treatments are you currently receiving? (multiple responses permitted) [Translator's note: "not currently receiving treatment" was not a printed option; it was recorded for the 8 participants who stated that they were on no anticancer treatment at the time of interview.]

- □ Chemotherapy
- □ Radiotherapy
- □ Surgery
- □ Immunotherapy
- □ Other: …

Section 2. Pain experience

1. Were you given information about the source or cause of your pain?

- □ Yes
- □ No

2. In which region is the pain felt? (multiple responses permitted)

- □ Head
- □ Neck
- □ Chest
- □ Abdomen
- □ Back
- □ Legs
- □ Other: …

3. Rate the intensity of your pain from 0 to 10 (0 = no pain at all, 10 = unbearable pain). [Translator's note: the printed item carries no recall window. The single interviewer asked every participant, in the same wording, to rate the worst pain experienced in the preceding seven days.]

□ 0 1 2 3 4 5 6 7 8 9 10

4. How often does pain trouble you during the day?
- □ Never
- □ Rarely
- □ Often
- □ All the time

5. How does pain affect your activities of daily living?
- □ No effect at all
- □ Slight effect
- □ Moderate effect
- □ Severe effect

6. When is the pain felt most?
- □ In the mornings
- □ At midday
- □ In the evenings
- □ Through the night

7. In which situations does the pain increase? (multiple responses permitted)
- □ During movement
- □ At rest
- □ In stressful situations
- □ In cold or hot weather
- □ Other: …

8. How long does the pain usually last?
- □ A few minutes
- □ A few hours
- □ All day
- □ Continuously

9. Choose the expression that best describes the pain.
- □ Sharp and stabbing
- □ Burning
- □ Squeezing
- □ Dull and continuous

10. What do you do when you are in pain?
- □ I stay still
- □ I try to turn my attention elsewhere
- □ I take medication
- □ Other: …

Section 3. Pain management and treatment

1. Do you use analgesics during your cancer illness?
- □ Yes
- □ No

2. If you use analgesics, how do you find their effect?
- □ Very effective
- □ Effective
- □ Slightly effective
- □ Not effective at all

3. Which analgesics do you use? (multiple responses permitted)

□ NSAID (paracetamol, ibuprofen, naproxen, etc.) [Translator's note: this printed option groups paracetamol, which is not an NSAID, with the NSAIDs. Individual agents were not recorded, so the two cannot be separated; the option is reported throughout as a grouped non-opioid analgesic category.]
□ Tramadol
□ Morphine
□ Transdermal fentanyl patch
□ Other: …

4. Do you use any of the following methods to manage pain? (multiple responses permitted)
□ Prescription analgesics
□ Over-the-counter analgesics
□ Acupuncture
□ Physiotherapy
□ Meditation or yoga
□ Phytotherapy
□ Other: …

5. How do you rate the effectiveness of your pain treatment?
□ Very effective
□ Effective
□ Moderately effective
□ Ineffective

6. Have you received sufficient information about pain management from your physician or health care team?
□ Yes, I received sufficient information
□ No, I did not receive sufficient information

7. Do you turn to alternative methods to cope with pain?
□ Yes
□ No

8. How often do you use analgesic medication?
□ Regularly every day
□ Only when the pain worsens
□ Very rarely

9. Which methods do you think are more effective in reducing pain?
□ Increasing analgesic medication
□ Applying alternative treatment methods (e.g. phytotherapy, acupuncture, massage)
□ Providing psychological support
□ Education and information activities

10. What is the greatest difficulty you experience in pain management?
□ Side effects of the medication
□ Difficulty in accessing treatment
□ Not receiving enough support from health care staff
□ The pain being continuous
□ Other: …

11. Has your physician created a pain management plan specifically for you?
□ Yes
□ No
□ I am not sure

12. Rate your level of satisfaction with the pain management methods you use.
□ Very satisfied
□ Satisfied

- □ Moderately satisfied
- □ Not satisfied

13. Which of the following health professionals have supported you in managing your pain? (multiple responses permitted)

- □ Physician
- □ Nurse
- □ Physiotherapist
- □ Psychologist
- □ Other: …

14. Are you consulted about adjusting the dose of the medication used to manage your pain?

- □ Yes
- □ No
- □ Sometimes

15. Which of the methods you use to manage pain have been financially burdensome? (multiple responses permitted)

- □ Medications
- □ Alternative treatments
- □ Psychological support
- □ Other: …

Section 4. Psychological and social status

1. How has your quality of life been affected by pain?

- □ Not affected at all
- □ Slightly affected
- □ Moderately affected
- □ Severely affected

2. Which emotional states do you experience more often because of your pain? (multiple responses permitted)

- □ Anxiety
- □ Depression
- □ Stress
- □ Hopelessness
- □ None of these

3. How does pain affect your social life?

- □ No effect at all
- □ It has reduced my communication with friends and family
- □ It makes it difficult for me to take part in social activities
- □ It has caused me to become completely isolated

4. Are you receiving professional support to cope with the psychological effects of your pain?

- □ Yes
- □ No

5. In which of the following do you experience difficulty because of your pain? (multiple responses permitted)

- □ Sleep pattern
- □ Concentration and attention
- □ Loss of appetite
- □ Carrying out daily tasks

6. Which types of support could be more helpful for you in coping with pain?

- □ Psychological counselling
- □ Support of family and social circle
- □ More effective analgesic treatments

- □ Education and information programmes

7. Which of the following methods do you try in order to reduce the psychological effects of your pain? (multiple responses permitted)

- □ Meditation
- □ Keeping a diary
- □ Breathing exercises
- □ Other: …

8. How do you rate the contribution of psychological support to pain management?

- □ Very beneficial
- □ Beneficial
- □ Moderately beneficial
- □ Of no benefit

9. What other methods do you use to cope with your pain? (free text)

10. Is there anything you would like to add about pain management? (free text)

Supplementary File S1 (continued). Original Turkish version as administered

Reproduced below is the questionnaire as administered to participants, in the original Turkish. Two clerical points are noted for transparency: in the administered form the final item of Section 3 was numbered 16 (number 15 was skipped) and is renumbered 15 here, and head and neck cancer appeared twice in the response list of Section 1, item 7 and is listed once here; responses were coded to a single category.

Kanser Hastalarında Ağrı Deneyimi ve Yönetimi: Psikolojik ve Sosyal Etkilerin Değerlendirilmesi

Değerli Katılımcı, bu anket, kanser hastalarının ağrı deneyimlerini, ağrı yönetiminde kullanılan yöntemleri ve bu süreçte karşılaşılan zorlukları anlamayı amaçlamaktadır. Yanıtlarınız gizli tutulacak ve yalnızca akademik araştırma amacıyla kullanılacaktır. Katılımınız için teşekkür ederiz.

Onam. Katılmayı kabul ediyor musunuz?

- □ Evet
- □ Hayır

Bölüm 1: Demografik Bilgiler

1. Cinsiyetiniz:

- □ Kadın
- □ Erkek

2. Yaşınız:

- □ 18-24
- □ 25-34
- □ 35-44
- □ 45-54
- □ 55-64
- □ 65 ve üzeri

3. Eğitim seviyeniz nedir?

- □ Okuryazar değil
- □ İlkokul
- □ Ortaokul
- □ Lise
- □ Üniversite ve üzeri

4. Gelir durumunuzu nasıl değerlendirirsiniz?

- □ Asgari ücretin altı
- □ Asgari ücret seviyesi
- □ Asgari ücretin üzeri

5. Kanser tedavisi sürecinde hangi aşamadasınız?

- □ Teşhis aşamasında
- □ Tedavi sürecindeyim
- □ Tedaviyi tamamladım
- □ Takip aşamasındayım

6. Kanser teşhisiniz ne zaman konuldu?

- □ 0-6 ay
- □ 6 ay-1 yıl
- □ 1 yıldan fazla

7. Kanser türünüz:

- □ Meme kanseri
- □ Akciğer kanseri
- □ Kolorektal kanser

- □ Pankreas
- □ Prostat kanseri
- □ Mide-Özofagus kanseri
- □ Malign Melanom
- □ Baş-boyun kanseri
- □ Mesane kanseri
- □ Jinekolojik kanser (over, endometrium, vb.)
- □ Diğer: …

8. Şu anda hangi tedavi yöntemlerini alıyorsunuz? (Birden fazla seçebilirsiniz.)
- □ Kemoterapi
- □ Radyoterapi
- □ Cerrahi
- □ İmmünoterapi
- □ Diğer: …

Bölüm 2: Ağrı Deneyimi

1. Ağrınızın kaynağı veya sebebi hakkında bilgi verildi mi?
- □ Evet
- □ Hayır

2. Ağrı hangi bölgede hissediliyor? (Birden fazla seçebilirsiniz.)
- □ Baş
- □ Boyun
- □ Göğüs
- □ Karın
- □ Sırt
- □ Bacaklar
- □ Diğer: …

3. Ağrı şiddetinizi (0-10 arasında) değerlendirin: 0 = Hiç ağrı yok, 10 = Dayanılmaz ağrı
- □ 0 1 2 3 4 5 6 7 8 9 10

4. Ağrı gün içinde ne sıklıkla sizi rahatsız ediyor?
- □ Hiç
- □ Nadiren
- □ Sıklıkla
- □ Her zaman

5. Ağrı günlük yaşam aktivitelerinizi nasıl etkiliyor?
- □ Hiç etkilemiyor
- □ Az etkiliyor
- □ Orta düzeyde etkiliyor
- □ Ciddi düzeyde etkiliyor

6. Ağrı ne zaman en çok hissediliyor?
- □ Sabahları
- □ Gün ortasında
- □ Akşamları
- □ Gece boyunca

7. Ağrı hangi durumlarda artıyor? (Birden fazla seçebilirsiniz.)
- □ Hareket sırasında
- □ Dinlenme sırasında
- □ Stresli durumlarda
- □ Soğuk veya sıcak havalarda

□ Diğer: …

8. Ağrının süresi genellikle ne kadar sürüyor?
□ Birkaç dakika
□ Birkaç saat
□ Bütün gün
□ Sürekli

9. Ağrıyı tanımlayacak en uygun ifadeyi seçin:
□ Keskin ve batıcı
□ Yanıcı
□ Sıkıştırıcı
□ Donuk ve devamlı

10. Ağrı durumunda hangi davranışları sergiliyorsunuz?
□ Hareketsiz kalıyorum
□ Dikkatimi başka yöne çevirmeye çalışıyorum
□ İlaç alıyorum
□ Diğer: …

Bölüm 3: Ağrı Yönetimi ve Tedavi

1. Kanser hastalığınız sırasında ağrı kesici kullanıyor musunuz?
□ Evet
□ Hayır

2. Eğer ağrı kesiciler kullanıyorsanız, bu ilaçların etkisini nasıl buluyorsunuz?
□ Çok etkili
□ Etkili
□ Az etkili
□ Hiç etkili değil

3. Hangi ağrı kesicileri kullanıyorsunuz? (Birden fazla seçebilirsiniz.)
□ NSAİİ (Parasetamol, İbuprofen, Naproksen vb.)
□ Tramadol (Contramal)
□ Morfin
□ Fentanil (Durogesic ağrı bandı)
□ Diğer: …

4. Ağrıyı yönetmek için aşağıdaki yöntemleri kullanıyor musunuz? (Birden fazla seçebilirsiniz.)
□ Reçeteli ağrı kesiciler
□ Reçetesiz ağrı kesiciler
□ Akupunktur
□ Fizik tedavi
□ Meditasyon/yoga
□ Fitoterapi
□ Diğer: …

5. Ağrı tedavinizin etkinliğini nasıl değerlendiriyorsunuz?
□ Çok etkili
□ Etkili
□ Orta düzeyde etkili
□ Etkisiz

6. Ağrı yönetimi konusunda doktorunuzdan veya sağlık ekibinden yeterli bilgi aldınız mı?
□ Evet, yeterli bilgi aldım
□ Hayır, yeterli bilgi almadım

7. Ağrıyla başa çıkmak için alternatif yöntemlere başvuruyor musunuz?
- □ Evet
- □ Hayır

8. Ağrı kesici ilaçları kullanma sıklığınız nedir?
- □ Her gün düzenli olarak
- □ Sadece ağrı şiddetlendiğinde
- □ Çok nadiren

9. Ağrıyı azaltmada hangi yöntemlerin daha etkili olduğunu düşünüyorsunuz?
- □ Ağrı kesici ilaçların artırılması
- □ Alternatif tedavi yöntemlerinin uygulanması (örneğin fitoterapi, akupunktur, masaj vb.)
- □ Psikolojik destek sağlanması
- □ Eğitim ve bilgilendirme faaliyetleri

10. Ağrı yönetiminde yaşadığınız en büyük zorluk nedir?
- □ İlaçların yan etkileri
- □ Tedaviye erişim güçlüğü
- □ Sağlık çalışanlarından yeterli destek alamama
- □ Ağrının sürekli olması
- □ Diğer: …

11. Doktorunuz ağrı yönetimi konusunda size özel bir plan oluşturdu mu?
- □ Evet
- □ Hayır
- □ Emin değilim

12. Kullandığınız ağrı yönetimi yöntemlerinden memnuniyet düzeyinizi değerlendirin:
- □ Çok memnunum
- □ Memnunum
- □ Orta düzeyde memnunum
- □ Memnun değilim

13. Ağrınızın yönetiminde aşağıdaki sağlık profesyonellerinden hangilerinden destek aldınız? (Birden fazla seçebilirsiniz.)
- □ Doktor
- □ Hemşire
- □ Fizyoterapist
- □ Psikolog
- □ Diğer: …

14. Ağrınızın yönetiminde kullanılan ilaçların dozunu ayarlama konusunda size danışılıyor mu?
- □ Evet
- □ Hayır
- □ Bazen

15. Ağrıyı yönetmek için kullandığınız yöntemlerin hangileri maliyet açısından zorlayıcı oldu? (Birden fazla seçebilirsiniz.)
- □ İlaçlar
- □ Alternatif tedaviler
- □ Psikolojik destek
- □ Diğer: …

Bölüm 4: Psikolojik ve Sosyal Durum

1. Ağrı nedeniyle yaşam kaliteniz nasıl etkilendi?
- □ Hiç etkilenmedi
- □ Hafif etkilendi

□ Orta düzeyde etkilendi
□ Ciddi düzeyde etkilendi

2. Ağrınız nedeniyle hangi duygusal durumları daha sık yaşıyorsunuz? (Birden fazla seçebilirsiniz.)
□ Kaygı
□ Depresyon
□ Stres
□ Umutsuzluk
□ Hiçbiri

3. Ağrı, sosyal yaşamınızı nasıl etkiliyor?
□ Hiç etkilemiyor
□ Arkadaş ve aile ile iletişimimi azalttı
□ Sosyal aktivitelerime katılmamı zorlaştırıyor
□ Tamamen izole olmama neden oldu

4. Ağrınızın yarattığı psikolojik etkilerle başa çıkmak için profesyonel destek alıyor musunuz?
□ Evet
□ Hayır

5. Ağrınız nedeniyle aşağıdaki konulardan hangilerinde zorluk yaşıyorsunuz? (Birden fazla seçebilirsiniz.)
□ Uyku düzeni
□ Odaklanma ve dikkat
□ İştah kaybı
□ Günlük görevleri yerine getirme

6. Ağrıyla başa çıkmada hangi tür destekler sizin için daha faydalı olabilir?
□ Psikolojik danışmanlık
□ Aile ve sosyal çevrenin desteği
□ Daha etkili ağrı kesici tedaviler
□ Eğitim ve bilgilendirme programları

7. Ağrınızın psikolojik etkilerini azaltmak için aşağıdaki yöntemlerden hangilerini deniyorsunuz? (Birden fazla seçebilirsiniz.)
□ Meditasyon
□ Günlük tutma
□ Nefes egzersizleri
□ Diğer: …

8. Psikolojik desteğin ağrı yönetimine olan katkısını nasıl değerlendiriyorsunuz?
□ Çok faydalı
□ Faydalı
□ Orta düzeyde faydalı
□ Hiç faydası yok

9. Ağrınızla baş etmek için başka hangi yöntemleri kullanıyorsunuz? (açık uçlu)

10. Ağrı yönetimi konusunda eklemek istediğiniz bir şey var mı? (açık uçlu)