

# Partners of cancer survivors at risk for depression

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A new study shows that partners of cancer survivors are susceptible to the same stresses as cancer survivors themselves over the long term, and in some cases, suffer more quality of life-related effects than survivors. The results of the study, which examined partners of cancer survivors who had undergone blood and marrow transplant (BMT) as part of their treatment, are being published online April 10 in the *Journal of Clinical Oncology* (JCO).

"These findings highlight the importance of addressing the needs of family members who care for cancer patients, and who may be suffering in silence," said Michelle M. Bishop, Ph.D., Research Assistant Professor, University of Florida, and the study's lead author. "We need to acknowledge that cancer occurs in the context of a family that is profoundly affected by the experience, and that needs intervention for their own well-being."

The study found that while partners of cancer survivors reported better physical health, less fatigue, and less cognitive dysfunction than cancer survivors, they experienced equal levels of mental health impairment. The study further found that while similar numbers of partners and survivors suffered from clinical depression (20% vs. 22%), depressed partners were less likely than depressed survivors to receive mental health treatment (34% vs. 58%). Partners also reported less social support, spiritual well-being, marital satisfaction, and more loneliness than survivors. In contrast to survivors, partners reported little "post-traumatic growth" (positive personal change occurring as a result of the

cancer experience).

Previous research has found that the partners of cancer patients experience as much if not more anxiety, distress, and depression than patients themselves. However, this is the first study to examine the very long-term quality of life issues faced by partners of patients who have recovered from their cancer.

The study evaluated 177 partner pairs who had been together since cancer treatment, which took place an average of seven years prior to the study. The pairs answered questions about their physical functioning and well-being, psychological adjustment, social functioning and marital adjustment, spiritual well-being, and post traumatic growth.

Researchers focused on cancer survivors who had received BMT as part of their treatment because little is known about the long-term quality of life outcomes for these patients. BMT is used to treat an increasing number of cancers, and approximately 40,000 BMTs are performed each year.

"While we focused on partners of cancer survivors who received BMT, there is some evidence in the literature to suggest that the issues faced by the partners of other cancer survivors may be similar," added Dr. Bishop.

Source: American Society of Clinical Oncology

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