

Anxiety, mood disorders put cancer patients at risk for PTSD

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Breast cancer patients who have a prior history of mood and anxiety disorders are at a much higher risk of experiencing posttraumatic stress disorder following their diagnosis, new research suggests.

A study of 74 breast cancer patients at the Ohio State University Medical Center found that 16 percent of them (12 women) suffered from PTSD 18 months after diagnosis.

Women with PTSD were more than twice as likely as breast cancer patients without the disorder to have suffered from previous mood disorders such as depression before the cancer diagnosis. They were also more than three times more likely to have experienced anxiety disorders.

“What is unique about breast cancer patients with PTSD is that they have already had this double hit of both anxiety and mood disorders even before they got the diagnosis,” said Barbara Andersen, co-author of the study and professor of psychology at Ohio State University.

“So when they are in a new situation that is very anxiety provoking – cancer diagnosis and treatment – it is not surprising that they are at risk for developing PTSD.”

The findings suggest that doctors should screen newly diagnosed breast cancer patients for past mood disorders, she said. Those who have histories of mood and anxiety disorders may need help in order to avoid PTSD. However, the results also show that most breast cancer patients

aren't at risk for PTSD.

Andersen conducted the study with Deanna Golden-Kreutz, clinical research manager at Ohio State's Cardiovascular Clinical Research Unit, and Rebecca Shelby, a former Ohio State graduate student now at the Duke University Medical Center.

Their study appears in the April 2008 issue of the *Journal of Traumatic Stress*.

In addition to the women who had PTSD, another 20 percent (15 women) had "subsyndromal" PTSD, meaning that they experienced significant symptoms of PTSD, but not at the level of those with the full diagnosis.

Patients with subsyndromal PTSD were more likely than others to have had mood disorders, but compared to those who had full PTSD, were much less likely to suffer from anxiety disorders, Andersen said.

The findings showed that past alcohol and substance abuse was also linked to posttraumatic stress disorder symptoms. About one-third of women with PTSD had a past history of alcohol/substance abuse or dependence, compared to one-fifth of subsyndromal women and one-tenth of women with no PTSD.

Another issue for women who had PTSD – as compared to those with subsyndromal PTSD and those with no PTSD -- was a history of traumatic life events, the study found. For example, half of the PTSD patients reported having been physically attacked or abused in their lives, compared to less than 17 percent of women in the other two groups.

Although women with subsyndromal symptoms generally fared better than those with the full disorder, in some cases women in both groups

faced significant coping difficulties. Women in the two groups were nearly four times more likely than those with no PTSD to say they were unable to work because of emotional distress (42 percent of PTSD group, 40 percent of subsyndromal group, and 11 percent of those with no PTSD.)

“That’s a huge difference, and shows the real-life impact that PTSD symptoms can have on some breast cancer patients,” Andersen said.

While the study suggests most cancer patients aren’t at risk for PTSD, Andersen said mood disorders are another matter.

“I think depression is the mental health condition that needs the most attention as far as treating breast cancer patients, even more so than PTSD” she said. “That’s the direction our research is going, and we are working to develop an intervention to treat cancer patients with depression.”

Source: Ohio State University

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