

Survivors of childhood cancers 4 times more likely to develop post-traumatic stress disorder

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Young adult survivors of childhood cancers are four times more likely to develop Post-Traumatic Stress Disorder (PTSD) than their control group siblings, a Childhood Cancer Survivors Study has found.

The study focused on 6,542 childhood cancer survivors over 18 who were diagnosed with cancer between 1970 and 1986 and 368 of their siblings as a control group. The study found that 589 survivors, or 9 percent, reported significant functional impairment and clinical distress as well as symptoms consistent with a full diagnosis of [PTSD](#). In comparison, eight siblings, or 2 percent, reported impairment, distress and PTSD symptoms.

The study is published in the May issue of the journal *Pediatrics*.

"Childhood cancer survivors, like others with PTSD, have been exposed to an event that made them feel very frightened or helpless or horrified," said Dr. Margaret Stuber, a professor of psychiatry and biobehavioral sciences, a Jonsson Cancer Center researcher and first author of the study. "This study demonstrates that some of these survivors are suffering many years after successful treatment. Development of PTSD can be quite disabling for cancer survivors. This is treatable and not something they have to just live with."

Affected survivors reported symptoms such as increased arousal,

phobias, startling easily, being hyper vigilant, avoidance of reminders of their cancer diagnosis and treatment, being on edge and suffering extreme anxiety. They also reported that the symptoms kept them from functioning normally.

Other studies have looked for PTSD in childhood cancer survivors while they're still children or adolescents, but the percentage reporting symptoms is far less, about 3 percent, Stuber said.

There could be several reasons for the discrepancy. Today's treatment regimens employ less toxic treatments and rely far less on whole head radiation for [brain tumors](#), causing far less trauma to the young patients. Additionally, the improved supportive care available today may result in fewer physical and cognitive late effects from treatment.

The survivors in Stuber's study often underwent far harsher treatment regimens commonly used in the 1970s and early 1980s, and within the group studied, those that underwent the more toxic and damaging therapies reported more cases of PTSD.

Another possible reason that more of the young adults reported PTSD symptoms is because they're facing the stressful situations typical for people at that age - finding a job, getting married, starting a family. That stress may exacerbate the PTSD, Stuber said.

"It may be that symptoms, clinical distress and functional impairment only emerge among the more vulnerable childhood cancer survivors as they contend with the developmental tasks of young adulthood and the added challenges of the late effects of treatment," the study states. "The relative protection of the parental home is diminished as young adult survivors face the challenges of completing their education, finding a job, getting health insurance, establishing long-lasting intimate relationships and starting a family."

And because many of the patients in the study underwent harsh therapies, they often suffer from significant late effects - infertility, cognitive impairment, stunted growth. This add to stress levels as well. Those that suffer from cognitive impairment may find it impossible to go to college or to land a good job that earns them an adequate income.

"These survivors may find that can't get health insurance. They may be reluctant to put themselves on the marriage market because they're sterile. Those that can have children may be afraid of passing their 'bad genes' onto their children. Some treatments affect growth, so some survivors may be shorter and heavier than their peers," Stuber said. "They may feel like they're damaged goods."

Treatment options such as therapy and medication are available to help the survivors manage their symptoms. But addressing the issue will not be simple, Stuber said.

"People who had more intense treatment are more likely to have these symptoms because their treatment was more traumatic," Stuber said. "And because more damage was done to their bodies, it makes it more difficult to have a good life later. It's all interdigitating."

Provided by University of California - Los Angeles

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