

Resilience in parents of children undergoing stem cell transplant

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Jennifer Lindwall, PhD, and colleagues show that mothers tend to be resilient after a child's stem cell transplant. Credit: Flickr/storyvillegirl cc license.

A child's illness can challenge a parent's wellbeing. However, a study recently published in the journal *Biology of Blood and Marrow Transplantation* shows that in the case of a child's stem cell transplant, parents feel increased distress at the time of the procedure, but eventually recover to normal levels of adjustment.

"Across all study groups, what we basically showed is that [parents](#) are resilient. Overall, parents get better over time," says Jennifer Lindwall, PhD, assistant professor of psychiatry at the CU School of Medicine, teaching partner of the University of Colorado Cancer Center.

The study measured [psychological distress](#) and positive affect in 171 parent/child pairs from time of admission for a child's [stem cell transplant](#) until 6 weeks after the procedure, and also measured depression, posttraumatic stress and benefit-finding at the time of admission for the procedure and at 24 weeks after. Results in pediatric patients were previously reported in the journal *Pediatrics*. The current study reports the results in parents.

"The aim of the study was to examine an intervention to promote positive adjustment of patients and their parents. In one group, children were given humor and massage therapy, in a second group parents were given relaxation/imagery training and [massage therapy](#) in addition to the child intervention, and a third group did not receive any additional intervention beyond standard care provided at the hospital," Lindwall says.

Though no significant differences were found across treatment groups, Lindwall and colleagues from St. Jude Children's Research Hospital showed a consistent finding: "In many respects, a parent's distress parallels the child's distress. As things get better for the child, they get better for the parent as well. We saw this with distress in the acute period after transplant and also in global measures of depression, PTSD and benefit-finding," Lindwall says. Parents demonstrated remarkable recovery despite facing a significant life challenge.

Lindwall points out that the medical model in some hospital settings views patients and parents from a deficit perspective – it seeks to right what is wrong. However, Lindwall and colleagues also see value in exploring the factors that create resilience in parents – to understand what has gone right in these cases despite facing significant challenges.

"While the study showed the norm is resilience and recovery, there are certainly some parents of children with significant medical illness who

don't do well – parents who remain distressed. Our challenge now is to predict which parents are at the highest risk for difficulties and to design interventions that can help these parents cope during their child's medical challenges," Lindwall says.

Provided by University of Colorado Denver

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