Cancer survivors see mostly positives in how they have changed
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Two years after diagnosis, breast cancer survivors have four times more positive than negative thoughts about changes they experienced because of their illness, a new study found.

And patients who went through a psychological intervention program designed for them reported even more positive life changes than others.

The results show the resiliency of most people who have had cancer, said Barbara Andersen, co-author of the study and professor of psychology at The Ohio State University.

"Some people want to label cancer survivors as being traumatized for life. That's just not accurate. Instead, individuals are resilient," Andersen said.

"We found that most patients in our study found a way to make lemonade out of lemons, especially those who participated in our intervention program."

Andersen conducted the study with Claire Conley, a former Ohio State graduate student now at the H. Lee Moffitt Cancer Center in Tampa. Their results appear in the March 2019 issue of the journal Health Psychology.

The study involved 160 women who were diagnosed with Stage II or III breast cancer and were being treated at Ohio State's Arthur G. James Cancer Hospital or by other physicians in the Columbus area.

All participants were part of the Stress and Immunity Breast Cancer Project that examined the effectiveness of a psychological intervention program designed at Ohio State to help breast cancer patients better cope with the challenges of the disease and test if the intervention reduced the risk for recurrence.

Previously published research by Andersen and her colleagues showed that the intervention did indeed reduce the risk for cancer recurrence.

In this study, 85 women who had received the psychological intervention were studied, along with 75 women in the control group who were followed and assessed.

Data for this study were collected two years after the patients were diagnosed and about one year after they completed cancer treatment. Most had received chemotherapy, with or without radiation therapy and hormonal therapy.

The researchers had the survivors do something that had never been used before in a cancer study. Participants completed a "thought list" in which they wrote down ways their life had changed as a result of their cancer diagnosis and treatment. They wrote down changes in seven categories, including "close relationships" and "balance in life." They then labeled each change as positive, negative or neutral.

For example, under the "close relationships" category, they could say that a positive change was
that their relationship with their husband was closer as a result of going through cancer diagnosis and treatment. Or they could say a negative change was that some individuals they anticipated would be supportive were not.

Overall, the 160 participants listed 998 life changes, and four times as many of those changes were labeled as positive than negative, findings showed.

Cancer survivors who went through the intervention program were especially positive: On average, they listed 13 positive changes that occurred to them, compared to 10 positive changes for women in the control group.

There were no significant differences between the two groups in the number of negative or neutral changes that they listed.

Why did intervention patients have greater positivity in their thinking than others?

Andersen said many of the positive changes listed by cancer patients in this study lined up with what participants learned in the program.

"The intervention included components on improving stress management, getting social support from friends and family and making behavioral changes in their diet or activity levels," Andersen said.

"These components are closely related to the most frequent and most positive thoughts about change reported by the patients."

The survivors who had the most negative thoughts were generally those who reported the highest levels of stress and depressive symptoms when they were first diagnosed.

The finding underscores the importance of identifying and treating people with depression early, Andersen said.

"Some may have a very low mood because of their cancer diagnosis. Others may have a vulnerability to experience stress with depression. For them, cancer may be a more toxic experience," she said.

Data for this study were collected between 1996 and 2002. Andersen said she believes the results would be the same today, because many treatments and challenges faced by these cancer patients were similar to those of patients today.

In fact, the data reveal one of the biggest issues of cancer patients back then is one that hadn't been recognized until recently. Financial and job concerns was one of the few categories of changes listed by the patients that had more negative than positive responses.

"Financial concerns received relatively little attention in the 1990s. Only within the last ten years has the financial burden of cancer received the attention it needs," Andersen said.


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