Nurse-led CBT can reduce 'overwhelming' menopausal symptoms for women with breast cancer

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Menopausal symptoms—hot flushes and night sweats—experienced by women with breast cancer can be reduced through group cognitive behavioral therapy (CBT) delivered by breast care nurses, a new clinical trial involving the Southampton Clinical Trials Unit has revealed.

Up to 85% of women with breast cancer suffer from hot flushes and night sweats due to chemotherapy and hormone therapy treatments. These side effects are often more extreme and can last longer for women with breast cancer than for women who experience them due to natural menopause. Hormone replacement therapy (HRT) may be offered to relieve menopausal symptoms, but is not usually recommended for women with breast cancer because it may increase their risk of the disease returning, therefore safe and effective alternatives to reduce side effects and ensure quality of life are urgently needed.

Researchers funded by Breast Cancer Now have found that women with breast cancer, who received six weeks of group CBT from a breast care nurse, reported that their menopausal symptoms became significantly less distressing and less problematic. Their frequency also reduced by over a quarter (28%). This more than doubles the reduction of symptoms reported by women receiving standard care, and often ad hoc advice (11%). Furthermore, for the women who received CBT from a nurse, these life-changing benefits lasted several months.

For many women with breast cancer, menopausal side effects can have a devastating impact on both their quality of life and mental health; consequently, some women stop treatment that could help prevent their breast cancer returning. However, in the study women reported that after receiving CBT from a nurse their night sweats and hot flushes were almost twice as easy to cope with. They also experienced significantly improved quality of sleep and reduced levels of depression and anxiety.

Led by Professor Deborah Fenlon from the University of Swansea, in collaboration with the Southampton Clinical Trials Unit at the University of Southampton, the trial involved 127 women from six UK hospitals. All participants had primary breast cancer or DCIS (ductal carcinoma in situ), an early type of the disease, and were experiencing severe and frequent hot flushes or night sweats.

The participants attended six 90-minute sessions, delivered by 11 different breast care nurses who had been specially trained, by a clinical psychologist, to deliver CBT. The sessions covered topics including stress management, paced breathing, improved wellbeing and strategies for managing the specific side effects of hot flushes, night sweats and disrupted sleep.
responsible for the design, running and analysis of
the phase 3 randomized controlled trial, run at six
UK hospitals.

The trial team were able to support the hospitals
involved in how to deliver the trial procedures and
developed working practices to ensure the trial was
conducted to a high standard. The team also used
questionnaires and conducted interviews with
patients to collect feedback and data from the
women involved on how successful the therapy had
been.

Jacqueline Nuttall, Head of Trial Management for
the SCTU, said:

"The Southampton Clinical Trials Unit has vast
experience in running not only trials of new drug
therapies and treatments, but also in behavioral
and non-medical interventions that can improve
quality of life for more people living with diseases
such as breast cancer."

"We are delighted to have been able to run this trial
in collaboration with the University of Swansea and
with the support of Breast Cancer Now, which has
shown that CBT can be delivered successfully by
breast care nurses and can help to significantly
reduce the symptoms of menopause for women
with breast cancer. We are now looking at whether
CBT can be used in prostate cancer patients to
help reduce the burden of hot flushes that can have
detrimental impact on their lives."

Once the pressures on the NHS start to ease, and
capacity and resource has been considered, Breast
Cancer Now would like to see Trusts and Health
Boards across the UK support breast care nurses
to deliver group CBT to patients suffering with
these menopausal side effects of treatment. Where
this intervention is possible it will improve quality
of life, and critically, help women to continue
treatment that helps reduce the chances of their
cancer coming back.

Professor Myra Hunter from the Institute of
Psychiatry, Psychology and Neuroscience at King's
College London, who developed the group CBT
and trained the nurses in the trial, said:

"In previous trials we have found that group CBT
delivered by clinical psychologist, is an effective
way to alleviate menopausal symptoms for women
who have undergone breast cancer treatment.
There are clear advantages for women to access
this support from nurses who they may already
know, so it is a considerable step forward to
demonstrate that this therapy is just as effective
when delivered by trained breast care nurses. We
have a published treatment manual and a training
course with the British Menopause Society so that
this therapy can reach more women who might
benefit from it."

Dr. Simon Vincent, Director of Research, Support
and Influencing at Breast Cancer Now, said:

"Menopausal symptoms, such as hot flushes and
night sweats, can profoundly impact quality of life
for women with breast cancer. It's hugely exciting to
see that cognitive behavioral therapy delivered by a
breast care nurse can help to spare these women,
who've already had the difficult experience of a
breast cancer diagnosis, this further anguish.

"The COVID-19 pandemic has thrown us into
unprecedented times. But one thing that remains
the same is the critical need for us to strive, through
research, to find ways to prevent breast cancer and
save lives, and equally to make discoveries that
mean the 600,000 people living with the disease
right now live as well as possible.

"We appreciate that the NHS is working tirelessly
under immense strain right now, but hope that
when pressures on breast care nurses begin to
ease the findings of this innovative study lead to
CBT being made available to help women affected
by breast cancer to enjoy a better quality of life.

"Our world-class research is only possible thanks to
public support. Due to the impact of COVID-19 our
fundraising income is projected to drop by 43%
in this financial year, meaning we are less able to
fund new research that could transform the lives of
people affected by breast cancer. We need your
support now more than ever."

Case study:
Natalie Richards, 39, mum-of-two, from London, who was diagnosed with triple negative breast cancer in April 2019 and experienced intense hot flushes and night sweats during chemotherapy. She said:

"I was shocked to be told I had breast cancer. Treatment began pretty quickly and as soon as I started chemotherapy my periods stopped. I hadn't been aware of the side effects I'd experience.

"I had hot flushes all through the day and night. It felt like every half an hour. I was breaking out into full sweats no matter the time or weather, on top of all the other side effects of my chemotherapy, yet this side effect had never been mentioned or discussed with me. When I explained I was struggling with hot flushes I felt this was dismissed, without any advice around how I could try to ease this distressing side effect.

"I became very down and anxious with my hot flushes and night sweats being all consuming and overwhelming. I was so embarrassed when it happened in public. I don't know how I managed, but I just tried to take one day at a time and focusing on my daughters helped me push through. It was the best part of a year before these symptoms eased off.

"I knew less about these menopausal symptom side effects and they seemed overlooked; yet for me they were just as distressing as hair loss, perhaps more so because they were so unexpected. I had such a wonderful breast care nurse, and I think if she'd been able to provide me with some support specifically for my menopausal symptoms that could've made a huge difference."

Provided by University of Southampton

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