

Me, Myself and Cancer: Psychological Impacts and Interventions

Charlize C. Mackie

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Abstract

Over the past decade cancer prevalence has increased globally. Hence, this review will summarise the psychosocial challenges cancer patients and survivors face, then discuss interventions to enhance their psychological wellbeing. Cancer patients and survivors may experience impaired self-concept, body image, sexuality, and interpersonal skills. In addition, they have an increased risk to psychological disorders such as anxiety and depression. However, intervention methods like supportive-expressive group psychotherapy and cognitive-existential therapy show significant improvements to psychological wellbeing, suggesting that incorporating these non-invasive therapies alongside cancer care today may enhance cancer patients' psychological wellbeing.

Key words: psychosocial challenges, psychological wellbeing

Me, Myself and Cancer: Psychological Impacts and Interventions

Despite decades of research and fighting the illness, cancer remains to be a problematic disease that is estimated to cause 70,000 new cancer patients within Australia (*Cancer Data in Australia, Overview of Cancer in Australia, 2024, 2024*; Siegel et al., 2024). Consequently, treatments have prioritised improving the overall quality of life for cancer patients and survivors (Lang-Rollin & Berberich, 2018). The biopsychosocial model proposes that a correlation occurs between psychosocial factors and biological outcomes (Wang & Feng, 2022). Psychosocial factors referring to mental health, sleep quality, social support or isolation, and occupational stress (Thomas et al., 2020). Abdelhadi et al. (2022) findings implied psychosocial factors can impact physical and mental wellbeing where, as a result, progression and recovery of the disease can be impaired by the psychological distress and emotions, perceptions and beliefs, as well as the daily lives, of the patient (Michel et al., 2019). In addition, the patients caregivers, social circle, and oncology staff play a vital role in patients mental wellbeing, as a lack of social support, social isolation, and emotionally withdrawn oncology staff can cause negative outcomes such as reoccurring cancer (Kleiner & Wallace, 2017; Kroenke et al., 2017; Liang et al., 2022; Yuan et al., 2020). These psychological and social challenges cancer patients face are psychologically demanding, hence this review will focus on summarising the individual impacts for those with cancer and ways to enhance psychological wellbeing.

Psychological Impacts Encountered by Cancer Patients

The effects cancer has on patients and survivors is a complex combination of challenges at an individual level (i.e., deterioration of self-concept, interpersonal difficulties, psychological distress, and somatic problems; Curbow et al., 1990; Vandendorpe et al., 2021; Wang & Feng, 2022).

Deterioration of Self

Self, otherwise known as self-concept, is a complicated notion for the way individuals view themselves (Showers et al., 2015), and for those with cancer there is often a deterioration of self-concept

that leads to difficulties with self-esteem, body image, self-appraisal, and self-discontent (Vandendorpe et al., 2021; Wang & Feng, 2022). Research by Koinuma (1993) implied the invasive treatments of cancer, and its aggressive damage to physical appearance, commonly caused patients and survivors to be particularly vulnerable to changes in their appearance (Brederecke et al., 2021; Fingeret et al., 2014).

Body Image Challenges

Body image is a direct personal perception and appraisal of one's appearance (Aquil et al., 2021; Ettridge et al., 2022; Vuotto et al., 2018; Wang & Feng, 2022). Cancer has the ability to alter the way a person perceives their body appearance and functioning as surgical interventions, chemotherapy, radiotherapy, and drug use, can result in temporary or permanent consequences like scarring, hair loss, and body shape alterations (Brunet et al., 2022; Sun et al., 2018). This can threaten a cancer patients course of treatment, as psychological distress is commonly inspired prior to surgery or treatment as a consequence to body image concerns (Chopra & Lacourt, 2021).

Interpersonal Difficulties

For young patients with cancer, romantic relationships were delayed and often had lower rates of marriage when compared to the general population (Yoshida & Matsui, 2022). Studies on marriages or partnerships with cancer found that cancer may induce marital distress and decrease the quality of their relationship (Vandendorpe et al., 2021). A qualitative study on women with breast cancer provided an insight to this, as marital distress seemed to stem from preconceived responsibilities a wife was responsible for (e.g. sex), and decreased quality of relationships occurred from things such as husbands unwilling to help their wives (see Table 1; Sanchuli et al., 2017).

Table 1

Findings of Sanchuli et al. (2017) qualitative study

Treatment	Experiences
Chemotherapy	My husband said " <i>it is not my business to look after you</i> " when I told him to take me to chemotherapy.

Chemotherapy	My husband does not want to look after me even when he is free, he says <i>“I don’t have time for you. I don’t want to be your beck and call every time you desire. I have my own life”</i> .
Mastectomy Chemotherapy	My husband is attentive all the time, he was at my side at all phases of the disease. My husband knew everything... but he did not reveal anything, so that I would not guess anything... he kept everything a secret.
Chemotherapy	My husband was my only companion in years of illness... no one loved me as him. He wrapped me up in a blanket, hugged me and took me to chemotherapy.
Mastectomy	This illness is killing my husband because I cannot do anything at home... he wishes that I was never affected by breast cancer... He says that we were very happy... He cannot tolerate the house without me taking care of everything.
Mastectomy	I was frustrated, reluctant and disinterested in having sex due to my medications, I forced myself to have sex with my husband because I hated to dodge my responsibility.

Psychological Distress

Cancer may evoke a significant amount of psychological distress and increase the risk of developing a mental health disorder (Wang & Feng, 2022). Commonly, cancer patients experience major depressive disorder, generalised anxiety disorder, adjustment disorder, panic disorder, and post-traumatic stress disorder (Fox et al., 2013; Wang & Feng, 2022). A high correlation occurs between a poor psychological state and a less satisfied quality of life, a worsened prognosis, and a decreased psychosocial functioning (Siwik et al., 2022; Wang & Feng, 2022; Zhang et al., 2022).

Methods to Enhance Psychological Wellbeing

However, numerous interventions have been developed for cancer patients to specifically address psychological disorders, adjustment difficulties, and provide coping and psychological support (Grassi et al., 2017). Interventions with the most empirical support, to reduce psychological challenges specifically, are supportive-expressive group psychotherapy (Classen et al., 2008; Oberoi et al., 2021; Spiegel & Kogon, 2023), cognitive-existential therapy (Kissane et al., 2003; Nakamura & Kawase, 2021), and mindfulness stress reduced programs (Mehta et al., 2019; Rouleau et al., 2015). Supportive-expressive group psychotherapy refers to programs that provide emotional, social, cognitive, and symptomatic support for people coping with advancing and terminal cancer (Classen et al., 2008; Oberoi et al., 2021; Spiegel & Kogon, 2023). Oberoi et al. (2021) study included 31 men at different stages of cancer for a

six-month longitudinal analysis and found anxiety, depression and anger significantly reduced when compared to baseline. Nakamura and Kawase (2021) five week group therapy program reported increased quality of life ($n = 31$), especially for those with the highest ‘hopelessness’ scores. Mehta et al. (2019) literature review consisted of studies from 2000-2018 and continuously found benefit from mindfulness interventions (i.e., focusing on the moment reduces worry and/or rumination).

Conclusion

While attempting to cope with daily challenges caused by cancer, cancer patients and survivors may experience negatively impacted mental wellbeing. Intervention methods such as supportive-expressive group psychotherapy are successful interventions to enhance psychological well-being, providing evidence towards non-invasive therapies complimenting cancer treatments today.

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