

ADJUSTMENT REACTION TO CANCER



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5 Year Survival Rates

TYPE OF CANCER	ENGLAND AND WALES	USA	GERMANY
Oesophagus	7%	11%	7.3%
Lung	4%	14%	8.1%
Kidney	35%	59%	52.7%
Stomach	8%	21%	19.3%
Bowel	42%	61%	37.6%
Pancreas	2%	4%	6.2%
Brain	8%	29%	17.2%
Breast	68%	84%	68.4%
Cervix	65%	69%	61.3%
Ovary	29%	46%	31.7%



SELLICK and CROOKS (1999)

Review of psychopathology in cancer

- 10 - 15% of patients demonstrate DSM IV criteria for anxiety or depression
- A further 20% demonstrate an adjustment reaction with anxiety or depressive features



What is an adjustment reaction?

- Adjustment disorder occurs when patients have either an anxious mood or depressed mood or both but too few other symptoms to be diagnosed as having an anxiety state or a depressive illness. In this case they have an adjustment disorder in which they are reacting in an exaggerated way to a known stressor I.e. the cancer.

(Faulkner and Maguire 1996)



When does an adjustment reaction occur on the cancer journey?

- At first diagnosis
- When medical treatment is completed
- Time of recurrence



Common psychological symptoms in cancer patients

	%
■ Worrying	72
■ Feeling sad	67
■ Feeling nervous	62
■ Difficulty sleeping	53
■ Feeling irritable	47
■ Difficulty concentrating	40



Factors associated with increased psychological morbidity among cancer patients

- History of mood disorder
- History of alcohol/drug abuse
- Cancer treatment associated with visible deformity
- Younger age
- An aversive experience of cancer in the family
- Poor social support
- Low expectation of effective treatment outcome
- The presence of distressing side effects
- Associated and concurrent stressful life events
- Poor prognosis of disease



Assessment of depression in cancer

- Serious depressive illness, 5% - 6%
- Clinically significant adjustment disorder (depressed mood), 16% - 25%
- symptoms like:
 - ↖ loss of appetite
 - ↖ lack of energy
 - ↖ low libido
 - ↖ loss of weight
 - ↖ poor self-esteem
 - ↖ suicidal ideation

can at times be attributed to malignant disease when they are due to depression



Types of adjustment reactions to cancer diagnosis (Barracclough 1994)

- FATALISM (Previously Stoic Acceptance)
- POSITIVE AVOIDANCE (Previously Denial)
- FIGHTING SPIRIT
- ANXIOUS PREOCCUPATION
- HELPLESSNESS/ HOPELESSNESS (Giving up)



FATALISM

- Continues as before
- Does not complain
- Accepts diagnosis as one of those things
- The future will take care of it self



POSITIVE AVOIDANCE

- Plays down the threat
- Does not use the word cancer
- Refuses to accept the diagnosis of cancer
- May admit the diagnosis but deny or minimise the seriousness



FIGHTING SPIRIT

- Rise to the challenge of overcoming cancer. Seek information and can seek out new roles e.g. new diet or exercise regime
- Use the word cancer
- Determined to fight the illness
- Try to obtain as much information as possible
- Adopt an optimistic attitude
- May see the illness as a challenge



ANXIOUS PREOCCUPATION

- Patients are constantly thinking about cancer and interpret every minor physical change as a sign of relapse.
- Actively seeks information about cancer but tend to interpret this pessimistically
- Worry about aches and pains
- May seek out alternative treatments
- Reacts to diagnosis with marked persistent anxiety



HELPLESSNESS / HOPELESSNESS

- May feel overwhelmed by their illness and make little effort to cope or adjust. Usually go along with recommended treatment but take no initiative i.e. report a new symptom unless prompted.
- Hobbies/ interests abandoned
- Is engulfed by knowledge of the diagnosis
- Finds it difficult to think of anything else
- Adopts a wholly pessimistic attitude



Concept of loss

Cancer may effect the emotions in many ways. Many cancer psychological effects can be understood in terms of reaction to loss or the threat of loss in the future.

- Loss of physical strength and well-being
 - Loss of independence
 - Loss of role
 - Loss of interpersonal relationships
 - Loss of sexual function/ fertility
 - Loss of physical integrity
 - Loss of life expectancy
 - Loss of control
 - Loss of mental integrity
- (Faulkner and Maguire 1994)



Tips for Coping: Staying Healthy with Cancer

- Be kind to yourself
- Help others. Reaching out to someone else can reduce the stress caused by brooding.
- Don't be afraid to say no. Polite but firm refusals help you stay in control of your life.
- Talk about your concerns. It's the best way to release them.
- Learn to pace yourself. Stop before you get tired.
- Give in sometimes. Not every argument is worth winning.
- Get enough exercise. It's a great way to get rid of tension and aggression in a positive way.
- Take time for activities you enjoy, whether it's a hobby, club or special project.



Tips for Coping: Staying Healthy with Cancer contd...

- Take one thing at a time. If you're feeling overwhelmed, divide your list into manageable parts.
- Set priorities. Don't try to be Superman or Superwoman.
- Solve problems like an expert. Firstly, identify the problem and write it down, so it's clear in your mind. Secondly, list your options with the pros and cons of each. Thirdly, choose a plan. Fourthly, list the steps to accomplish it. Then give yourself a deadline and act.
- Eat properly
- Get enough sleep
- Laugh at least once a day



Simple advice for patients with a cancer diagnosis on how to assist in the best adjustment

- Decide on your priorities
- Set some goals for a normal life within the present physical limits
- Plan step by step how to achieve these goals
- Review progress and modify your plans accordingly
- Pay attention to what seems to work and what makes it worse (Can you avoid things that make it worse)
- Consider how you can increase those activities that give you pleasure



Advice contd....

- Be aware of what you are able to do which gives you a feeling of being in control of your life
- Consider if you can avoid doing or thinking about those things that make you feel more out of control or helpless.
- Don't suffer in silence - talking things through may help you find ways to resolve or better understand the difficulty

(UICC Update 7)