A B C T F A C T S H E E T S

COPING WITH CANCER

Cancer is the number two killer in the United States after heart disease. One in every four people will develop cancer. In general, there are three basic forms of cancer based on the part of the body that is affected: sarcomas (bone or soft tissue), carcinomas (surface tissue, such as lung, breast, colon), and leukemias or lymphomas (bone marrow or lymph nodes). A diagnosis requires a biopsy of a tissue sample from the primary site of the cancer. In addition to determining where in the body the cancer originated, patients are evaluated to determine the extent of the disease. Several factors, such as the type of cancer, the disease stage, whether there is any spread (or metastases), and physical effects (e.g., disfigurement, sexual functioning) influence how someone reacts and adjusts to the diagnosis of cancer.

When individuals are first diagnosed with cancer there is often a reaction of disbelief accompanied by many negative emotions, which can include depression, anxiety, and extreme fear. Fears include apprehension about the disease itself, its treatment, doubts about the success of the treatment, and how the cancer and its treatment may affect one's life. Physical and psychological reactions can change over time (for instance, with a change in type of treatment, or after follow-up tests, etc.) as the cancer either gets worse or goes away. Generally, the more widespread the disease, and the more physical impairment or disfigurement, the more difficult it may be to adjust psychologically to the disease. Difficulties in adjustment can interfere with day to day living, work, and relationships with significant others.

What Causes Cancer?

There are many causes of cancer. Although cancer researchers have been able to identify the causes of some types of cancer (e.g., genes causing colon or ovarian cancer), our knowledge is incomplete. Other factors that can contribute to the development of cancer include viruses, diet (particularly high fat diets), and the environment (e.g., exposure to certain chemicals, smoking, stress, sun, X-rays, etc.). These different factors may interact with one another and increase one's vulnerability to develop cancer.

How Is Cancer Treated and What Are the Side Effects?

Conventional modes of treatment can include surgery, radiation therapy, chemotherapy, and immunotherapy. Each of these types of treatment can result in a wide variety of side effects. For example, radical cancer surgery may cause disfigurement, loss of an organ or limb, and may require reconstructive surgery and extensive rehabilitation. Chemotherapy may be associated with bone marrow suppression (which may lead to greater susceptibility to infection, bleeding, or anemia), hair loss, and impairment to heart, lung, and kidney functions, as well as nausea, numbness, and fatigue. New medications are available that can be effective in controlling some of these side effects. Radiation therapy can result in injury to skin or organs near the affected area. The disease and its treatment have a major impact on people's lives and their behaviors, thoughts, and emotions.

What Is Cognitive Behavior Therapy?

Behavior Therapy and Cognitive Behavior Therapy are types of treatment that are based firmly on research findings. These approaches aid people in achieving specific changes or goals.

Changes or goals might involve:

- A way of acting: like smoking less or being more outgoing;
- A way of feeling: like helping a person to be less scared, less depressed, or less anxious;
- A way of thinking: like learning to problem-solve or get rid of self-defeating thoughts;
- A way of dealing with physical or medical problems: like lessening back pain or helping a person stick to a doctor's suggestions.

Behavior therapists and Cognitive behavior therapists usually focus more on the current situation and its solution, rather than the past. They concentrate on a person's views and beliefs about their life, not on personality traits. Behavior therapists and cognitive behavior therapists treat individuals, parents, children, couples, and families. Replacing ways of living that do not work well with ways of living that work, and giving people more control over their lives, are common goals of behavior and cognitive behavior therapy.

HOW TO GET HELP: If you are looking for help, either for yourself or someone else, you may be tempted to call someone who advertises in a local publication or who comes up from a search of the Internet. You may, or may not, find a competent therapist in this manner. It is wise to check on the credentials of a psychotherapist. They should be listed as members of professional organizations, such as the Association for Behavioral and Cognitive Therapies or the American Psychological Association. Of course, they should be licensed to practice in your state. You can find competent specialists who are affiliated with local universities or mental health facilities or who are listed on the websites of professional organizations. You may, of course, visit our website (www.abct.org) and click on "Find a CBT Therapist."

The Association for Behavioral and Cognitive Therapies (ABCT) is an interdisciplinary organization committed to the advancement of a scientific approach to the understanding and amelioration of problems of the human condition. These aims are achieved through the investigation and application of behavioral, cognitive, and other evidence-based principles to assessment, prevention, and treatment.

What Are the Emotional and Life-Style Consequences?

There has been a lot of research on how cancer affects us. This research has shown that cancer patients experience emotional distress, which may include depression, anxiety, fear of the disease, and fear of death, and anger. Cancer and its treatment can also produce physical side effects. Daily living may also be disrupted because of the individual's physical or emotional side effects. Marital and other significant relationships may be affected. Although these reactions are seen in most cancer patients, there are different levels of disruption and emotional distress in each patient. For some cancer patients, the level of disruption and emotional distress is quite high; for others, the adjustment is less difficult. The patient's quality of life and age, the level of psychological adjustment before the cancer was diagnosed, the social support available, how advanced the cancer is, the time since diagnosis, and type of treatment received all affect the patient's response. There is evidence that the majority of individuals with cancer adjust successfully over time.

What Is Coping? What Affects Coping?

The better a patient can cope with the cancer, the more likely that he or she can enjoy a better quality of life. In order to deal with cancer, individuals engage in behaviors to directly address the disease; for example, choosing a problem-oriented approach to help with decisions around the type of treatment and where the treatment will be taken. Other, more personal, examples include redefining self-worth and realizing one's control over the disease process. Having a reason to live, such as caring for a family, wanting to contribute to a business or charity, or continuing a favorite hobby, is especially helpful in coping with cancer.

An individual's ability to cope is affected by the cancer's severity, how far it has spread, the degree of physical debilitation, the person's view of himself or herself and his or her purpose in life, social supports, and whether the cancer is terminal.

Positive relationships with others help the patient adjust. Individuals need to feel that they can develop and maintain warm and trusting relationships. How friends and family adjust to the diagnosis can greatly affect the cancer patient's ability to cope with the disease. If family and friends react with denial or disbelief, or blame the patient for causing the cancer, this may lead to poorer adjustment. Conversely, having friends and family who accept the diagnosis and maintain the same warm and close relationship that existed before helps the cancer patient's adjustment. Care providers who are open, who provide accurate information regarding disease expectations, outcomes, and sensory experiences greatly assist the cancer patient's ability to cope with this traumatic illness.

What Interventions Are Available to Assist in Coping With Cancer?

All of the interventions listed below allow cancer patients and/or their families the opportunity to learn more about cancer and its treatment, to express feelings, to obtain peer support, to better problem-solve, to better discuss decisions about treatment, and to restructure their thinking about their role and ability to cope.

Education

Educational strategies have been used to teach cancer patients about the medical system, the disease, treatment options, treatment side effects, coping death and dying, and behavioral skills, such as stress management and relaxation training. These strategies may lessen the adverse side effects of cancer treatments.

Behavior Therapy

One area that has been the focus of most of the research for psychological interventions is the use of relaxation training (learning to relax certain muscle groups, or biofeedback) to reduce chemotherapy treatment side effects. Relaxation training is effective in reducing anxiety, nausea, and vomiting, both before and after chemotherapy. Strategies for reducing stress, including relaxation training and education about particular medical procedures, also help reduce anxiety and increase compliance with the doctor's treatment recommendations.

There are several goals in the use of behavior therapy with cancer patients. The first goal is to help the individual learn to problem solve around dealing with the disease, its treatment and side effects, and to increase feelings of control over the disease. The second goal of behavior therapy approaches is to address specific problems, such as sexual dysfunction, which the cancer or cancer treatment(s) may cause. A third goal of behavioral approaches is to deal with compliance issues that may directly affect the success of medical treatments for the cancer.

Cognitive Behavior Therapy

Individuals with cancer often have many fears and misconceptions about the disease, its outcome, its treatments, and their own ability to cope. Cognitive behavioral approaches can help patients to identify negative beliefs that may hinder their ability to accept the diagnosis and cope with the disease. Once dysfunctional beliefs are identified, individuals can challenge these negative thoughts, develop more rational responses, and think more positively, particularly regarding their role in adjusting to the disease. The ability to examine negative thoughts objectively and to replace them with more positive, adaptive thoughts greatly enhances quality of life. Cognitive therapies are also used to help individuals who are terminally ill to accept or reduce their fear of death and dying. Other cognitive strategies involve imagery in conjunction with relaxation training.

Group Support

The role of group support therapy in facilitating adjustment to cancer is clearly upheld. There are many support groups for cancer patients and/or their families offered through the American Cancer Society, local hospitals, cancer treatment agencies, and mental health agencies. Group settings allow individuals to feel a sense of community and to realize that they are not alone in having cancer. In addition, group settings allow for individuals to be exposed to positive role models who have successfully dealt with the disease.

For more information or to find a therapist:

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