



# Life After Cancer

## Psychosocial Health in Cancer Survivors

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# + Discussion Topics

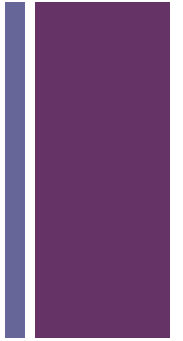


- What does the research say about psychosocial health in cancer survivors?
- Developmental considerations
- Life after cancer
- Areas of difficulty to address
- Resources and recommendations



# What does the research say?

- Survivors are generally resilient and may experience positive outcomes related to enhanced coping abilities and “posttraumatic growth.”
- However, having been treated for cancer increases risk of psychological distress, somatic symptoms, cognitive late-effects, developmental deviations.
- Psychosocial health often affected by physical health.





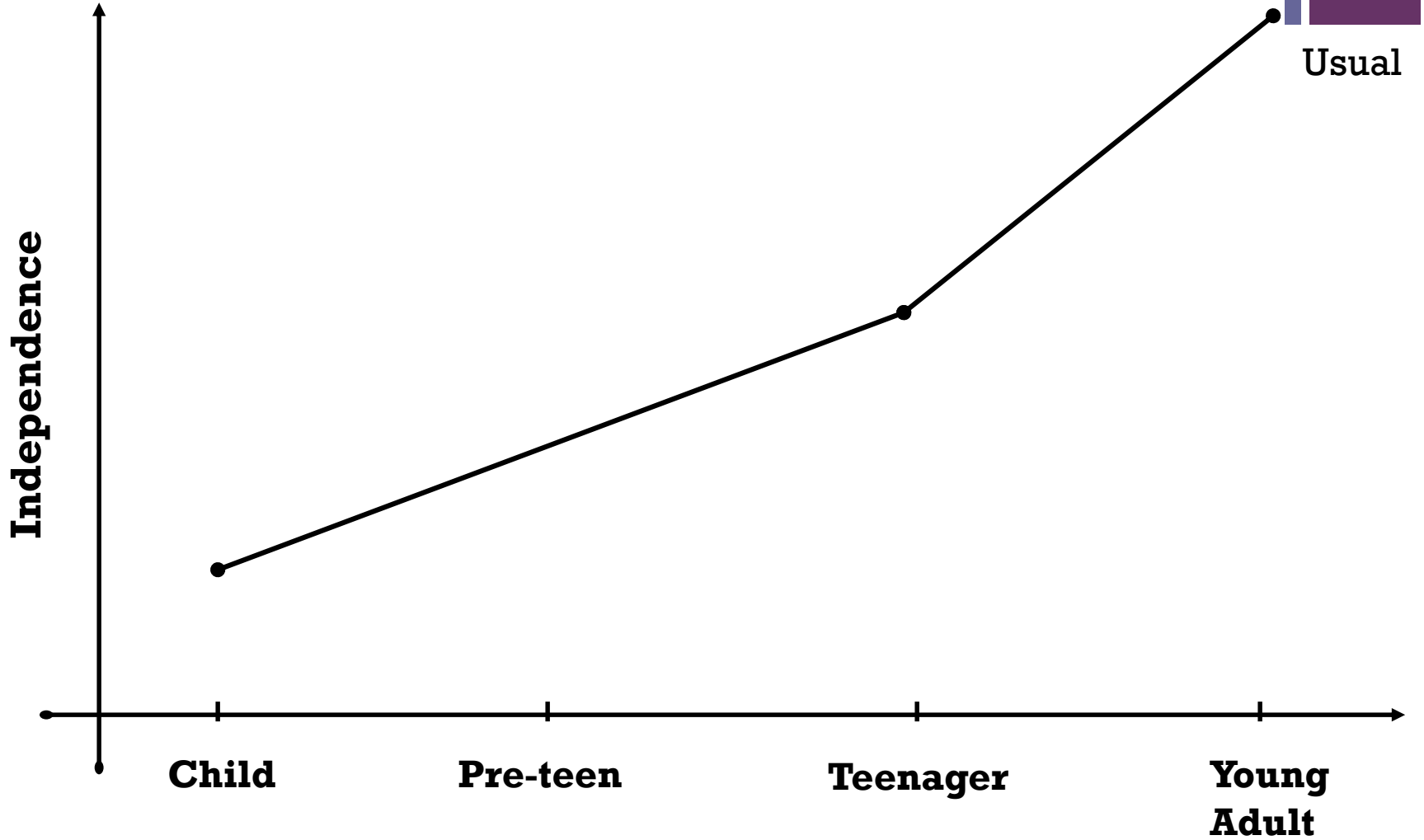
# Developmental Considerations



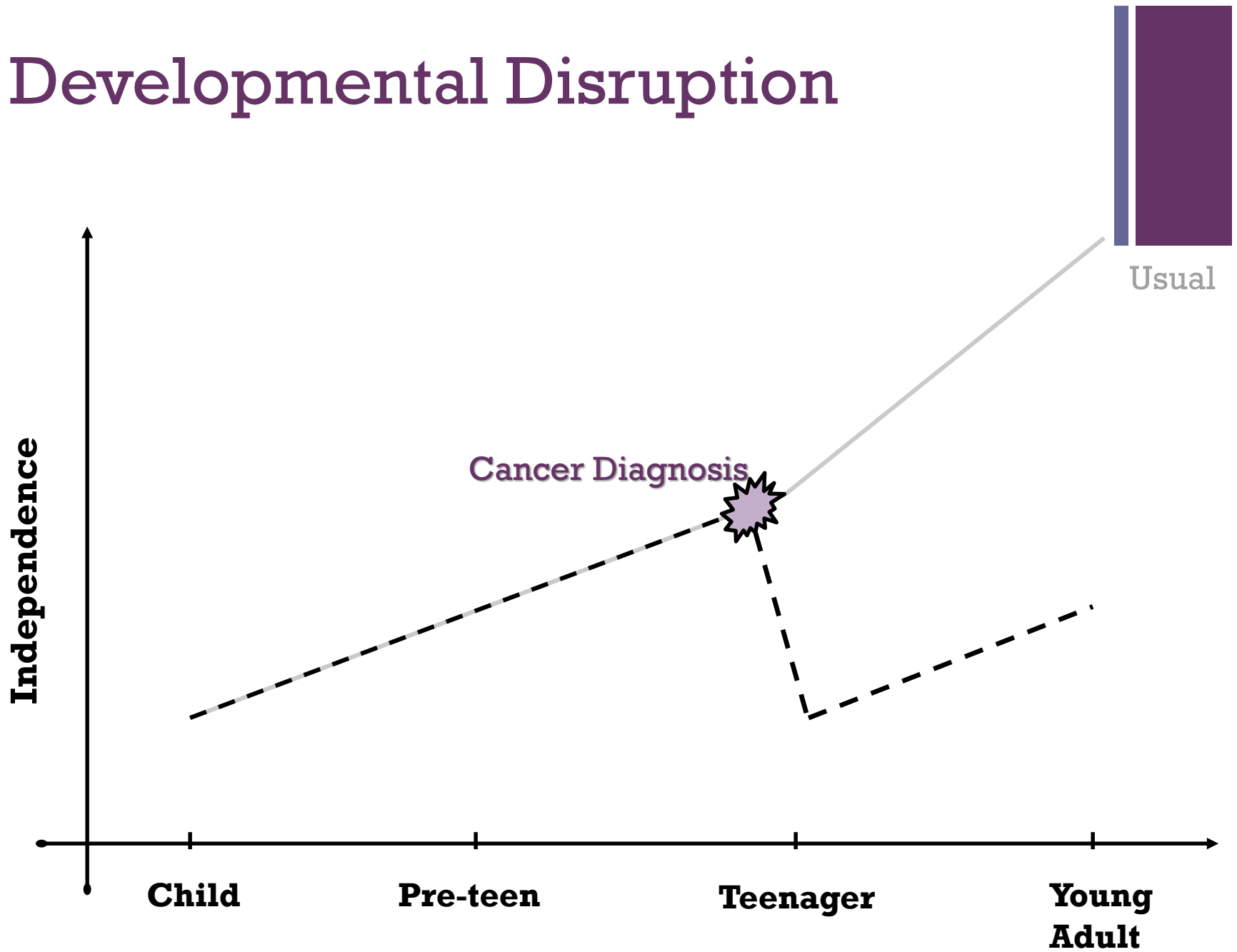
- Impact of developmental stage at time of diagnosis and treatment, and current developmental stage.
  
- Consider degree of independence in and access to:
  - Self care activities and household responsibilities
  - Social activities (friends, romantic interests, hobbies, clubs)
  - School
  
- Developmental Stages
  - Early Childhood: bonding, separating, early emotion regulation skills and independence
  - School Age: interests, friendships, school, natural consequences
  - Adolescence: peers, identity development, preparing for future

<https://www.healthychildren.org/English/ages-stages/Pages/default.aspx>  
<http://www.zerotothree.org>

# + Typical Development



# + Developmental Disruption





# Nobody said this would be easy....



- Adjustment around time of diagnosis
- Adjustment to major stressors of treatment
  - Hair loss, NG tube placement, port access, extended admissions, hospital food, impacted mobility, impacted appearance, etc.
- Adjustment to unexpected or unplanned (negative) events
  - Recurrence, adverse event, permanent effect of treatment, etc.
- Adjustment to ongoing treatment
  - “I’m sick of this already”
  - “I didn’t plan on missing 8<sup>th</sup> grade graduation”
- Adjustment to life after cancer
  - Getting back to “normal”



# Adjusting to Life After Cancer



- How do you fit back in with your family?
- How do you fit back in with your friends?
- How do you regain independence and build more independence?
- How do you go back to school?
- How do you go back to not being in or at the hospital all the time?
- How do you build health behaviors and life habits?





# What to expect and what can help



- Expect that adjustment will take some time
- Facilitate adjustment with conversation and preparation
  - Spending time with a few friends prior to larger social gatherings
  - Going to school to meet with teachers prior to returning to school
- As health improves, set developmentally appropriate expectations with graded support as needed
  - Independence (sleeping, going places, ordering for self, hygiene behaviors, etc.)
  - Household duties (chores, behavior, participation, etc.)
  - School
- Do fun things!
  - Social activities
    - Camps!!!
  - Active activities



# Increase Health Literacy



- Get familiar with the “End of Therapy” summary and keep notes from Long Term Follow Up clinic in 1 binder/folder.
- Encourage developmentally appropriate independence in transitioning knowledge from parent to child. For children who were treated when they were young, develop a concise narrative that includes treatment essentials. Encourage children to learn the names of their diagnoses, medications, and procedures.
- Encourage developmentally appropriate independence in monitoring health, scheduling follow-up visits, refilling prescriptions, etc.
- Regular discussions of health promotion and risk behaviors
  - Primary prevention (use sunscreen, avoid drugs/alcohol, eat well, exercise, safe sex practices, etc.)
  - Secondary prevention (Echo, labs, BSE/TSE).



# When to consider mental health support:



- Persistent sadness or worry
- Persistent difficulty integrating with friends and peers
- Risk behaviors
- Significant effects of treatment, requiring more extensive support
  - Academic issues
  - Mobility or sensory impact of treatment
  - Medical complications requiring ongoing management
  - Transition support to address academic, occupational, and independent living needs. <http://www.gottransition.org/>

# + When discussing mental health services, use a helpful framework:

## Common Misconceptions

- I don't want to be *forced* to talk about this
- The therapist will *fix* this
- I don't want to be *analyzed* or *judged*
- What did I say that made my doctor place the referral? Do they think I'm crazy?

## Helpful Reframe

- A therapist is like a “talking doctor”
- A therapist will teach me specific skills to make life easier, less uncomfortable.
- A therapist will help me think through and “process” my thoughts and feelings about what happened or what is happening
- I don't have to protect mental health providers from my sad or worried feelings
- We can all learn new ways of coping, communicating, working together, etc.
- It is normal for people who have been through extremely stressful circumstances to talk to a mental health provider.

# + Mental Health Interventions: What (usually) works?



# + Cognitive Behavioral Model: Teaching Concepts, Skills, and Strategies



**Thoughts**

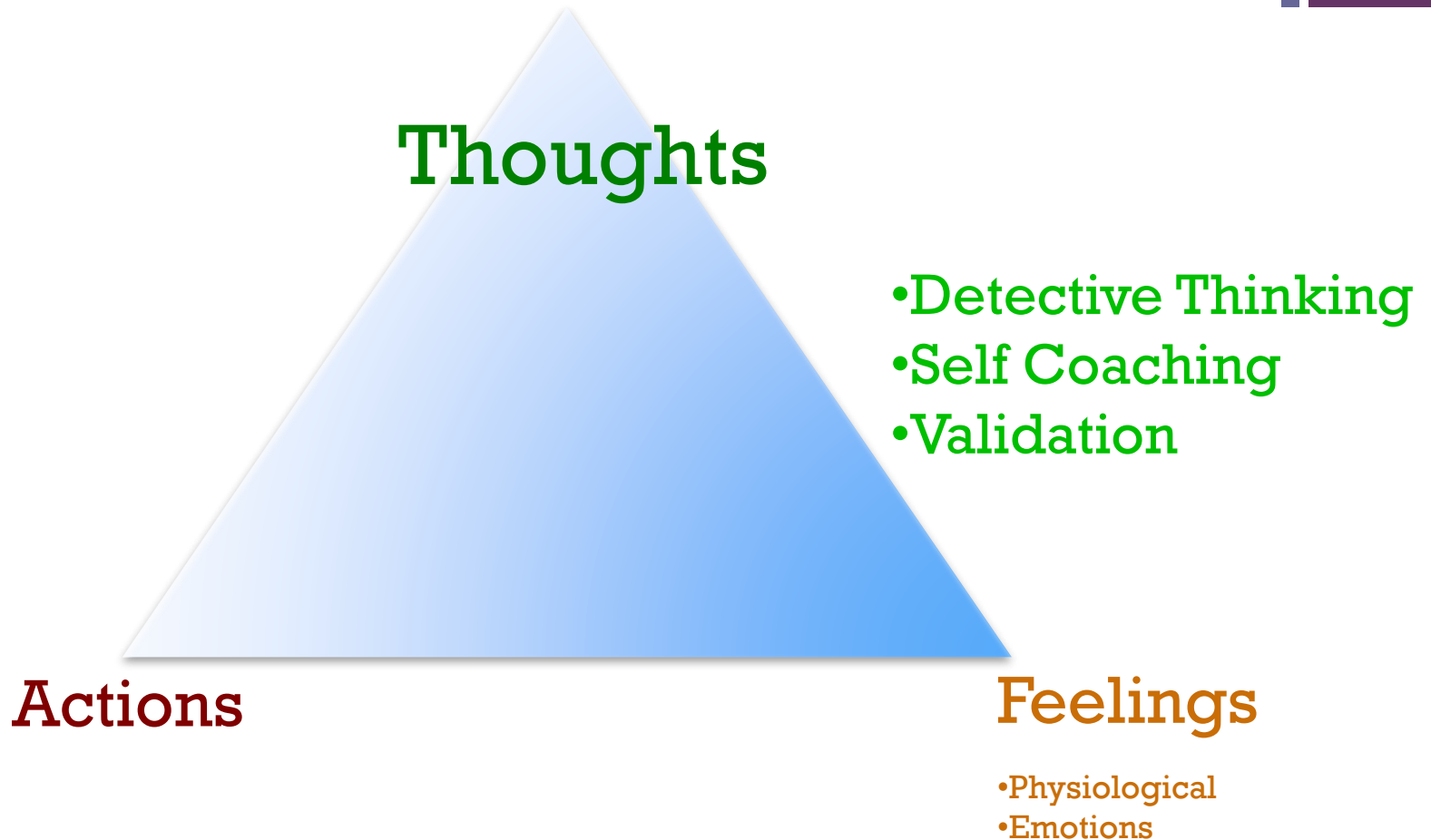


**Actions**

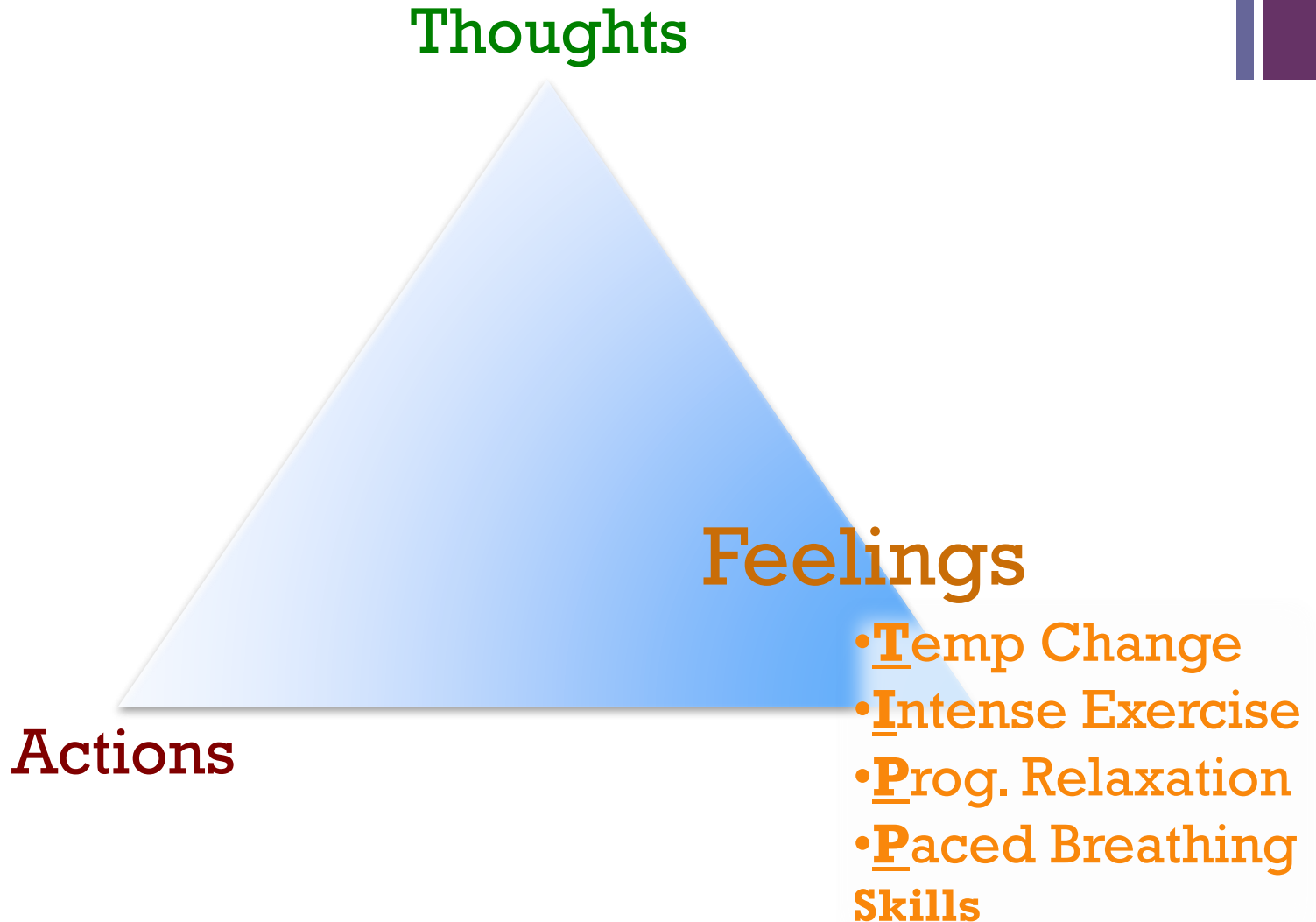
**Feelings**

- Physiological
- Emotions

# + Cognitive Behavioral Model



# + Cognitive Behavioral Model





# + Cognitive Behavioral Model



**Thoughts**

**Actions**

- Wellness Toolkit
- Distraction
- Positive Activity Scheduling

**Feelings**

- Physiological
- Emotions

# + Therapy services at SCH

- Joanna Thome Patten, PsyD, Attending Psychologist; Shweta Ghosh, PhD, Postdoctoral Fellow
  - Individual therapy
  - Group therapy
    - **Middle School Life After Cancer**: Group for middle schoolers who have completed treatment for cancer, concurrent parent group
    - **AYA Group**: Group for 17-23 year olds on or off treatment
  - Consultation and referral
  - Transition planning
- Possible expansion of social work
  - Trauma-Focused Cognitive Behavioral Therapy
  - Problem Solving Skills Training
  - Motivational Interviewing





# Evidence Based Services available at Seattle Children's Hospital



- Outpatient Psychiatry Specialty Clinics:
  - Mood and Anxiety Program
  - Pearl Clinic (ADHD and Disruptive Behaviors)
  - Transgender Evaluations
  - Substance Abuse
  - Training Clinic
  - Neuropsychological Consultation Service
  - Integrated Psychiatry
  - Early Childhood Clinic
  - Autism Center



# Finding Support



- NEW!! Washington Mental Health Referral Service for Children and Teens

833-303-5437

- Families provide mental health needs, location, insurance plan
- Referral specialist return call with information on one or two providers or agencies that meet needs and have openings.
- Follow-up from referral specialist to problem solve barriers to accessing care.
- Psychiatry (Medication) Support:
  - Primary Care doctor can talk to a child psychiatrist through the **Partnership Access Line**

# + Resources



- Children's Hospital of Philadelphia (CHOP) has a variety of resources, including podcasts, support groups, videos, websites, coping tools, books, camps, and other resources on their website: [http://www.chop.edu/centers-programs/oncology-psychosocial-services-program/health-resources#.V\\_QN7aKUJZ8](http://www.chop.edu/centers-programs/oncology-psychosocial-services-program/health-resources#.V_QN7aKUJZ8)
- Momcology
- Cancer Lifeline

# + Questions and Discussion



- What are we planning?
- What services would you like to see here at SCH?
- For how many of you is distance a barrier to obtaining appropriate mental health services?
- Pie in the sky ideas to support cancer survivors at SCH?