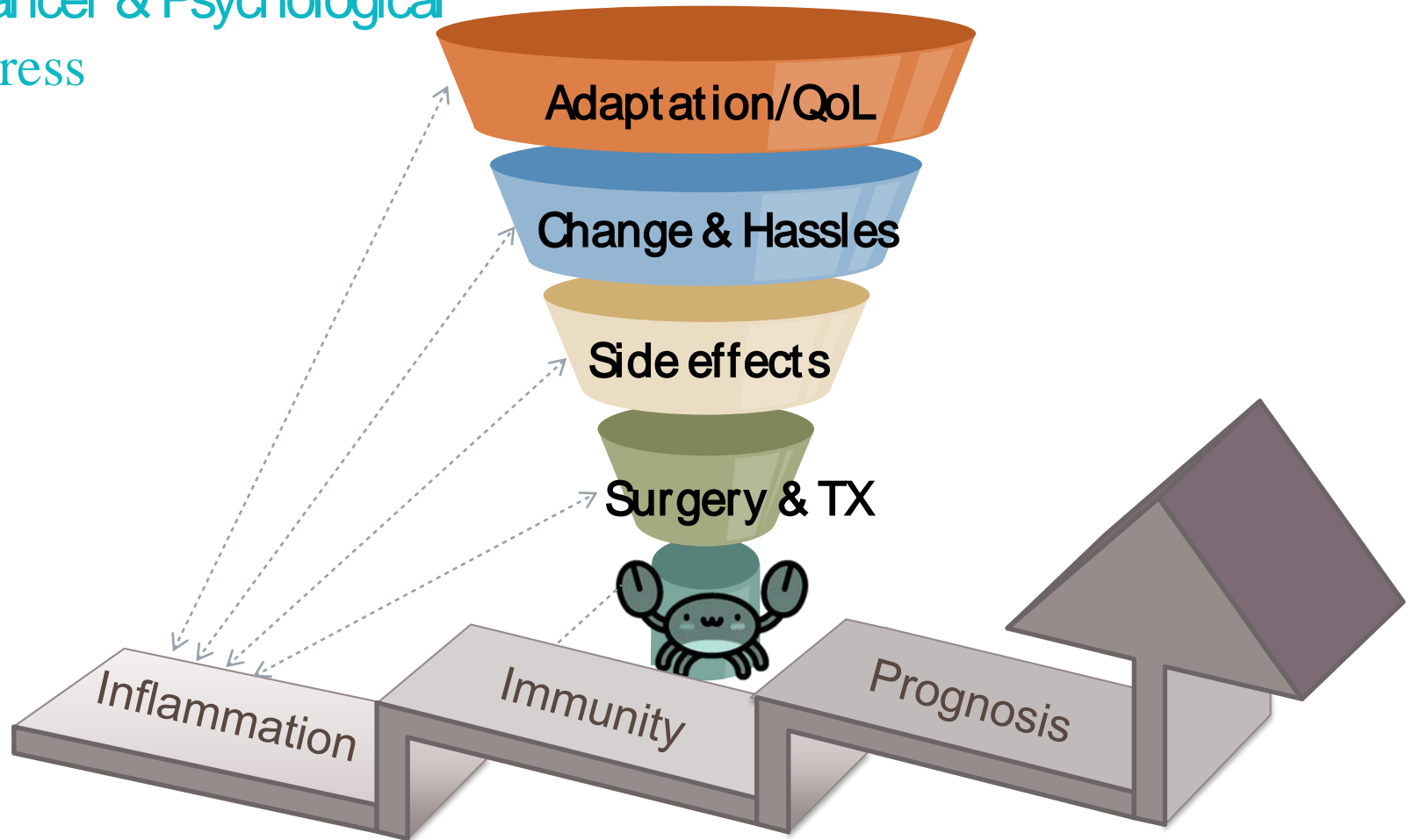


Introduction to Cancer Psychological Care 癌症患者的心理照護概論

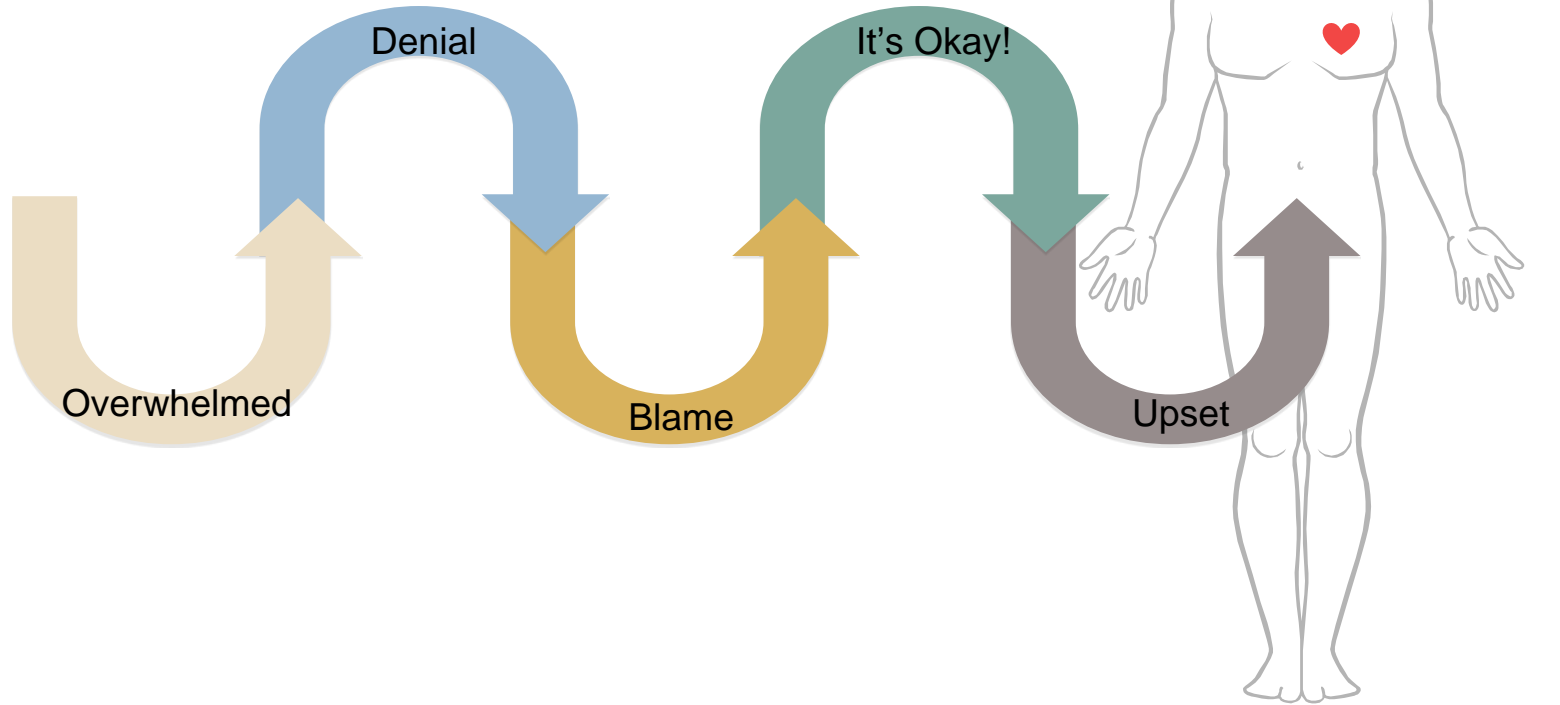


東吳大學
王韋婷 Ashley Wang
助理教授

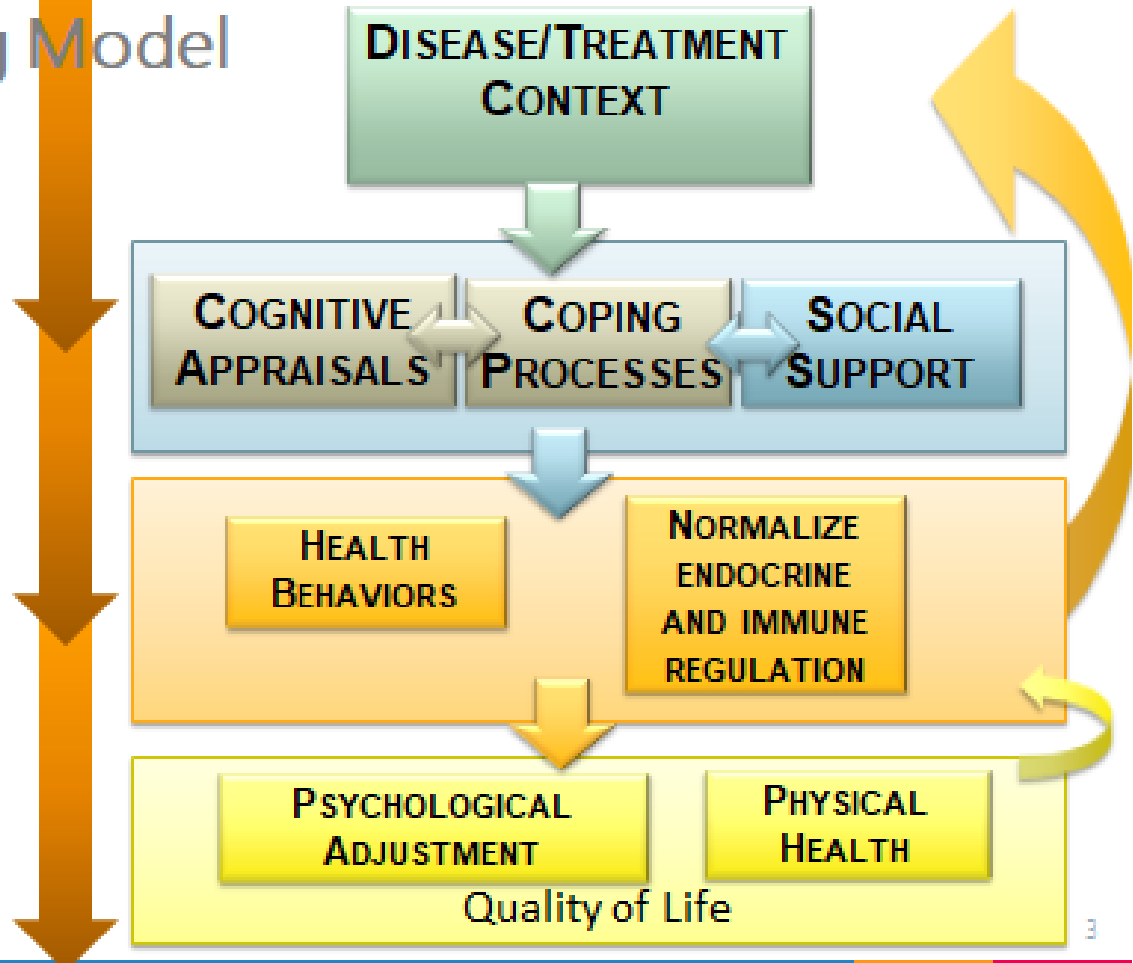
Cancer & Psychological Stress



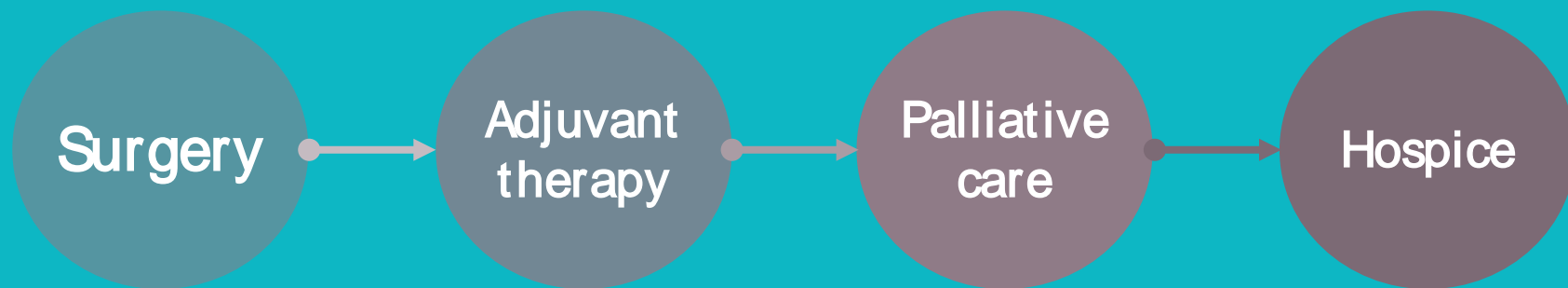
Emotional Reaction can be a ROLLER COASTER

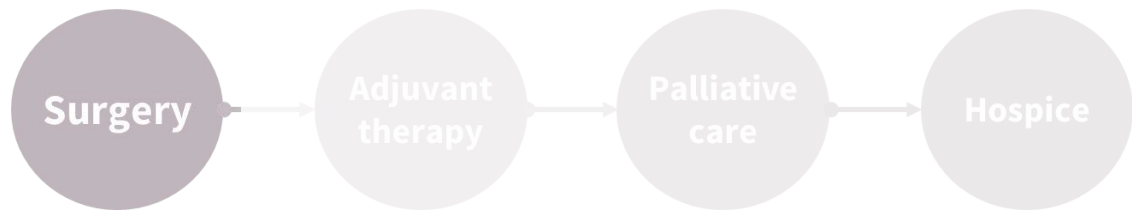


Working Model

Contexts of
StressorsCognitive,
Affective, &
Behavioral
ResponsesCancer
Adjustment

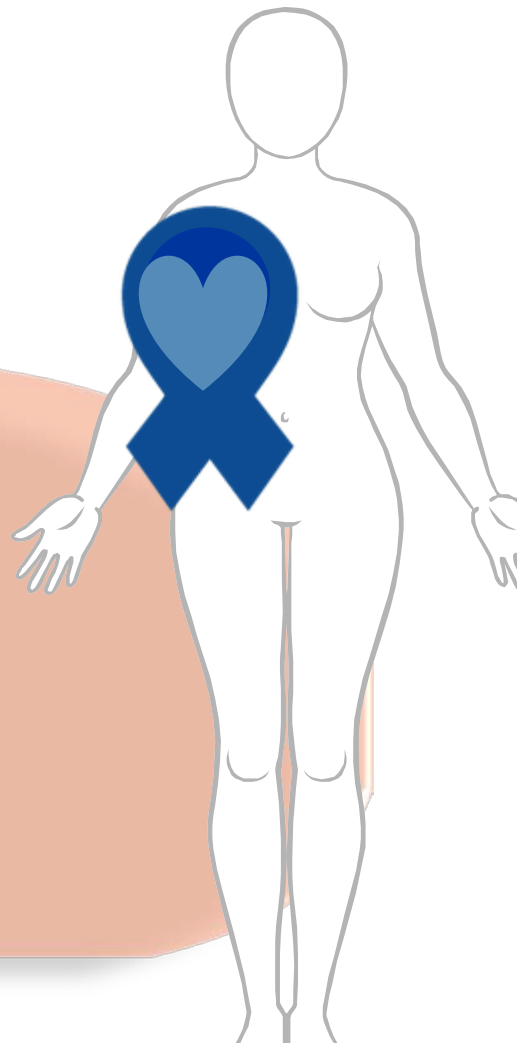
癌症的醫療階段





可進行項目
臨床心理師

1. Normalization
2. Psychoeducation 衛教團體
(臺大醫院心理中心)
3. Relaxation



CANCER JOURNEY IS NOT EASY

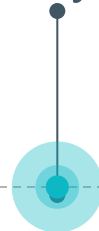
First day
to one
month



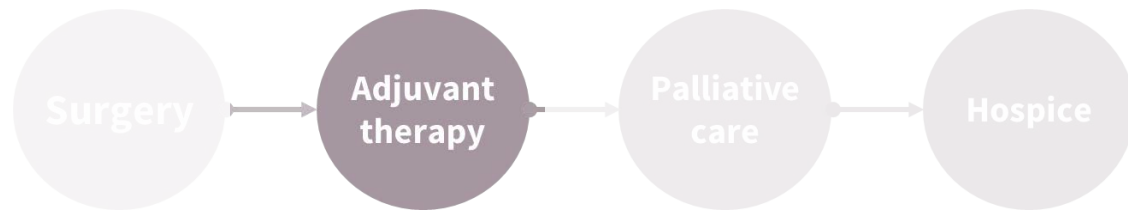
3 months
after
surgery



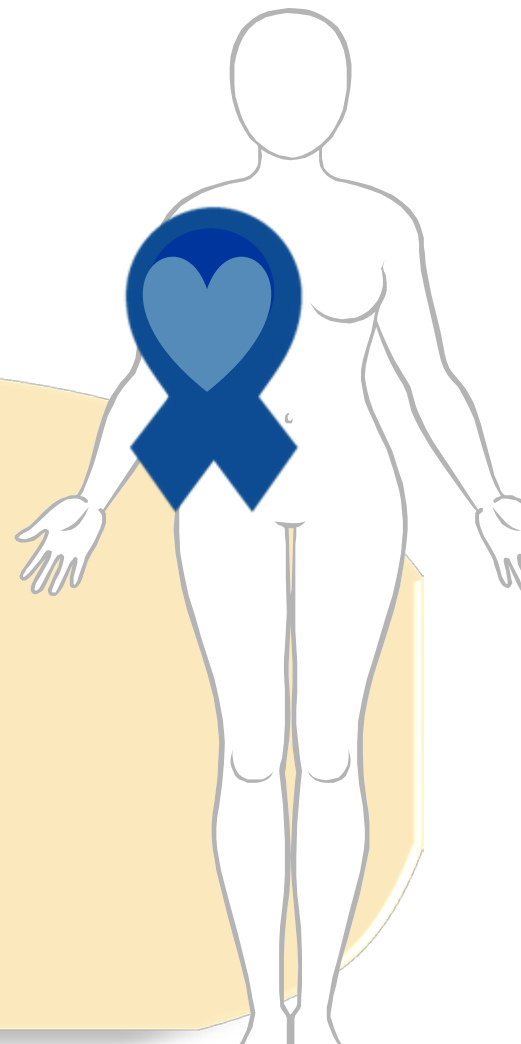
For 5-year



- ▶ 我都手術切除掉癌腫塊了，為何還要化學治療？
- ▶ 聽說化療會嘔心、嘔吐、掉頭髮、我能不能不要化療？
- ▶ 我有哪些治療選擇？
- ▶ 化療之後我還會恢復正常的人生嗎？
- ▶ 白血球低下，不能做化療
- ▶ 我擔心化療期間的感染



篩
檢

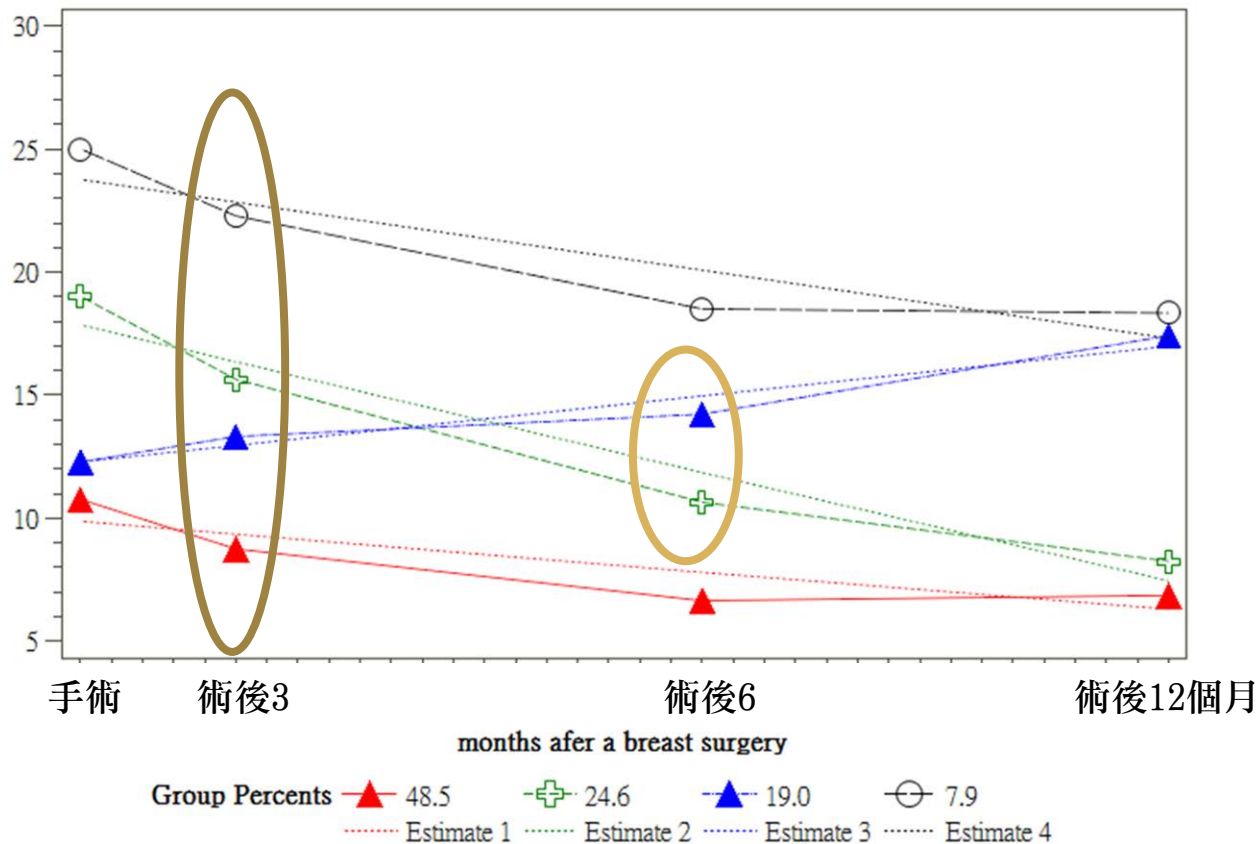


- *Who needs help?*
 - *And WHEN?*

”

ASSESSMENT

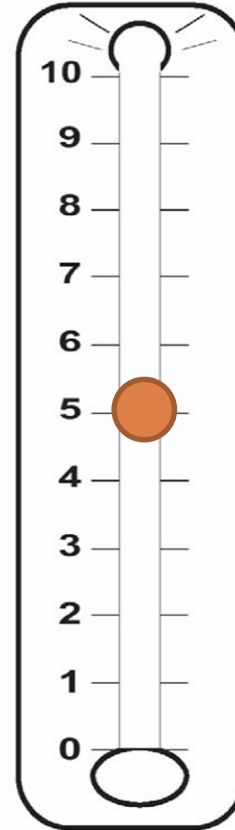
焦慮憂鬱的情緒 Psychological Distress



Distress THERMOMETER

How do you feel this week?

Excellent



terrible

5 yes → borderline

7 yes → consulting your doctor is recommended

Please contact us at 04-XXXXXXX#xxxx

8. Cancer diagnosis and treatment have interfered my family and social life.....

9. Cancer diagnosis and treatment have interfered my sexual life

10. My activities have been restricted by the pain and discomfort

11. Cancer has impeded my physical, emotional, and financial situation.....

12. Cancer diagnosis and treatment have changed my appearance, which I do care.....

13. I have had trouble adapting to the stressful experience that I have gone through.....

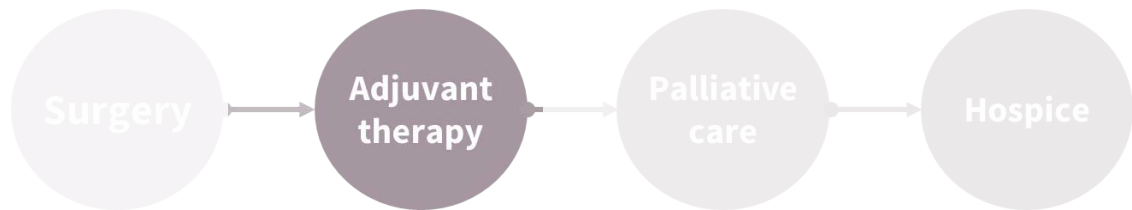
14. My life quality has been really good in these 2 weeks.....

Do I Need Professional Help? ?

The following questions help you to assess whether you need professional consulting help or not. There is neither right nor wrong answer. Please respond according to your feelings and situation.

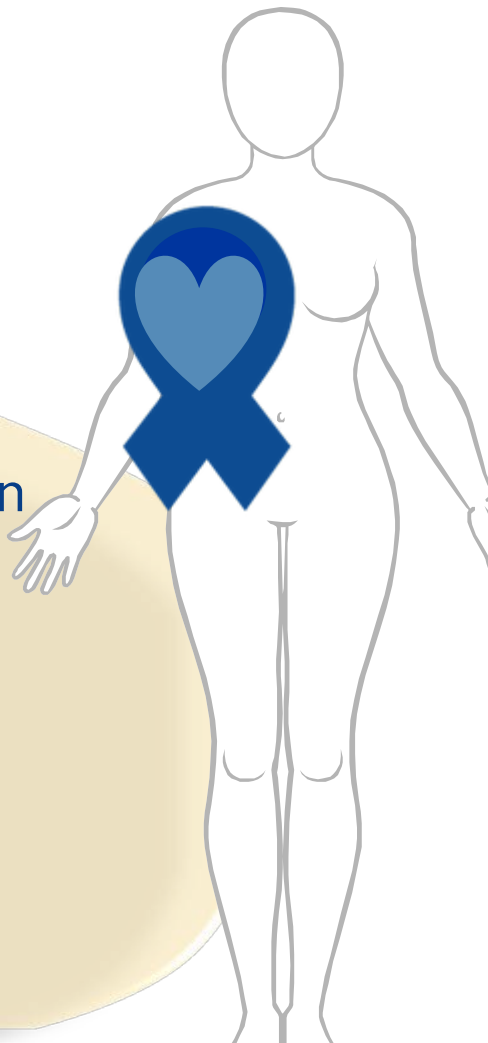
In the past 2 weeks

	Yes	No
1. I worry about cancer and the medical treatment.....	<input type="checkbox"/>	<input type="checkbox"/>
2. I am Upset and depressed.....	<input type="checkbox"/>	<input type="checkbox"/>
3. I am Irritated.....	<input type="checkbox"/>	<input type="checkbox"/>
4. My sleep pattern has changed.....	<input type="checkbox"/>	<input type="checkbox"/>
5. My appetite has changed.....	<input type="checkbox"/>	<input type="checkbox"/>
6. Inattention –I cannot concentrate on my work or other activities.....	<input type="checkbox"/>	<input type="checkbox"/>
7. Cancer diagnosis and treatment have interfered my daily life...	<input type="checkbox"/>	<input type="checkbox"/>



可進行項目
臨床心理師

- * Behavioral Activation Therapy for Depression
 - * Problem-Solving Therapy
- * Cognitive Stress Management therapy
- * Mindfulness-based Cognitive Therapy
 - * Supportive group psychotherapy
 - * The Expressive Writing Paradigm



- *Does one size fits all?*
 - *Who needs help?*

”



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Differential psychological effects of cognitive-behavioral stress management among breast cancer patients with high and low initial cancer-specific distress

Ashley W-T. Wang^a, Laura C. Bouchard^b, Lisa M. Gudenkauf^c, Devika R. Jutagir^{d,e}, Hannah M. Fisher^e, Jamie M. Jacobs^f, Bonnie B. Blomberg^{g,h}, Suzanne C. Lechner^{e,i}, Charles S. Carver^{e,h}, Michael H. Antoni^{e,h,j,*}

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ⁱ Research Advisor, LLC in Hallandale Beach, FL, United States

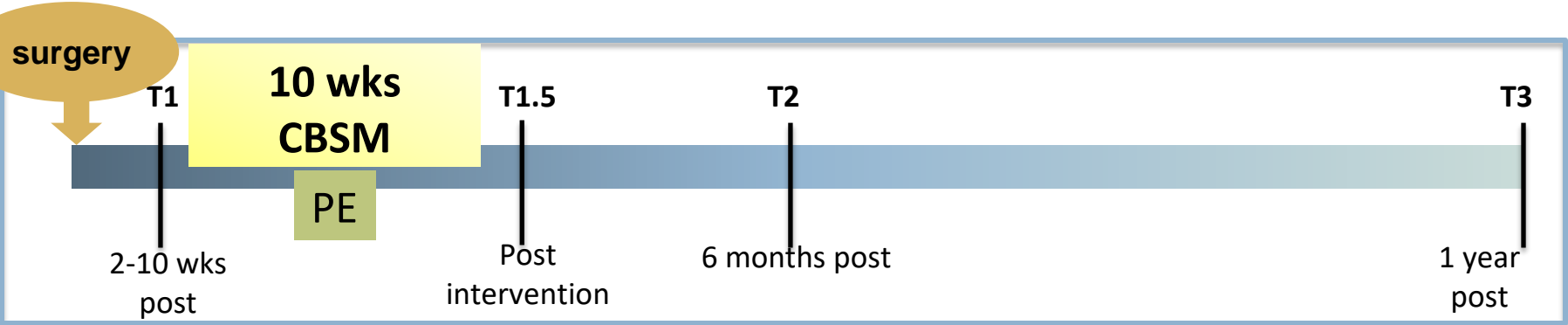
^j Department of Psychiatry and Behavioral Sciences University of Miami, Miller School of Medicine, Miami, FL, United States

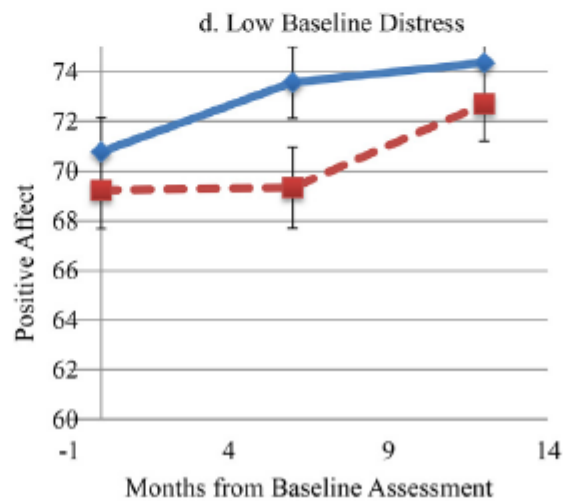
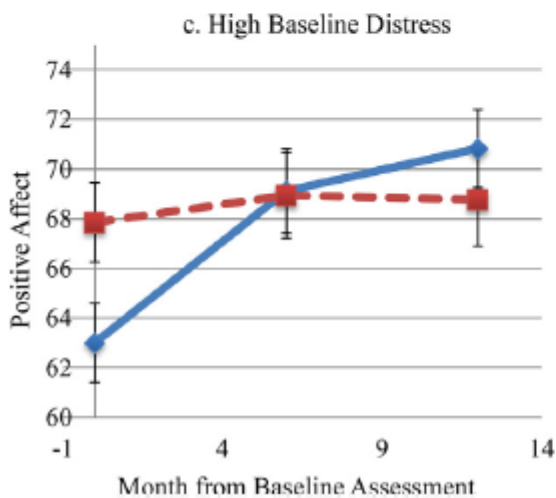
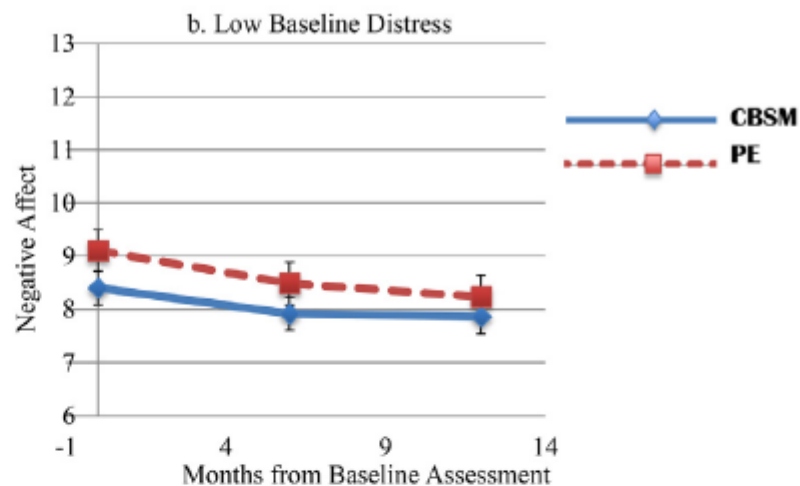
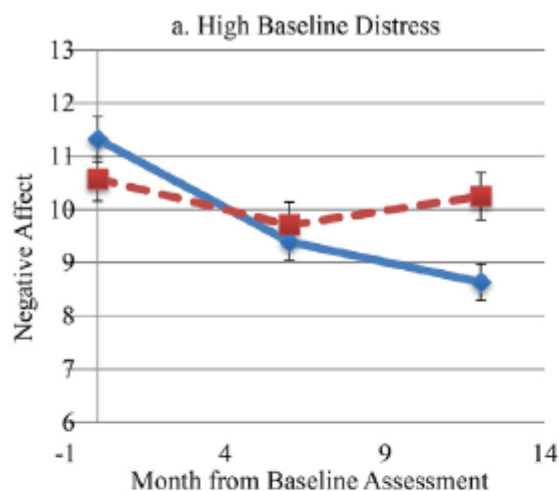
Participants & Procedures

Participants

- 240 women 18-70 years old with stage 0 – III breast cancer, recruited from South Florida cancer treatment centers between 1998– 2005
- *Exclusion criteria:*

Assessment Time Points





10-Week Group CBSM

RT

Relaxation

CBT

Behavioral

Wk

1

PMR-7

Stress Symptoms

2

PMR-4, Beach Scene Imagery

Appraisals

3

Passive PMR, Special Place Imagery

Distortions

4

Autogenic Relaxation

Reappraisals

5

Coping

6

7

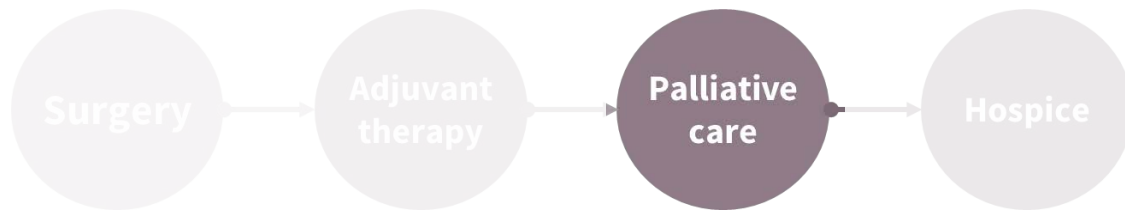
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9

10

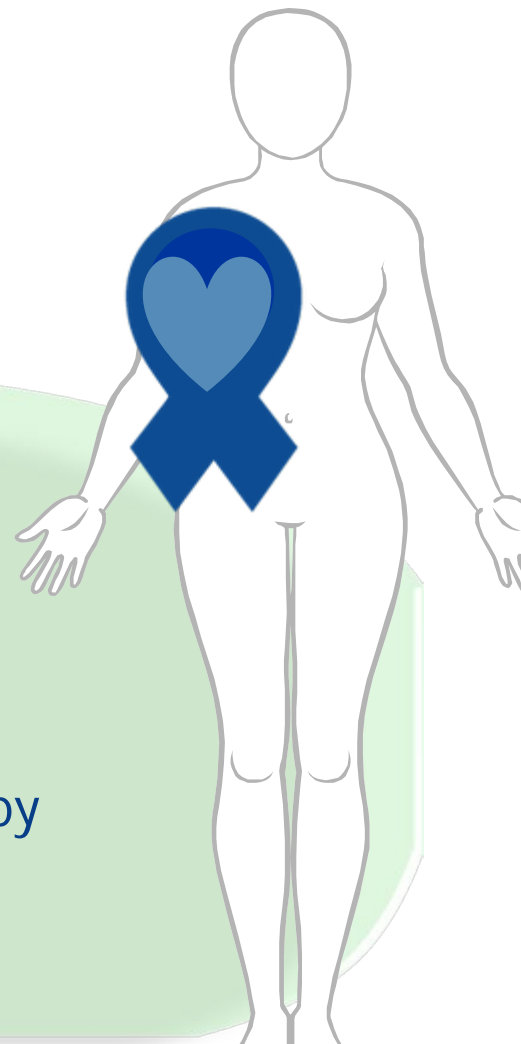


Review



臨床心理師
可進行項目

- * Family/ Caregiver
- * Problem-Solving
- * Stress Management therapy
- * Mindfulness & Relaxation
- * Supportive group psychotherapy
- * Narrative therapy



Interdependent psychological quality of life in dyads adjusting to cancer

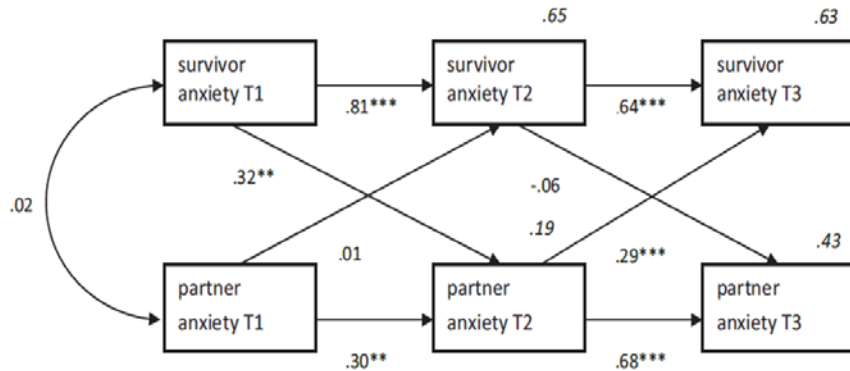


Figure 2. APIM for survivor and partner symptoms of anxiety. Values in italics are R^2 . $\chi^2 = 19.55$, $df = 4$, $p = .001$, $\chi^2/df = 4.89$, CFI = 0.91. ** $p < .01$. *** $p < .001$.

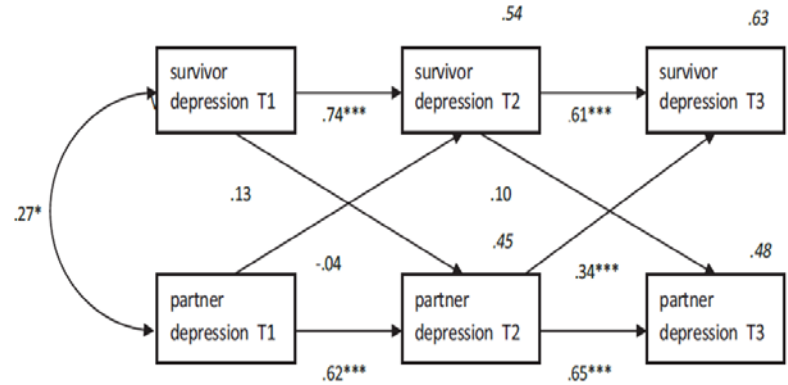


Figure 1. APIM for survivor and partner symptoms of depression. Values in italics are R^2 . $\chi^2 = 6.55$, $df = 4$, $p = .162$, $\chi^2/df = 1.64$, CFI = .99. * $p < .05$. *** $p < .001$.

Relationship between the psychological distress of cancer patients and their carers

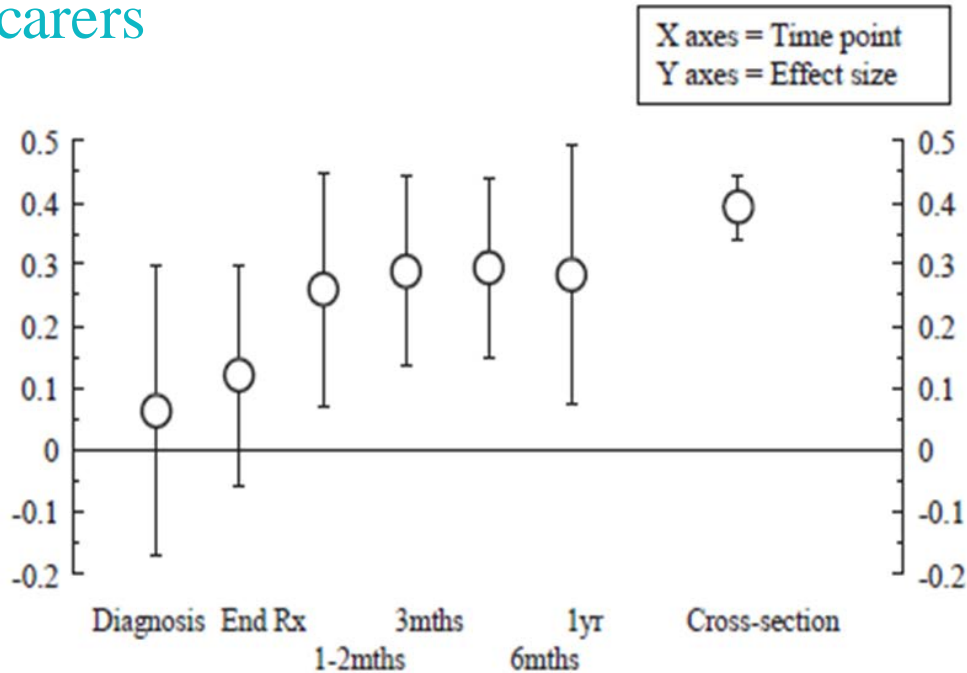


Fig. 1. Effect sizes of the relationship between patient and carer distress over time (random effects model).

- ▶ 經濟毒性是癌症病人因為治療所帶來的客觀經濟負擔(雖然是非故意造成，但不必然是非預期性的)，以及主觀的心理苦惱這兩者所導致，特別是跟治療新藥和伴隨的醫療服務有關。

”

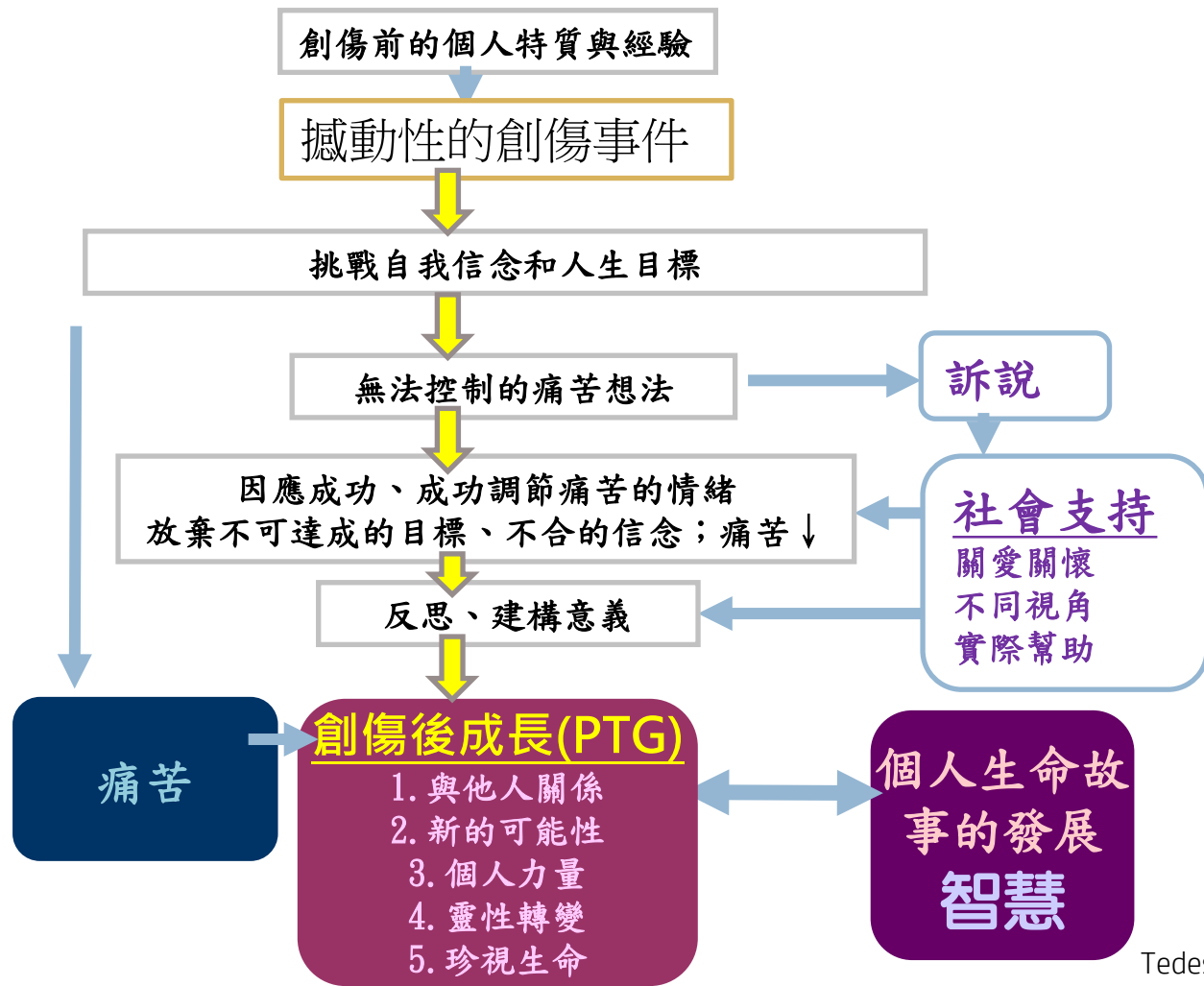


- ## Positive Resources

Patient assets can facilitate adjustment

How can we fortify these assets in patients?

*Improving psychosocial adaptation may affect
physiological adaptation*





MY LIFE STORY

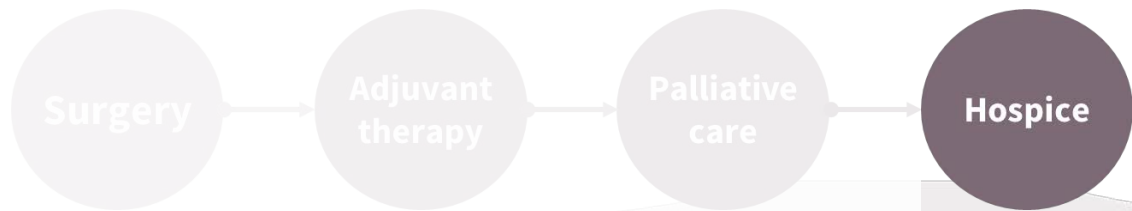
生命故事的訪談



採用Northwestern University 的Foley Center發展的生命故事訪談法，把自己的生命想成是一本書或小說，然後描述出生命故事的大綱。

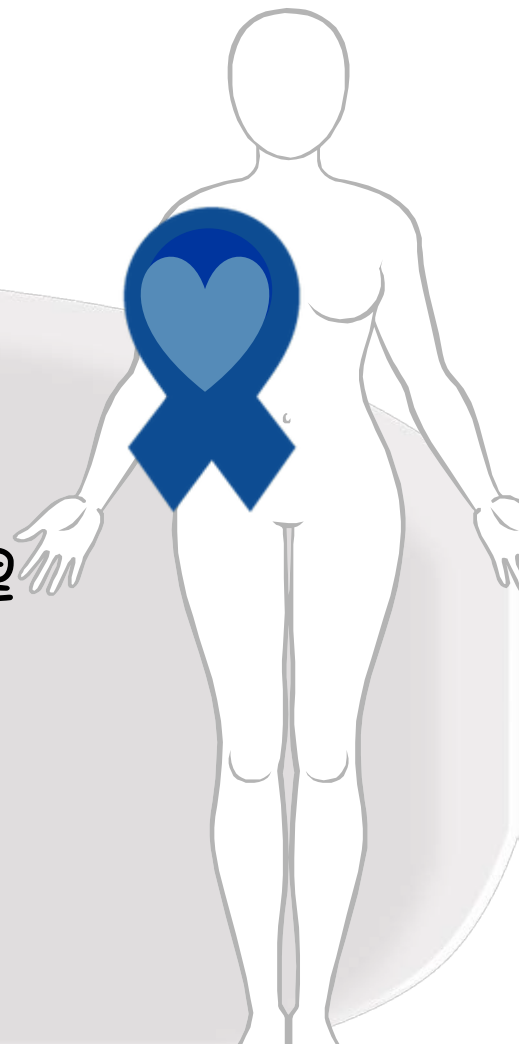
把焦點放在幾個關鍵的情景上：一生中的高峰期、低潮期、轉捩期。訪問者會引導研究參與者在描述每個關鍵情景時，需描述當時發生了什麼？什麼時候發生的？在哪裡發生的？身邊有哪些人？此情景對他們來說可能是好的或不好的？受測者的想法與感受又是什麼？這些事件讓參與者如何定義自己？依據訪談大綱一一詢問。

	Pearson Correlations with PTG			
	Combined	High points	Low points	Turning points
Self-event connection	.29**		.31**	.21*
Type of self-event connection				
Explanatory	-.19*		-.23**	
Change	.34***		.35***	
Reveal				
Redemption	.20*		.27**	
Contamination				
Level of processing	.47***	.32***	.37***	.38***
Result of processing	.42***	.24**	.30**	.34***



可進行項目
臨床心理師

照顧者的悲傷與情緒處理
家庭會談與諮商
面對死亡議題的準備



CONTACT ME



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- ▶ Assistant Professor
- ▶ ashleywang@gm.scu.edu.tw
- ▶ <https://scupsyashleywang.wixsite.com/sghlab/courses>
- ▶ <https://www.facebook.com/stress.growth.health/>



癌症心理學

