

TBMT Long-Term Follow-Up

Psychosocial Care for HSCT Patients, Family, and Healthcare Providers

時間：2023/06/04

地點：張榮發國際會議中心10F 1006會議室 & 線上

主辦單位：中華民國血液及骨髓移植學會

Time	Agenda	Speaker	Moderator
09:00-09:10	Opening	邱宗傑 前理事長 中華民國血液及骨髓移植學會	
09:10-09:45	Living with Hope, Coping with Uncertainty- Psychosocial Care for HSCT Patient with CALM.	莊永毓 醫師 和信醫院	江孟冠 教育專員 和信醫院
09:45-09:55	Q&A		
09:55-10:30	How do health providers cope with patient death?	葉北辰 心理師/理事 台灣心理腫瘤醫學學會	高偉堯 部長 台北慈濟醫院
10:30-10:40	Q&A		
10:40-10:50	Break		
10:50-11:25	How to support the family of a dying pediatric patient with HSCT?	趙芳欣 個案管理師 臺大醫院	周書緯 醫師 臺大醫院
16:25-11:35	Q&A		
11:35-11:55	Panel Discussion	陳瑞儀 督導 臺大醫院	
11:55-12:00	Closing	蔡承宏 秘書長 中華民國血液及骨髓移植學會	

演講摘要

<p>1. Living with Hope, Coping with Uncertainty- Psychosocial Care for HSCT Patient with CALM.</p>	<p>Cancer triggers enormous distress and brings challenges that can seem overwhelming. Yet most cancer centers lack systematic approaches to help patients and families manage the practical and emotional toll of cancer. Hematopoietic stem cell transplantation (HSCT) is an aggressive medical procedure which significantly impacts the emotional well-being of patients and family caregivers. Patients undergoing HSCT report a high prevalence of psychosocial distress, which can negatively impact recovery, function, and health outcomes, including mortality and a higher risk of graft vs. host disease. Appropriate management of these psychological symptoms lead to better engagement with treatment and a variety of superior health outcomes. Managing Cancer and Living Meaningfully (CALM), CALM is a psychosocial intervention developed specifically for patients with cancer. It consists of three to six 45- to 60-minute sessions delivered over 3 to 6 months by trained health-care professionals, such as social workers, psychiatrists, psychologists, doctors and nurses, and oncologists. Family members or partners are invited to attend the CALM sessions. The sessions focus on four broad domains: 1. Symptom control, medical decision-making, and relationships with health-care providers, 2. Changes in self-concept and personal relationships imposed by cancer, 3. Spiritual well-being and a sense of meaning and purpose in life, 4. Future-oriented concerns, hope, and mortality. CALM therapy helps patients facing cancer and their loved ones sustain what is meaningful in their life despite its limitations and face the future.</p>
<p>2. How do health providers cope with patient death?</p>	<p>當建立融洽的醫病關係後，同時也需要面臨可能因此而來的失落悲傷。悲傷輔導大師R.A.Neimeyer曾經說過「All changes involve losses, just as all losses require changes」，任何生命中的改變都會帶來失落，而失落背後的意義則會因人而異，對於醫事人員來說，病人的死亡帶來了什麼失落？是覺得失去自我效能（我怎麼讓他死了）？還失去一段關係（認識久了就像朋友一樣）？覺得自己辜負病人家屬的信任（失去部分的自我）？還是被勾起了自己擔心或曾經面臨的失落？本講座將從失落的意義討論如何因應照顧病人死亡的失落，並透過自我慈心的冥想練習來幫助自己因應這樣的失落。</p>
<p>3. How to support the family of a dying pediatric patient with HSCT?</p>	<p>移植對家屬及病童來說是個期待新生的過程，雖然歷程辛苦，但總會看見曙光...不可否認移植過程中仍有部分孩子進入另一個階段-死亡，從希望到絕望的過程，如何陪伴家屬面對重大失落及哀傷陪伴。</p>