Group ACT for women following early breast cancer treatment likely to improve quality of life and reduce fear of cancer recurrence

Pilot randomised control trial in regional Australia





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Procedure: Participants Approached (N=35) Participants Interviewed (N=31) Participants Randomised (N=24) Group B Group A Group W Measure 1 6 weeks of group based 6 weeks of group based breast cancer education Measure 2 6 weeks of group based 6 weeks of group based 6 weeks of group based breast cancer education ACT Measure 3 N = 6N = 7N = 7

Conditions:

Acceptance and Commitment Therapy Intervention Condition (6 x 90 minute sessions)

The intervention was adapted from an ACT intervention protocol developed by Joseph Ciarrochi and John Blackledge and used in a study by Feros, Lane, Ciarrochi, and Blackledge (2013). It consisted of a therapist manual and a client work book with 4 modules: Letting go of unhelpful struggles and making room for living; how we get stuck in our minds and lose sight of our lives as it's happening now; you are more than your pain, you are more than your suffering, you are more than your cancer; and moving towards a vital, meaningful life with your pain.

Breast Cancer Education Intervention Condition (6 x 90 minute sessions)

A breast cancer education program was organised by researcher and breast cancer care nurse. A topic was covered per each of the sessions. These were: Introduction to Yoga, Sexuality and Breast Cancer, Exercise and Breast Cancer, Osteoporosis/Physio, Diet and Breast Cancer, and Mindfulness and Breast Cancer. Sessions were delivered by facilitators of relevant fields such as dietitians, nurses, and physiotherapists.

Measures:

DASS21

The Depression, Anxiety, and Stress Scale (DASS), developed by Lovibond and Lovibond (1995), measures self-reported negative emotional states, separated into the three scales of Depression, Anxiety and Stress.

AAQ-II

The Acceptance and Action Questionnaire II (Bond et al., 2011) was intended for use with population-based studies of experiential avoidance.

FACT-B

The Functional Assessment of Cancer Therapy Scale – Breast (FACT-B; Brady et al., 1997) covers physical, functional, social and emotional wellbeing, satisfaction with treatment, and satisfaction with relationships. It has a Breast Cancer Subscale related to quality of life issues specific to patients with breast cancer.

CARS

The Concerns About Recurrence Scale (CARS) was developed by Vickberg (2003) to assess women's fears about possible breast cancer recurrence. Part of the measure produces an 'Overall Fear' score of mean ratings.

Main findings:

- * Our sample of women (rural breast cancer survivors accessing private hospital care) were generally psychologically healthy (low experiential avoidance, low fear of recurrence, high quality of life).
- * Reliable change index calculations showed 4 participants had clinically significant improvements across one or more measures. No participants were significantly worse following interventions.
- Overall, participants seemed to have reduced experiential avoidance, reduced fear of cancer recurrence, and improved quality of life following ACT intervention.
- Experiential avoidance correlated positively with fear of cancer recurrence (more avoidance, more fear), and negatively with quality of life (more avoidance, less wellbeing). This correlation seemed stronger when participants scored 20 or higher on the AAQ-II.

Main Limitations:

- † There was not enough power to answer some of our research questions.
- Floor and ceiling effects for psychological measures.
- Participation effect for depression, anxiety and stress measure.
- Highly motivated and resourced private hospital sample may not represent wider population of regional Australian women.

Future Direction:

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† Two condition randomised control trial, regional centre public hospital setting, larger sample size.



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