

Needs for coping skills training among female gynecologic cancer survivors undergoing surveillance pelvic examinations

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Objectives:

Pelvic exams after gynecologic cancer treatment are critical to detect recurrence, yet many patients experience exam-related anxiety and pain. Psychological interventions have not been developed for this context. We interviewed survivors and oncology providers to explore survivors' exam-related distress and assess their needs and preferences for support to develop an intervention.

Methods:

We conducted semi-structured interviews with cervical and endometrial cancer survivors (N=13; age M=57.7, range 32-73; Race: 46% White, 46% Black, 8% Asian) and oncology providers (N=10). We asked participants about surveillance exam experiences, coping strategies, and perceptions of a coping intervention. Thematic analysis was used to identify key themes.

Results:

The following themes emerged from interviews with survivors and providers: anxiety (e.g., about cancer recurrence, pain during exams) is common; some survivors effectively use coping skills during exams (e.g., distraction, breathing); and some survivors described exam-related coping deficits (e.g., “grin and bear it”). Most survivors indicated a desire to learn coping skills for exams. Both providers and survivors confirmed the proposed content (i.e., education, coping and communication skills training) was valuable. Potential intervention participation barriers included time, anxiety, and embarrassment; participation facilitators included therapists taking an active, collaborative therapeutic approach. Providers recommended including education about treatment side effects and surveillance exams, and teaching muscle tension release, mindfulness, and communication skills.

Conclusions:

Cancer survivors commonly experience anxiety and pain during surveillance examinations and desire to learn coping strategies to reduce distress. Findings will inform the development of an intervention to promote adaptive coping before and during exams.

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Disclosures:

None.