

ADOLESCENT AND YOUNG ADULTS WITH CANCER

Background

A cancer diagnosis can be upsetting for individuals of any age; however, the effects of a cancer diagnosis and treatment may be especially upsetting for people diagnosed as adolescents and young adults (AYAs). This period involves rapid physical and psychosocial development, and a cancer diagnosis can interrupt these developmental processes:

- Treatment often leads AYAs to take a large amount of time off from school or work, affecting career and education plans.
- Treatment can make the formation of romantic relationships difficult due to factors such as body image concerns, limitations placed on one's activities, etc.
- Treatment can lead to infertility, interfering with the ability to start biological families.
- A potentially life-threatening illness can be especially startling for AYAs:
 - AYAs likely have a better understanding of the seriousness of their illness than child patients, but are often unprepared to process the meaning of a serious disease as effectively as older patients.
 - AYAs are still in the process of developing a stable sense of self and, therefore, diagnosis and treatment of a serious illness during this time period could have a different psychological impact than it does for older adults.

Although many people with cancer diagnosed during adolescence or young adulthood show positive psychological adaptation, this group has been found to be at risk for a range of psychological difficulties:

- Anxiety
 - Worries about current and future health
 - Fears about cancer coming back
 - Feeling that something bad could happen to them at any time
- Depression
 - Feelings of sadness
 - A sense of hopelessness about the future
- Posttraumatic stress
 - Intense negative feelings upon encountering reminders about the cancer experience
 - A sense of reexperiencing upsetting aspects of the cancer experience
 - Having bad dreams about the cancer experience
- Survivor guilt
 - Feeling badly about surviving when some of their peers do not
- General concerns about the consequences of their illness
 - Concerns about careers, finances, their ability to care for young children.
- Distress about body image
 - Treatment often leads to physical changes, such as weight loss/gain, scarring, and hair loss.

What Is Cognitive Behavior Therapy?

Behavior Therapy and Cognitive Behavior Therapy are types of treatment that are based firmly on research findings. These approaches aid people in achieving specific changes or goals.

Changes or goals might involve:

- A way of acting, like confronting our feared thoughts
- A way of feeling, like helping a person be less scared, less depressed, or less anxious
- A way of thinking, like evaluating the probability of an event occurring
- A way of dealing with physical or medical problems, like lessening back pain or helping a person stick to a doctor's suggestions.

Behavior Therapists and Cognitive Behavior Therapists usually focus more on the current situation and its solution, rather than the past. They concentrate on a person's views and beliefs about their life, not on personality traits. Behavior Therapists and Cognitive Behavior Therapists treat individuals, parents, children, couples, and families. Replacing ways of living that do not work well with ways of living that work, and giving people more control over their lives, are common goals of behavior and cognitive behavior therapy.

HOW TO GET HELP: If you are looking for help, either for yourself or someone else, you may be tempted to call someone who advertises in a local publication or who comes up from a search of the Internet. You may, or may not, find a competent therapist in this manner. It is wise to check on the credentials of a psychotherapist. It is expected that competent therapists hold advanced academic degrees and training. They should be listed as members of professional organizations, such as the Association for Behavioral and Cognitive Therapies or the American Psychological Association. Of course, they should be licensed to practice in your state. You can find competent specialists who are affiliated with local universities or mental health facilities or who are listed on the websites of professional organizations. You may, of course, visit our website (www.abct.org) and click on "Find a CBT Therapist."

The Association for Behavioral and Cognitive Therapies (ABCT) is an interdisciplinary organization committed to the advancement of a scientific approach to the understanding and amelioration of problems of the human condition. These aims are achieved through the investigation and application of behavioral, cognitive, and other evidence-based principles to assessment, prevention, and treatment.

Treatment

Psychotherapy research specific to AYAs with cancer is in its early phases. However, there is growing evidence that cognitive behavioral therapy (CBT) is an effective treatment for many of the psychological difficulties faced by AYAs.

CBT is a form of psychotherapy that draws upon the connections among one's thoughts, behaviors, and emotions. It relies upon two major components to help with difficulties such as those described above: (a) evaluating one's thought patterns and, when appropriate, actively working to change thought patterns that lead to negative feelings; and (b) making changes to one's behavior to decrease negative feelings. CBT has been found to be a highly effective treatment for anxiety, depression, and trauma-related symptoms in both adolescents and adults without cancer, and it has been shown to effectively target cancer-related psychological difficulties in people with a range of diagnoses, disease stages, and age groups. CBT can help AYA cancer survivors to cope with worry, sadness, and guilt related to the cancer experience and to process traumatic aspects of the cancer experience.

For example, if a young person were concerned about people looking at a cancer-related surgical scar on their neck—so much that they began feeling extremely sad and stopped leaving the house—CBT could help. A therapist would help the young person understand the relationship among these thoughts, the feelings of sadness, and staying inside.

The therapist would then help the young person challenge the degree to which those thoughts might be realistic or unrealistic. Is it likely that everyone is looking at the scar? How many people would realistically notice it? If people notice the scar, what might they really think? What would you think if you saw someone with a scar on their body? The therapist might challenge the young person to try and consider these questions and try leaving the house to see what might happen. It would probably not be as bad to leave the house as the young person was expecting.

As the young person's thought patterns about people looking at their scar became more realistic, they might notice that they start feeling less sad, and are more interested in leaving the house once again. CBT cannot change the fact that this young person has had to cope with a difficult diagnosis, but it can help ease the related difficult feelings.

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For more information or to find a therapist:

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