Cancer Survival is Not Influenced by a Patient's Emotional Status

Atlanta 2007/10/22 - A patient's positive or negative emotional state has no direct or indirect effect on cancer survival or disease progression, according to a large scale new study. Published in the December 1, 2007 issue of CANCER, a peer-reviewed journal of the American Cancer Society, the study found that emotional well-being was not an independent factor affecting the prognosis of head and neck cancers.

The question of whether or not the mind, through psychological state and emotional status, has the ability to heal organic disease in the body continues to be reviewed and tested in human health research. A large body of evidence strongly suggests that, for life-threatening diseases such as advanced cancer, it does not. However, this debate continues in popular and scientific circles. Particular importance has been attached to the question because of the belief that if it can be shown that emotions affect the outcome of cancer, then psychotherapy might be able to aid in the fight against cancer.

Dr. James Coyne and colleagues from the University of Pennsylvania say previous studies used patients with many different diseases, small sample sizes and an inadequate number of deaths to be conclusive. Dr. Coyne's team analyzed data from two community studies of patients with head and neck cancer "to examine whether emotional well being at study entry predicted survival." Their approach had the methodological strengths of using a homogenous population and many deaths to detect even small statistically significant effects.

The sample included 1,093 patients with head and neck cancer who completed a quality of life questionnaire during their treatment. Of that group, 646 died during the length of the study. The analysis showed that emotional status was not associated with survival rate. Emotional status was not associated with survival even after investigating several other factors, such as gender, tumor site or disease stage.

In one of the methodologically strongest studies to date, Dr. Coyne and co-authors found that emotional status "neither directly affected progression or death, nor functioned as a lurking variable." While this study may not end the debate, it does provide the strongest evidence to date that psychological factors are not independently prognostic in cancer management. Moreover, a recent comprehensive review by Dr. Coyne and Dr. Stephen Palmer of the University of Pennsylvania and Michael Stefanek of the American Cancer Society failed to find credible evidence in the available studies for the claim that cancer patients' participation in psychotherapy or support groups prolonged their lives. That review was published in Psychological Bulletin. Dr. Coyne noted that "The hope that we can fight cancer by influencing emotional states appears to have been misplaced. If cancer patients want psychotherapy or to be in a support group, they should be given the opportunity to do so. There can be lots of emotional and social benefits. But they should not seek such experiences solely on the expectation that they are extending their lives."