

Family Counseling Improves Lives of Patients and Spouses Coping with Prostate Cancer

Atlanta 2007/11/12 -Families coping with prostate cancer report improved quality of life from a structured support program integrated into the patient's cancer management, according to a new study. The findings appear in the December 15, 2007 issue of *CANCER*, a peer-reviewed journal of the American Cancer Society. This randomized clinical trial by Dr. Laurel Northouse from the University of Michigan and co-investigators found that patients and their spouses who participated in a five-session home counseling program reported significant improvement in such areas as symptom management, hope, uncertainty and couples' communication.

Prostate cancer is the most frequently diagnosed cancer in men. While treatment advances have reduced mortality rates since the early 1990s, the treatments themselves are often associated with serious permanent side effects, such as urinary incontinence or sexual dysfunction. These side effects have been shown to impact both the patient and his spouse, who is most often solely relied upon to provide support and home care. Studies show that spouses of prostate cancer patients report greater levels of distress and uncertainty than their husbands and that couples report difficulties in communication. The stress of providing care for a loved one has been linked to poorer health and even higher risk of death.

Dr. Northouse and her colleagues conducted a randomized control trial comparing standard patient-centered clinical care and an intensive multivariable intervention targeting patients and their spouses. This family-based intervention targeted 1) so-called "appraisal variables" – that is appraisal of illness or caregiving, uncertainty, hopelessness – 2) "coping resources" – such as coping strategies, self-efficacy, and communication – 3) overall or cancer-specific "symptom distress" and 4) quality of life.

In Dr. Northouse's clinical trial, 113 couples were assigned to the control group and 112 to the intervention. Couples in the intervention group received three 90-minute sessions at home and two follow-up telephone sessions over a four-month period. Couples were then assessed before treatment and every four months for one year.

Spouses in the intervention arm reported the most benefits and most sustained improvements "that improved spouses' appraisal of the caregiving experience, increased their ability to cope, and enhanced their physical and mental quality of life." For example, spouses in the intervention arm reported significantly better mental health by the fourth month and significantly improved physical quality of life by the eighth month.

Based on their findings, Dr. Northouse and co-authors conclude that by employing a structured and systematic program conducted "jointly with patients and spouses, clinicians can help both to gain information and obtain support, which reduces their uncertainty and facilitates communication about the illness." At a minimum, they conclude, "clinicians need to recognize that spouses are affected by the cancer and to treat them as co-recipients of care."

Article: "Randomized Clinical Trial of a Family Intervention for Prostate Cancer Patients and Their Spouses," Laurel L. Northouse, Darlene W. Mood, Ann Schafenacker, James E. Montie, Howard M. Sandler, Jeffrey D. Forman, Maha Hussain, Kenneth J. Pienta, David C. Smith, Trace Kershaw, *CANCER*; Published Online: November 12, 2007 (DOI: 10.1002/cncr.23114); Print Issue Date: December 15, 2007.

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