6TH ANNUAL SCIENTIFIC CONFERENCE OF THE
EUROPEAN ASSOCIATION OF PSYCHOSOMATIC MEDICINE · EAPM ·
INNOVATIVE AND INTEGRATED APPROACHES
TO PROMOTE MENTAL AND PHYSICAL HEALTH
Verona (Italy), 27-30 June 2018

EAPM 2018

Psychosocial variables and cancer mortality

A.T. Bates, B. Leung, A. Srikanthan, H. Rennie, G. MacKenzie, A. Shokoohi, J. Laskin, J. Wu, C. Ho

BC Cancer; University of British Columbia

OBJECTIVE:

A number of studies have demonstrated associations between cancer mortality and psychosocial variables. We aimed to examine these associations in a large sample of patients attending a major cancer centre.

METHODS:

All patients who attended BC Cancer from April 2011-2016 and completed the PSSCAN-R and the Canadian Problem Checklist within 6 months of cancer diagnosis were included. We asked if patients lived alone, had help with IADLs, had regular contact with others, had lost a life partner recently, and had emotional support. We also identified patients with moderate to severe anxiety and/or depression, with analysis to-date being limited to patients 65 and older. Overall survival was estimated using the Kaplan-Meier method with log rank comparison and multivariate analysis conducted using the Cox regression method.

RESULTS:

The study included 48,954 patients; median age 66, 55% female, 17% metastatic disease. All measures of social isolation were associated with shorter median survival; living alone: 37 months vs. 57 months, $p<0.001$; no help with IADLs: 49m vs. 52m, $p=0.019$; no regular contact with others: 39m vs. 49m, $p<0.001$; recent loss of spouse: 34m vs. 55m, $p<0.001$; no emotional support: 44m vs. 52m, $p<0.001$. Multivariate analysis including baseline disease characteristics demonstrated that older age, male sex, metastatic disease, living alone, recent loss of spouse and no emotional support were significant negative prognostic factors. In the subsample of 26, 323 patients 65 and older, median survival was reduced in patients with significant anxiety (34 m vs 43 m, $p<0.001$) and depression (31m vs 43m, $p<0.001$). Multivariate analysis including age, sex, metastatic status, anxiety, and depression showed all variables contributing as predictors (increasing age HR 1.05, male HR 1.11, M1 vs M0 HR 3.62, anxiety HR 1.30, depression HR 1.50).

CONCLUSIONS:

This large dataset replicates findings of social isolation, depression, and anxiety being significant risk factors for mortality in cancer patients. Further research aimed at developing effective interventions is needed.