



# EAPM 2018

6<sup>TH</sup> 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

## The assessment of Demoralization and its consequences in cancer

Anja Mehnert<sup>1</sup> and Sigrun Vehling<sup>2</sup>

<sup>1</sup>*Department of Medical Psychology and Medical Sociology, University Medical Center Leipzig, Germany*

<sup>2</sup>*Department and Outpatient Clinic of Medical Psychology, University Medical Center Hamburg-Eppendorf, Germany*

**OBJECTIVE:** Demoralisation and existential distress are important factors affecting psychological well-being and quality of life in cancer patients. Demoralization refers to a state in which there is a perceived inability to cope, that is associated with a sense of disheartenment and a loss of hope and meaning. Demoralisation may arise from the impact of multiple existential challenges raised by cancer diagnosis and treatment, which include fear of death and dying and the threat to fundamental human needs for autonomy, self-worth and relatedness to others. This contribution provides an overview about the concept of demoralization and the co-occurrence of other mental states such as depression, its assessment and its consequences such as suicidal ideation.

**METHODS:** We analysed a subsample of a representative multicenter epidemiologic study on the prevalence of comorbid mental disorders involving cancer patients in Germany. We assessed demoralization with the Demoralization Scale (DS); the 4-week mental disorders, and suicidal ideation with the standardized Composite International Diagnostic Interview–Oncology (CIDI-O); and depressive symptoms with the Patient Health Questionnaire-9 (PHQ-9).

**RESULTS:** In total, 430 cancer patients with mixed tumor entities completed the CIDI-O and were analysed in this study. We found clinically relevant levels of demoralization in 21% of the patients. Demoralization co-occurred with a mood/anxiety disorder in 7%; 14% were demoralized in absence of any mood/anxiety disorder. Demoralization and adjustment disorders co-occurred in 2%. Demoralization, but not depression, was associated with a significantly increased risk for suicidal ideation after controlling for mental disorders (RR, 2.0; 95% CI, 1.1-3.5).

**CONCLUSIONS:** The results of this study indicate that demoralization is a relevant and distinct dimension of distress in patients with cancer. Clinically relevant demoralization frequently occurs independently of a diagnosis of a mood, anxiety, or adjustment disorder in patients with cancer and demoralization has a unique contribution to suicidal ideation.

### CONGRESS PRESIDENT EAPM 2018

Mirella Ruggeri  
Section of Psychiatry, University of Verona  
and Verona Hospital Trust

### ORGANIZING SECRETARIAT

COGEST M. & C. srl  
Vicolo San Silvestro 6, 37122 Verona (Italy)  
Ph: +39 045 597940 · Fax: +39 045 597265  
Email: [cogest@cogest.info](mailto:cogest@cogest.info) · [www.cogest.info](http://www.cogest.info)



# EAPM 2018

6<sup>TH</sup> 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

**CONGRESS PRESIDENT EAPM 2018**

**Mirella Ruggeri**

Section of Psychiatry, University of Verona  
and Verona Hospital Trust

**ORGANIZING SECRETARIAT**

**COGEST M. & C. srl**

Vicolo San Silvestro 6, 37122 Verona (Italy)

Ph: +39 045 597940 · Fax: +39 045 597265

Email: [cogest@cogest.info](mailto:cogest@cogest.info) · [www.cogest.info](http://www.cogest.info)