

Informing on Improved Fertility Psychological Care for Cancer Patients: A systematic review of fertility-related psychological distress and reproductive concerns in cancer patients and proposed psychological intervention

Shanna Logan, Janette Perz, Jane Ussher, Michelle Peate and Antoinette Anazodo

DR SHANNA LOGAN

Twitter: @shannalogan

Clinical Psychologist | D. Clin Psych, PhD
Fertility Counsellor | Member FSA, ANZICA





Reproductive
Concerns

Quality of Life

Psychological Distress

Services are Helpful

Negative emotional
experiences

Persistent concerns

Mental Health
Diagnoses

Current Model Psychological Care

- Referral to specialist for FP discussion
- Opportunity of counselling to assist FP decision-making
- Limited fertility psychological ongoing assistance throughout treatment or survivorship



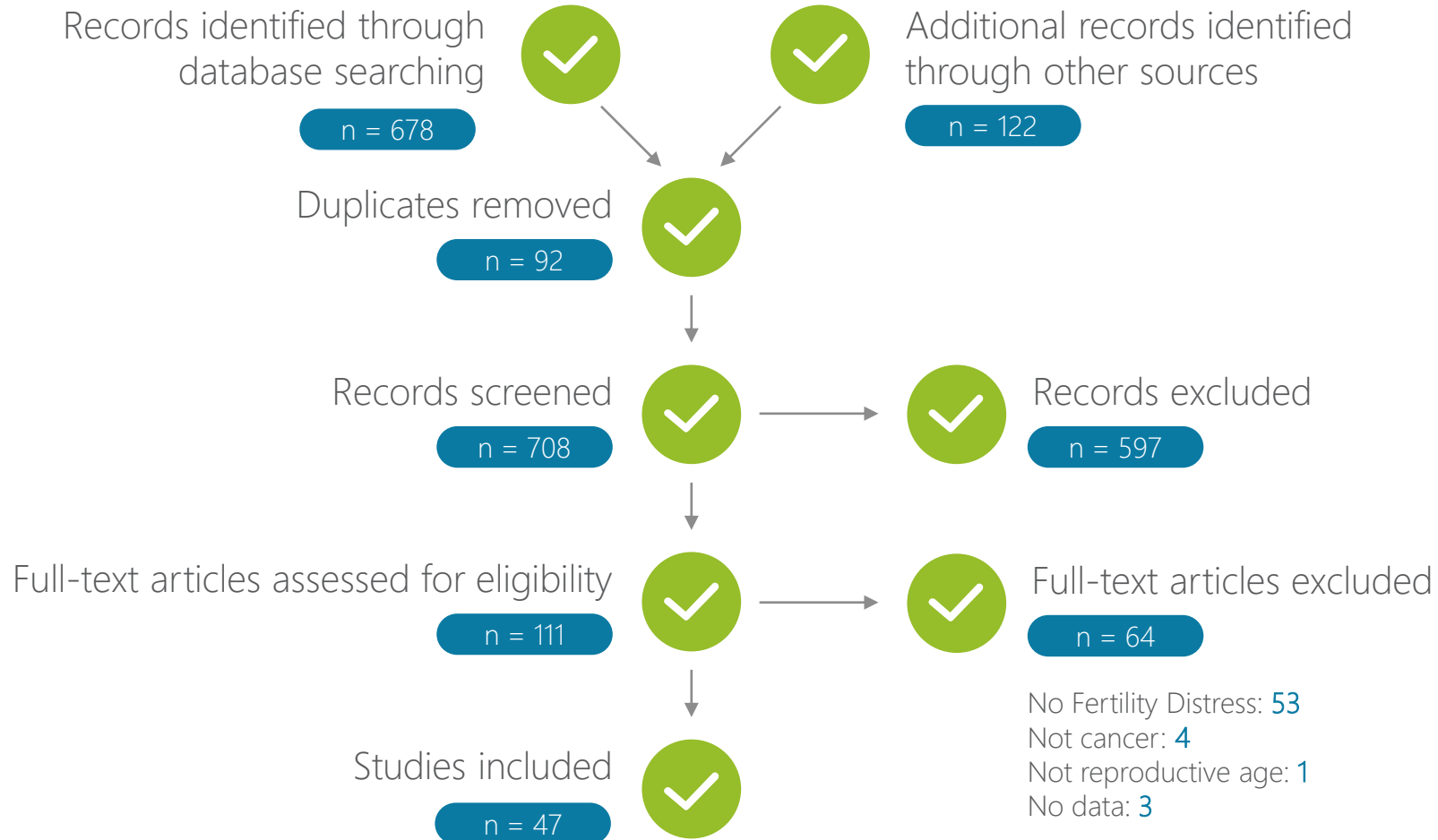
Fertility-Related Psychological Distress Across Treatment Time-Points

Identification

Screening

Eligibility

Included



Results

- 47 papers (30=quantitative; 13 qualitative; 4 mixed methods)
- 199-2018 most within USA (n=28)
- Majority reporting on female patients only (n=30), and only 4 on male alone
- 4 papers investigated childhood cancer survivors, 5 AYA patients
- 18 papers focused on specific cancer of reproduction (mostly breast n=7)
- Only 11 had a primary focus on fertility-related distress

Treatment time point

- Diagnosis (n=8)
- Treatment (n=6)
- Early survivorship (2-5 years approx.; n=8)
- Survivorship generally (n=6)
- Late survivorship (5-15 years; n=19)

Diagnosis and Treatment

Psychological Distress

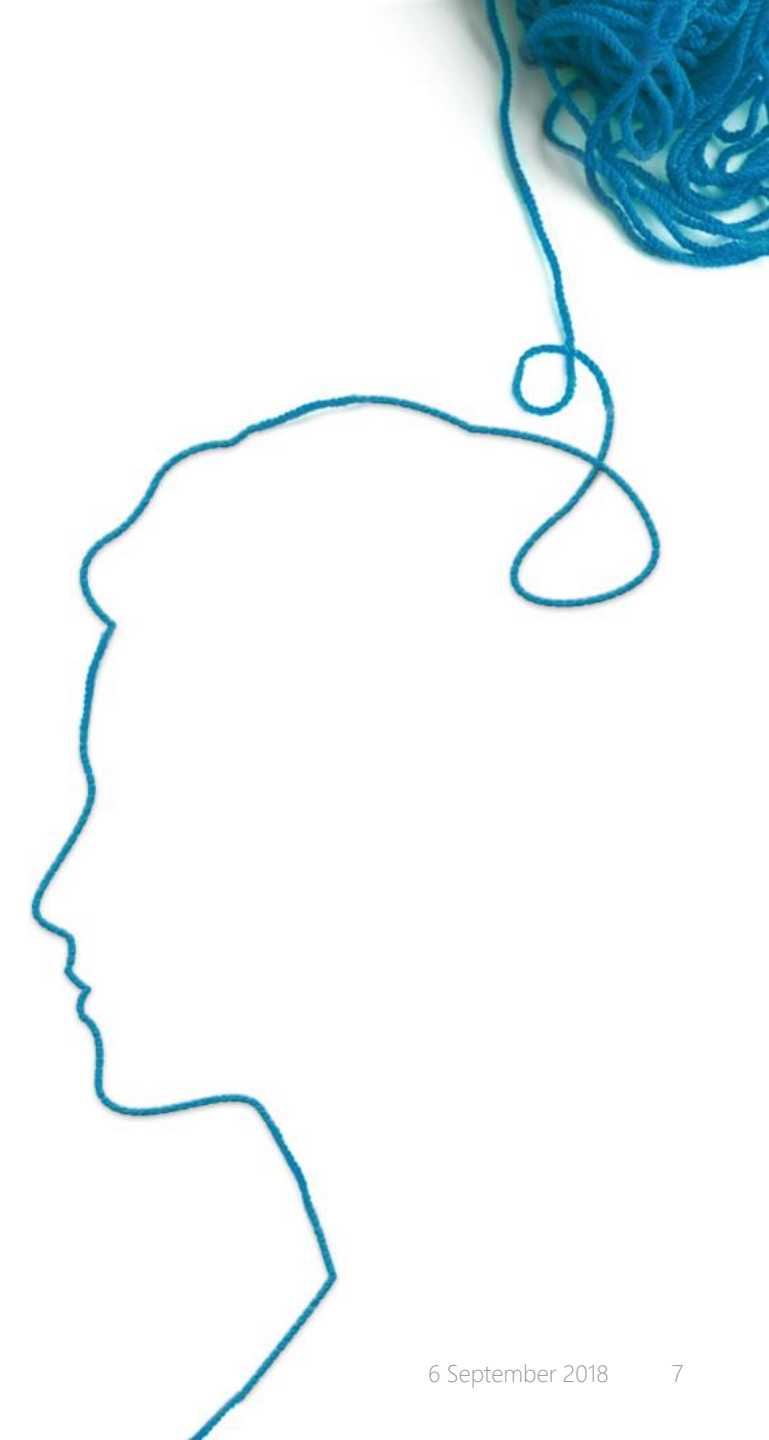
- For some as devastating as cancer
- Negative emotional responses to news of infertility and managing fertility treatment
- Poorer mental health; depression and anxiety (30-62%) compared to infertile non-cancer patients and ($p < .05$)
- Anxiety and depression persist throughout FP Tx, but depression and trauma may reduce over time (subclinical at 12 months post Dx)

Reproductive Concerns

- Reproductive concerns (RC) experienced by majority of some patient samples (female cervical 90-100%) and are frequent (41-57%)
- RC persist throughout treatment (90% diagnosis, 100% 6 months, 73% at 2 years)
- Exploring RC may elevate anxiety

Intervention

- 3 studies reported on usefulness of psychological intervention; psycho-sexual education, fertility counselling by a specialist or psychologist



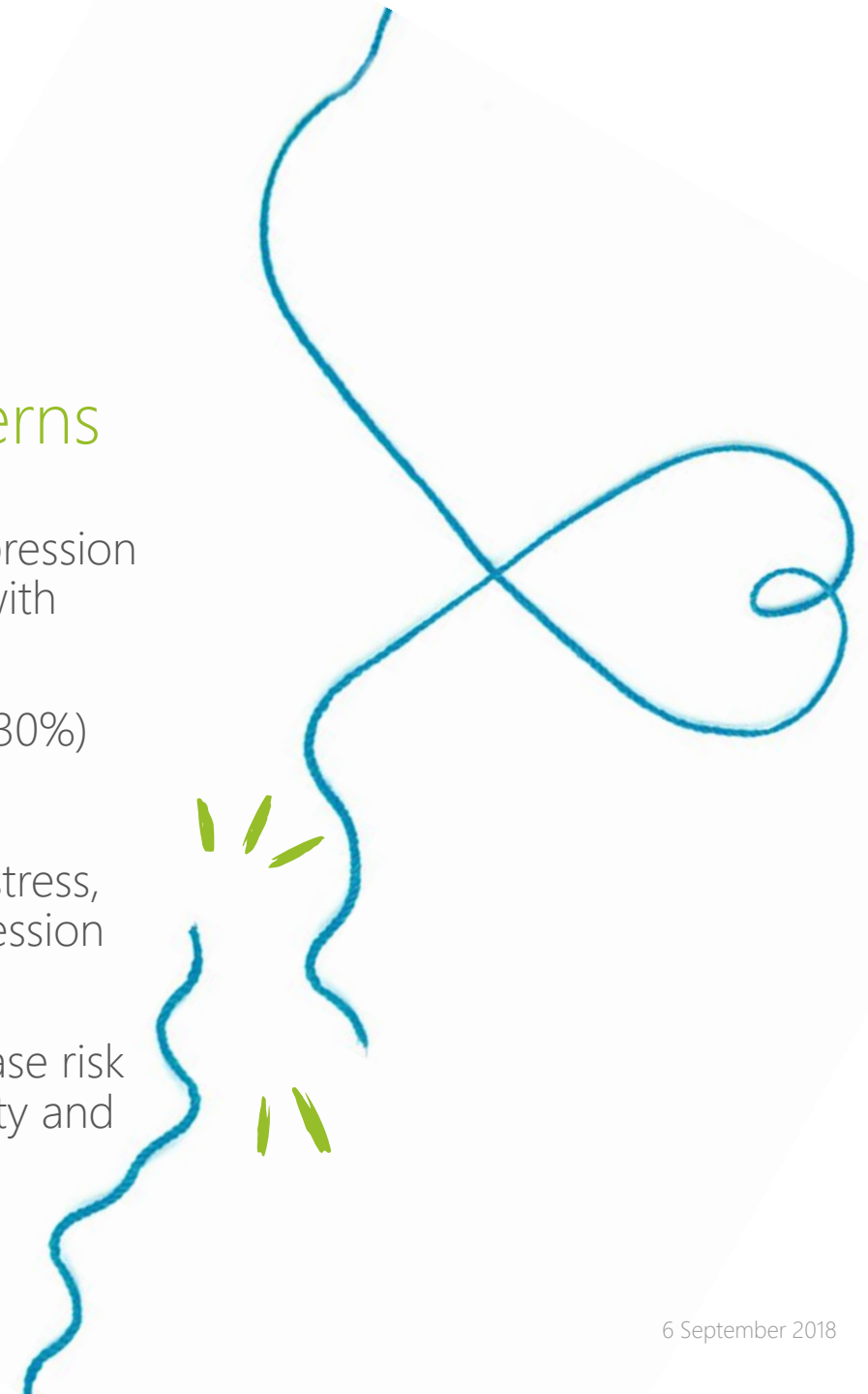
Survivorship

Psychological Distress

- Range of negative emotional experiences
- Disruption to sense of self and life narrative
- Depression (22-30%) in post menopausal or infertility women
- Fertility-related trauma (20-72%), in particular intrusive memories. Correlated with depression ($p < .0001$)
- Anxiety symptoms commonly reported
- Cancer site, type and treatment experiences all influence distress

Reproductive Concerns

- Associated with elevated depression ($p < .0001$ – $p = .0002$), OR1.3 with RCAC
- Unfulfilled desire for a child (30%) linked with greater trauma symptoms (intrusion and avoidance), higher cancer distress, lower QOL, and higher depression in nulliparous.
- Menopause symptoms increase risk of depression (OR 3.4), anxiety and trauma



Current landscape



- Fertility-related psychological distress and heightened reproductive concerns are both prevalent and persistent throughout all stages of cancer.
- Female patients and younger patients appear to be most at risk at time of diagnosis; female and childless/ interrupted family planning most impacted in survivorship
- Lack of psychological interventions post diagnosis or long term follow up care
- Wary of limited data, limited use of psychological clinical measures, limited number of interventions



Psychological Distress

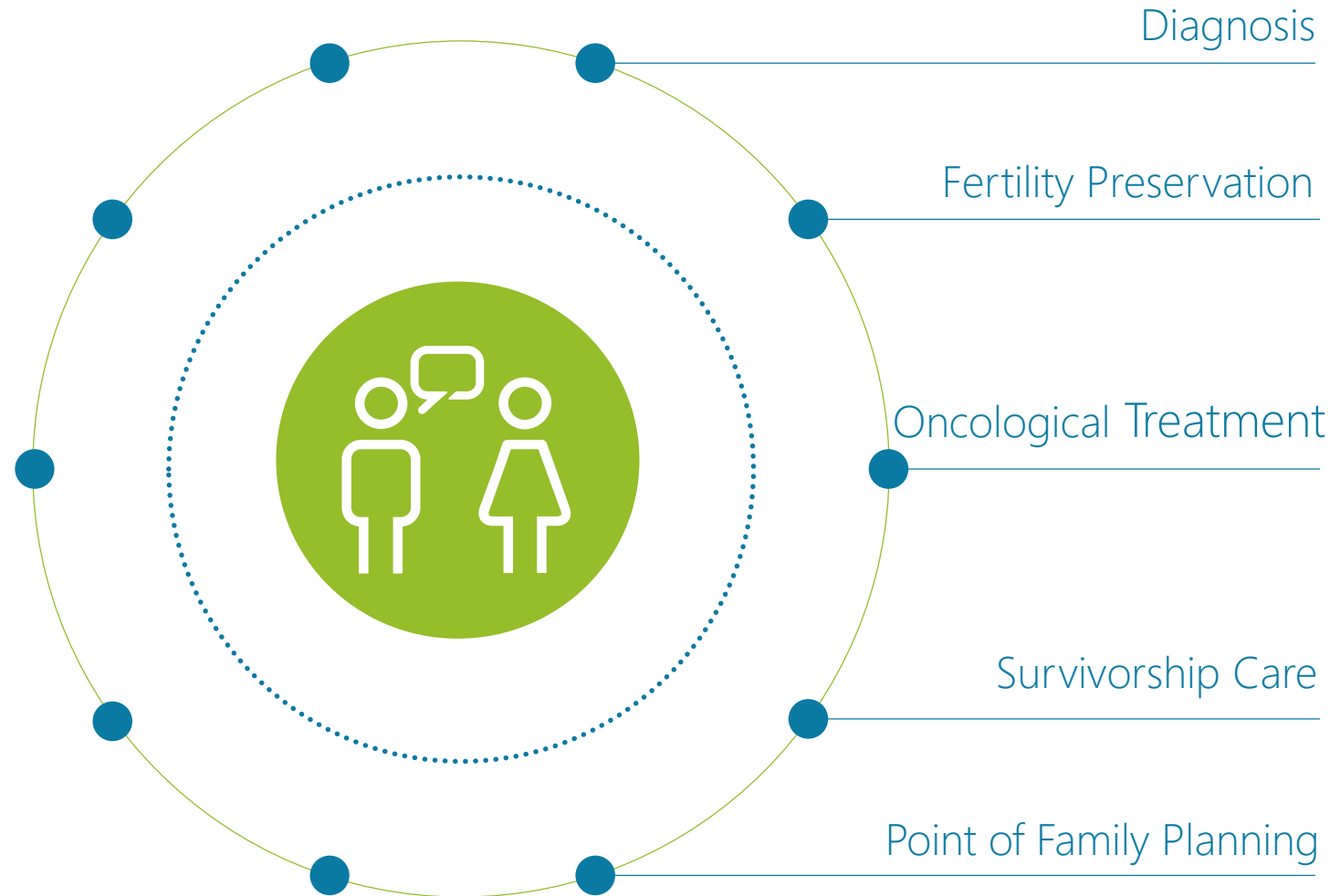
Model of Care Proposed by International Competency Framework



Oncofertility Psychological Proposed Model of Care

Each Consult

- Provision of Information
- Assess Fertility Concerns
- Assess Risk Factors
- Refer to Fertility Counsellor
- Access to psychological care



Thank you

Dr Shanna Logan

Twitter: @ShannaLogan

E: shanna.logan@unsw.edu.au

Ph: +61447 304 373

Funding

Kids Cancer Alliance & Kids Cancer Centre

Churchill Foundation

Royal Hospital for Women Foundation

