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# Defeating Fear: Strategic Moves

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Cancer patients commonly fear the possible side effects of treatment. At first glance, the long list of physical and emotional side effects—nausea, fatigue, hair loss, pain, constipation, diarrhea, mouth sores, sexual dysfunction, stress, depression—may be intimidating.

But it's important to keep in mind that the many different types and degrees of drug therapy, radiation therapy, and surgery produce different types and degrees of side effects, which are not inevitable, may be temporary, and vary among individual patients. Furthermore, there are numerous medications and techniques for controlling side effects and the pre-therapy anxiety they can cause.

In a survey reported this year by the National Coalition for Cancer Survivorship and Sanofi-Aventis, 76 percent of 326 cancer patients said they were most fearful of possible side effects of chemotherapy, but of the 91 percent who experienced side effects, 87 percent said the effects were more manageable because of supportive care products.

There are many options for reducing or halting nausea and vomiting, for example—medications that are often prescribed before and after chemotherapy. Behavioral techniques—relaxation, distraction, positive imagery—also may help.

Most treatments for fatigue target symptoms rather than the cause, because the cancer-related causes are still unclear. Treatments include transfusions of red blood cells or blood cell growth factors and vitamins.

Pain medications range from familiar over-the-counter remedies, such as acetaminophen, ibuprofen, and aspirin, to stronger prescription compounds, such as opioids and bisphosphonates. A complicating factor is that anxiety, which can intensify feelings of pain, may stem in part from other underlying psychological problems, including panic disorder, phobias (like a fear of needles), and post-traumatic stress.

Patients who experience severe acute anxiety should ask their doctor about a prescription anti-anxiety medication. For those whose fear is emotionally debilitating, a variety of antidepressants are available as well as counseling and other types of support.

Identifying anxieties, and understanding and overcoming them, is important because they could impede efforts to harness the disease. The American Society of Clinical Oncology and other organizations offer these guidelines for coping with treatment fears:

- > Determine the cause of anxiety, and express it to caregivers. Identifying a problem is the first step toward solving it.
- > Good communication with the health care team—physicians, nurses, social workers, therapists, and others—will help maintain emotional well-being.
- > A pre-treatment plan for managing potential side effects may prove useful.
- > No question about treatment is “silly.” Unanswered questions can exacerbate fear.
- > Patients gain a sense of control, and thereby reduce their fear of treatment, if they are proactively involved in their care.
- > Express fear of treatment-related pain to the medical team, as well as cancer pain itself, because pain control is a priority for health professionals.
- > Feeling frustrated and sad is OK. Psychological counseling may help if emotions interfere with daily living.
- > A positive outlook and a recognition that the goal of treatment is to improve health will put fears of therapy in perspective.
- > Caffeine and nicotine withdrawal can make anxiety worse.
- > Speak with others who have undergone the same treatment. Participate in a support group or join a religious or cancer organization.
- > Thoughts about the possible long-term consequences of treatment, such as dependence on others, lifestyle changes, financial matters, and employment, can cause emotional distress beyond the fear related to therapy. The [National Cancer Institute](#) and [American Cancer Society](#) provide detailed information and resources to deal with these and other topics.
- > Focus on the present, not on what might happen during therapy. Other relaxation techniques include meditation, yoga, focused breathing, biofeedback, hypnosis, and music therapy.