

A Scoping Review of End of Life Psychosocial Interventions for People with Cancer

About the Review

Holistic cancer care includes end-of-life care. The psychosocial needs in the terminal stages of cancer may be significant, with each person and their caregiver facing various emotional, spiritual and social challenges. Clinicians may help to relieve some distress through psychosocial interventions. Psychosocial interventions are directed at psychological, emotional, social, and spiritual well-being and help to maintain meaning and hope in the last months of life.

Review Team

The review team consisted of medical students Nicolle Chew and Ee Lynn Ting, A/Prof Philip Russo (Director at the Department of Nursing Research, Cabrini Research), Dr Lucille Kerr (Research Fellow at the Department of Nursing Research), and David Brewster (Clinical Dean and Director of Academic Programs at the Monash University Cabrini Clinical School).

Objectives

To explore end-of-life psychosocial interventions for people with cancer and their caregivers with the aim to document their types and characteristics, and gaps in the current evidence.

Research Questions

1. What are the types and natures of interventions available?
2. What are the subsequent gaps in the literature?

Methods

A systematic search using MEDLINE (Ovid) and CINAHL for the period January 1 2011-January 31 2021 resulted in 2453 papers initially. Abstracts were screened, leaving 163 papers for full-text review. After two independent reviews, 15 articles were found to fulfil the inclusion criteria. Inclusion criteria for studies were: adult patients and their caregivers; people with terminal cancer at the end of their lives, including stage 4 cancer, with a prognosis of less than two years; psychosocial interventions that were well-described and defined; outcomes involved psychosocial aspects; studies published since 2011; and conducted in the English language.

Results

Out of 15 papers, six were conducted in the United States of America, three in Australia, and one each from Canada, South Korea, Spain, Taiwan, the United Kingdom and Brazil. Most of the interventions were psychotherapeutic. Of particular dominance were legacy/meaning related interventions (eight articles). There were also mindfulness, family therapy, educational, and cognitive behavioural therapy interventions. The majority of interventions were brief, and many included caregivers. Comparison of interventions was difficult given the inconsistencies of terminology and methodology in the studies.

Use of the Findings

Researchers in the field may draw on these findings to design future studies, particularly the findings relating to the need for increased standardisation of methods, terminology and outcomes assessment in order that intervention efficacy may be better compared. Further, research into under-studied areas is warranted, such as with lower socioeconomic populations and diverse cultures, and exploring intimacy, social aspects, religiosity/spirituality and the effects of the COVID-19 pandemic.

Dissemination

The findings have been reported at Cabrini Research Week and have been published in the peer-reviewed journal *Cancer Nursing*.