

Background

- Melanoma patients report high distress and stigmatization which can affect health-seeking behaviors and healthcare use
- Sun exposure is just one risk factor for skin cancer, yet many patients experience blame and guilt for their disease because sun exposure is perceived to be a controllable factor
- Furthermore, melanoma treatment often requires surgery that can result in scarring, which can have impact on people's body image

Aims

- The objective of this study was to examine associations between stigma and risk for depression and anxiety among people diagnosed with melanoma

Methods

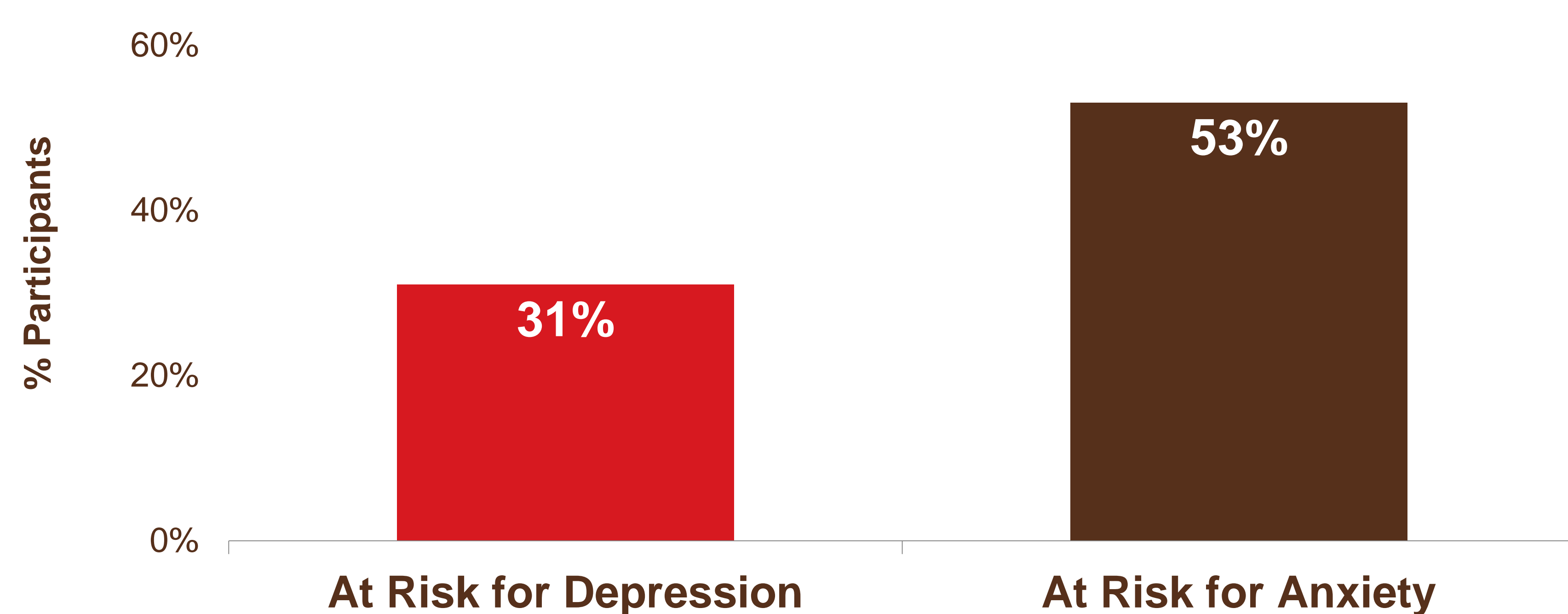
- 42 melanoma survivors enrolled in the Cancer Support Community's online Cancer Experience Registry[®] and provided socio-demographic and clinical history
- Participants rated the extent to which they experienced stigma related to body image and visibility of cancer (0=Not at all to 4=Very Much; 5 items; Cronbach's $\alpha=0.91$), stigma related to the perceived cause of their cancer (0=Strongly Disagree to 4=Strongly Agree; 5 items; $\alpha=0.71$; items modified from Cataldo Lung Cancer Stigma Scale), and cancer-related distress (CancerSupportSource[®], a 25-item tool that includes depression and anxiety risk screening subscales)
- We examined bivariate associations between stigma, clinical history, and socio-demographic variables, and evaluated associations between stigma and risk for clinically significant levels of depression and anxiety using multivariate logistic regression models

Participants

	M/n	SD/%
Age (years)	59	11 Range: 32 – 83
Non-Hispanic White	38	93%
Female	26	62%
Time Since Diagnosis (years)	5	9 Range: <1 – 52
Cutaneous Melanoma	31	76%
Stage at Diagnosis		
Stage 0	1	2%
Stage I	8	19%
Stage II	5	12%
Stage III	16	38%
Stage IV (Metastatic)	9	21%
Ever Metastatic	26	62%
Ever Experienced Recurrence	16	38%
Treatment History		
Surgery (Ever)	41	97%
Chemotherapy (Ever)	17	40%
Chemotherapy (Current)	11	26%
Immunotherapy (Ever)	26	65%
Immunotherapy (Current)	13	36%

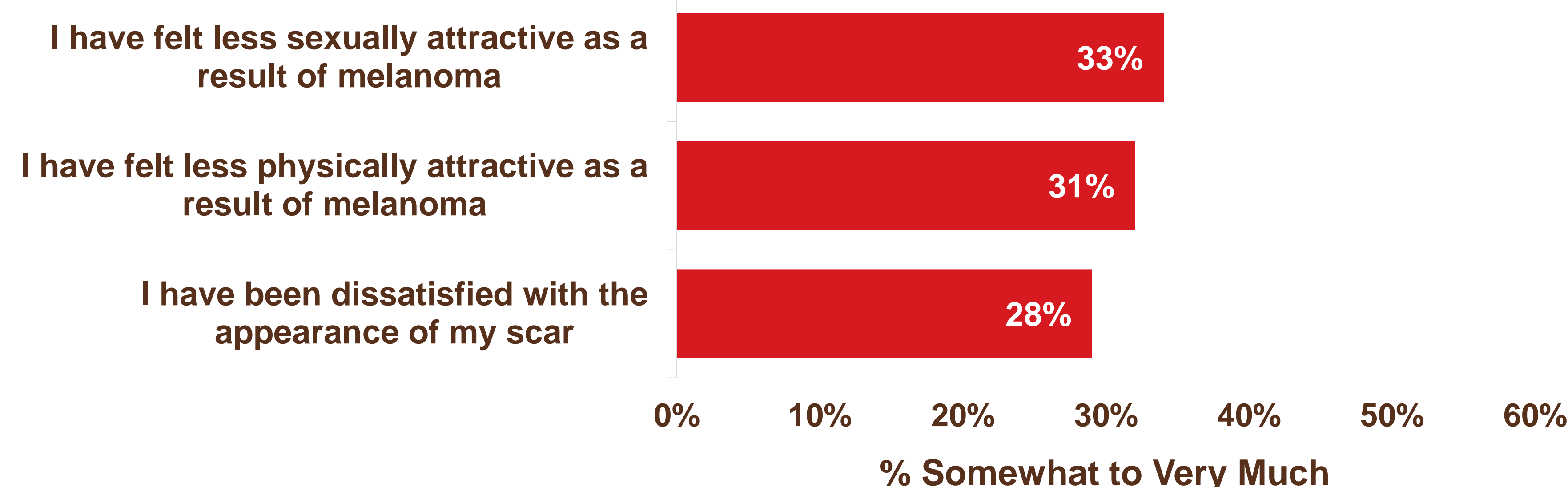
Results

Risk for Depression and Anxiety Among Melanoma Survivors



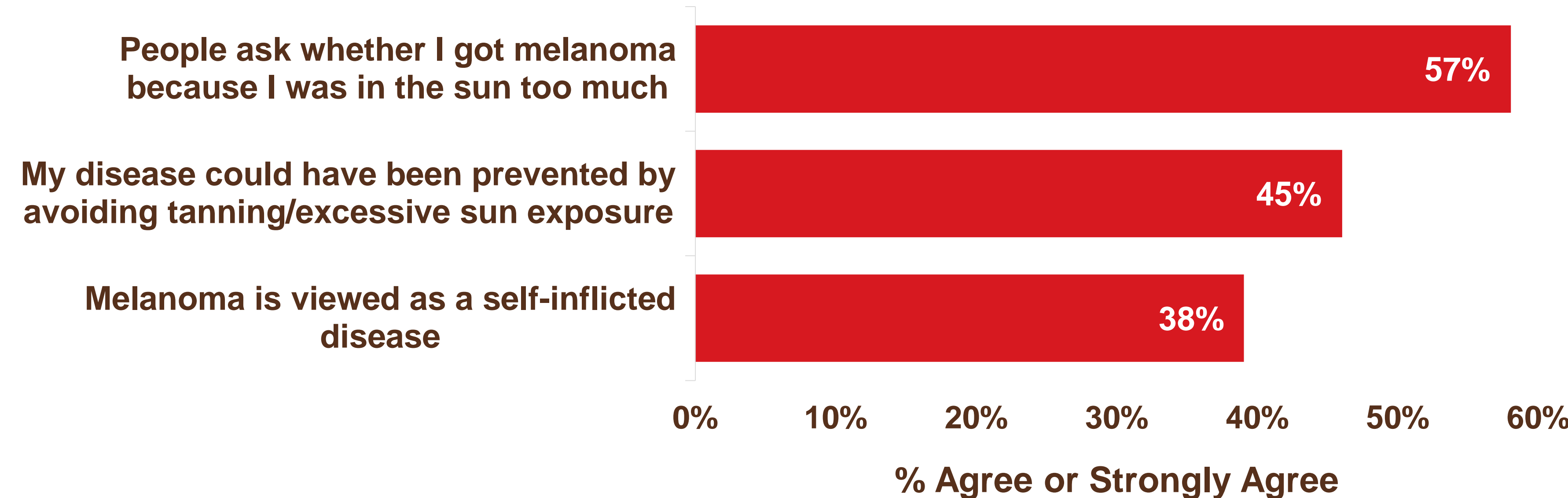
- 31% of participants were at risk for clinically significant levels of depression
- 53% of participants were at risk for clinically significant levels of anxiety

Stigma: Body Image and Visibility of Cancer



- The most highly rated items involving stigma around body image and visibility of cancer included: decreased feelings of sexual attractiveness (33%), decreased feelings of physical attractiveness (31%), and dissatisfaction with scarring (28%)

Stigma: Perceived Cause of Cancer



- The most highly rated items involving stigma around perceived cause of cancer included: being viewed as developing melanoma due to sun exposure (57%), believing that cancer could have been prevented by avoiding tanning or excessive sun exposure (45%), and viewing melanoma as self-inflicted (38%)

Multivariate Logistic Regression Analysis Predicting Odds of Depression Risk

Controls	Independent Variables
Age	Stigma: Body image and visibility of cancer*
Female gender*	Stigma: Perceived cause of cancer*
Experienced recurrence	
Received chemotherapy (ever)	

* denotes $p < .05$ Model: $R^2 = .39; p < .01$

- Being at risk for clinically significant levels of depression was associated with experiencing greater stigma around body image and identity ($OR=4.2$), greater stigma around cause of cancer, ($OR=5.5$), and female gender ($OR=.05$)

Multivariate Logistic Regression Analysis Predicting Odds of Anxiety Risk

Controls	Independent Variables
Age	Stigma: Body image and visibility of cancer**
Female gender	Stigma: Perceived cause of cancer
Experienced recurrence	
Received chemotherapy (ever)	

** denotes $p < .01$ Model: $R^2 = .27; p < .05$

- Being at risk for clinically significant levels of anxiety was associated with experiencing greater stigma around body image and identity ($OR=6.8$)

Conclusions

- Melanoma survivors experience stigma related to melanoma's perceived controllability and visibility, which can negatively impact risk for clinically significant levels of anxiety and depression
- Providers are encouraged to discuss patients' initial and continuing concerns about disease origin and the cosmetic implications of disease and treatment
- Future research should examine whether enhancing emotional support and education around cancer risk management can improve quality of life and reduce the experiences of stigma among people living with melanoma

Acknowledgments

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References

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