

BACKGROUND

In blood cancers like lymphoma, patients often feel their cancer is invisible to others, and may have less contact with the healthcare team during periods of prolonged remission. Further, lymphoma patients experience levels of distress¹, anxiety², and depression³ that can impact participation in treatment or hinder treatment decision-making and health-related quality of life.

AIMS

To describe how people living with lymphoma characterize their cancer-related distress and concerns, including symptoms of anxiety and depression, and to explore associations between key distress domains and anxiety/depression risk and if associations vary by current remission status.

METHODS

200 people living with lymphoma (patients and survivors) enrolled in Cancer Support Community's online Cancer Experience Registry from 2015-2021 and completed CancerSupportSource™, a 25-item validated distress screening tool (CSS-25) in which participants rate their level of concern (0 to 4) across five domains plus one item examining concerns about tobacco and substance use:

- (1) Emotional well-being (8 items; including 2-item anxiety and depression risk scales)
- (2) Symptom burden and impact (8 items)
- (3) Body image and healthy lifestyle (4 items)
- (4) Healthcare team communication (2 items)
- (5) Relationships and intimacy (2 items)

The average item rating for each domain was calculated. Depression and anxiety risk scores were calculated separately as per CSS scoring instructions; participants were considered at risk for depression or anxiety if subscale scores were ≥ 3 .

Using logistic regression, we estimated which domains influence anxiety and depression risk, controlling for significant demographic/clinical variables.

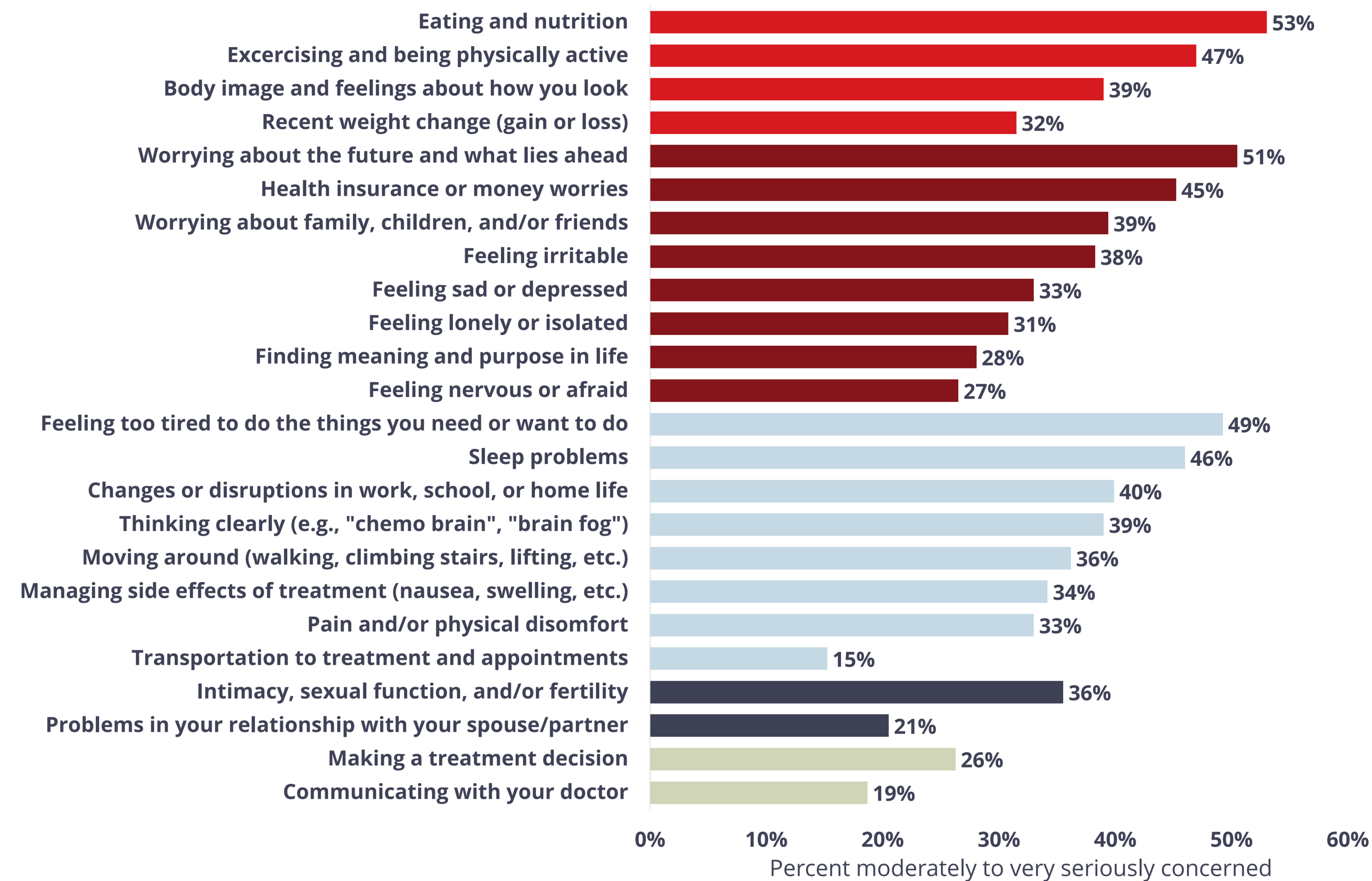
PARTICIPANTS

N = 200 individuals with lymphoma	Mean/ n	SD/ %
Age (years) n=180, range (21-83)	M=56.4	SD=14.7
Race and ethnicity		
Non-Hispanic White	160	80%
Non-Hispanic Black	8	4%
Non-Hispanic other/Multiracial	15	8%
Hispanic	14	7%
Household income		
<\$40,000	49	25%
\$40,000 or above	103	52%
Employment status		
Employed full-time or part-time	90	45%
Retired	57	29%
Unemployed due to disability or other reason	45	23%
Years since diagnosis		
<2 years	75	41%
2 to <5 years	51	28%
≥ 5 years	56	31%
Primary diagnosis		
Non-Hodgkin lymphoma	94	47%
Hodgkin lymphoma	41	21%
Did not specify/Other lymphoma	65	33%
Currently receiving treatment	78	39%
No current evidence of disease	105	53%

Note: Percentages may not total 100% due to missing data

RESULTS

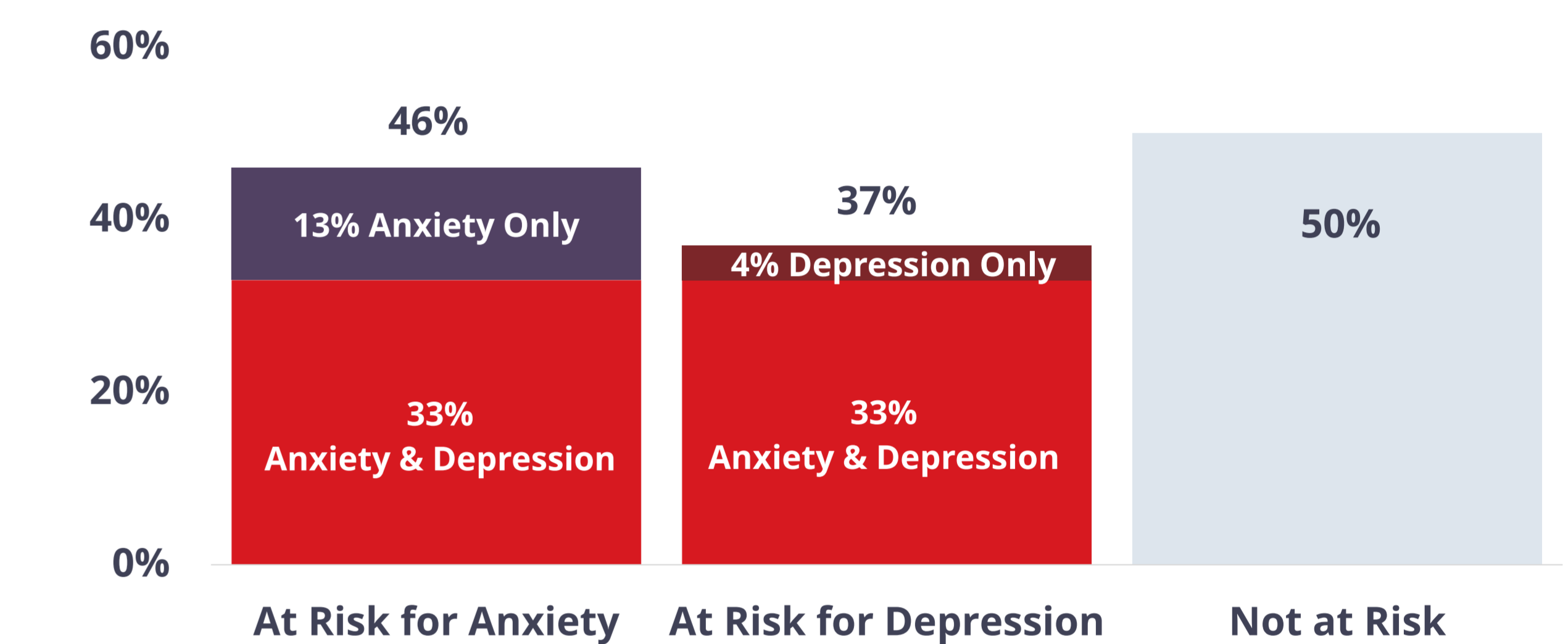
Key Areas of Concern Among People with Lymphoma



- Body image and healthy lifestyle
- Emotional well-being
- Symptom burden and impact
- Relationships and intimacy
- Healthcare team communication

Many individuals with lymphoma reported concerns related to healthy lifestyle, emotional well-being, and symptom burden, highlighting critical areas of unmet need.

Risk for Clinically Significant Anxiety and Depression



46% of respondents were at risk for clinically significant anxiety; **37%** were at risk for clinically significant depression.

Greater Concerns Associated with Higher Anxiety and Depression Risk

CSS-25 Subscale	At Risk for Anxiety		At Risk for Depression	
	Odds ratio	95% CI	Odds ratio	95% CI
Symptom burden and impact	4.25*	1.92-9.44	7.56*	2.90-19.76
Healthcare team communication	3.24*	1.54-6.81	1.59	0.81-3.10
Relationships and intimacy	1.86*	1.07-3.22	1.79	0.97-3.32
Body image and healthy lifestyle	1.31	0.73-2.34	2.37*	1.19-4.70

Note: CI=confidence interval; adjusted for age, income, employment status, cancer remission status, * $p < .05$ currently receiving treatment

CONCLUSIONS AND IMPLICATIONS

- In addition to symptom burden and impact, key patient concerns, including health care team communication, relationships and intimacy, and body image and healthy lifestyle are important considerations in understanding risk for anxiety and depression among lymphoma patients and survivors.
- Routine multidimensional distress screening and follow-up, including risk assessment for both anxiety and depression, can help to identify specific cancer-related concerns and triage patients to tailored care.
- Future research should examine barriers to accessing care for emotional and mental health concerns among lymphoma patients and survivors.

ACKNOWLEDGMENTS

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REFERENCES

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