

Risk for Anxiety and Depression Among Individuals with Ovarian Cancer: The Interplay Between Age and Distress

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Background

- With limited screening options for ovarian cancer, most women are diagnosed with advanced disease, which can impact quality of life
- Younger age may also be associated with distress, given fertility and relationship concerns

Aims

- The objective of this study was to explore predictors of psychosocial distress among a community-based sample of ovarian cancer survivors

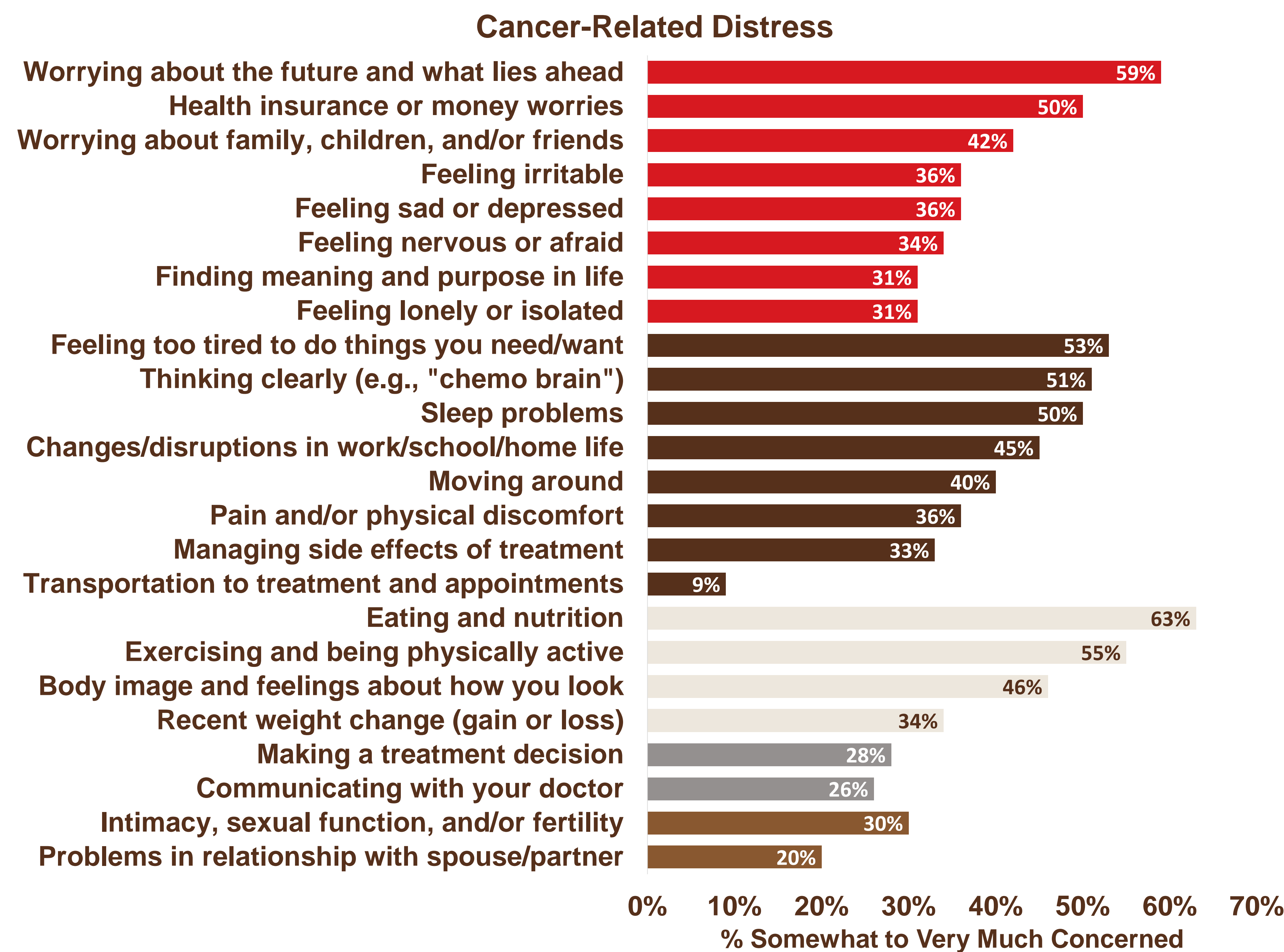
Methods

- 128 ovarian cancer survivors enrolled in the Cancer Support Community's online Cancer Experience Registry[®]
- Participants provided socio-demographics and reported cancer-related distress via CancerSupportSource[®], a validated 25-item tool measuring level of concern (0-4) over 5 domains: *emotional well-being (including 2-item depression and 2-item anxiety risk screening subscales), symptom burden and impact, body image and healthy lifestyle, health care team (HCT) communication, and relationships and intimacy*
- We examined risk for clinically significant anxiety and depression, and used logistic regression to explore associations between domains of concern and anxiety/depression risk, and if associations vary by age

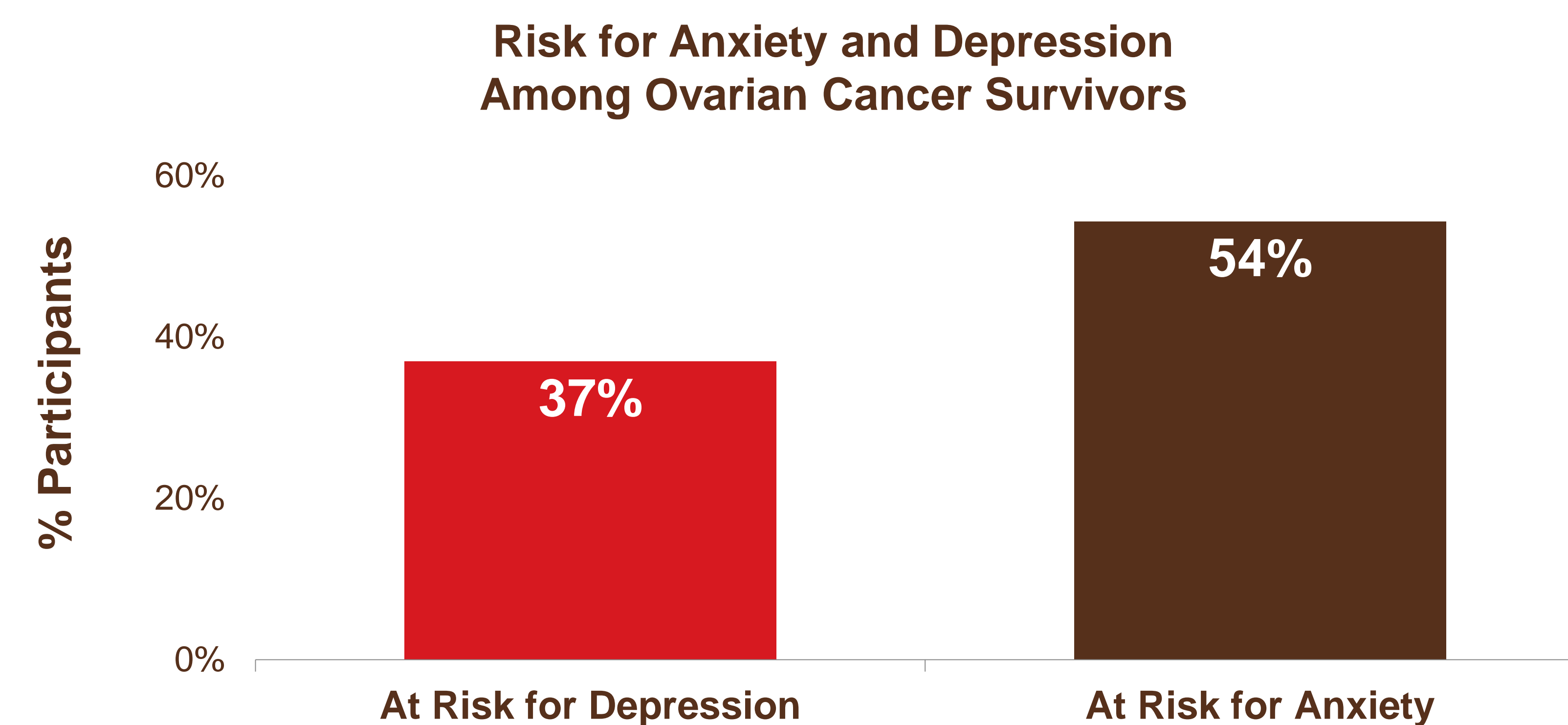
Participants

	M/n	SD/%
Age (years)	58	10
	Range: 30 – 79	
Non-Hispanic White	108	86%
Time Since Diagnosis (years)	5	7
	Range: <1 – 38	
Ever Diagnosed with Metastatic Cancer	42	33%
Treatment History		
Ever Had Surgery	120	98%
Ever Received Radiation Therapy	19	22%
Currently Receiving Radiation Therapy	3	4%
Ever Received Hormone Therapy	9	11%
Currently Receiving Hormone Therapy	3	4%
Ever Received Chemotherapy	116	91%
Currently Receiving Chemotherapy	33	45%
Stage at Diagnosis		
Stage I	28	19%
Stage II	21	14%
Stage III	76	51%
Stage IV (Metastatic)	22	15%

Results



- Top concerns included eating and nutrition (63%), worrying about the future (59%), exercising and being physically active (55%), feeling too tired (53%), and thinking clearly (51%)



- 54% of participants were at risk for clinically significant anxiety
- 37% were at risk for clinically significant depression

Multivariate Logistic Regression Analysis Predicting Odds of Depression Risk

Controls	Independent Variables	Moderators
Age	HCT communication*	
Ever received hormone therapy	Relationships and intimacy	
# of comorbidities	Symptom burden and impact	
	Body image and healthy lifestyle	

* denotes $p < .05$

Model: $R^2 = .51$; $p < .05$

- Odds of depression risk were predicted by concerns about HCT communication ($OR = 1.59$), after controlling for significant demographic/clinical variables

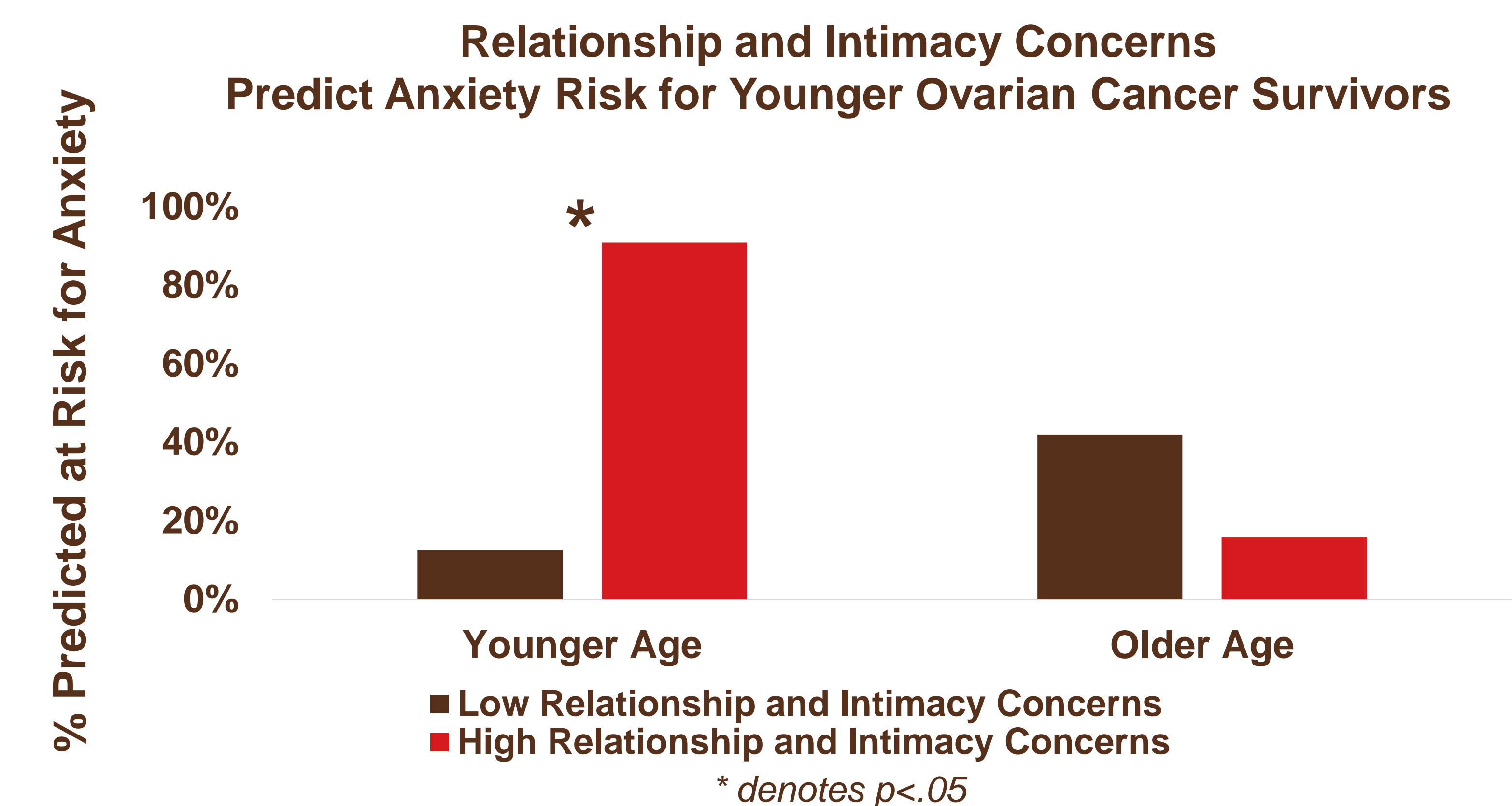
Multivariate Logistic Regression Analysis Predicting Odds of Anxiety Risk

Controls	Independent Variables	Moderators
Age	HCT communication*	
Ever received hormone therapy	Relationships and intimacy*	Relationships and intimacy by Age*
# of comorbidities	Symptom burden and impact	
	Body image and healthy lifestyle	

* denotes $p < .05$

Model: $R^2 = .52$; $p < .05$

- Odds of anxiety risk were predicted by concerns about HCT communication ($OR = 1.71$) and the interaction between concerns about relationships and intimacy and age, after controlling for significant demographic/clinical variables



- For younger survivors of ovarian cancer, odds of anxiety risk were greater among those with high relationship and intimacy concerns

Implications and Conclusions

- Concerns about health care team communication predict risk for clinically significant anxiety and depression in ovarian cancer survivors
- Additionally, concerns about relationships and intimacy predict anxiety risk for younger survivors of ovarian cancer
- Findings highlight the need for constructive patient-provider communications, focusing on relationships, sexual health, and fertility concerns

Acknowledgments

This work is sponsored by AstraZeneca, EMD Serono and Pfizer, Genentech Inc., and Novartis

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