

Background & Objectives

- FCR: *“The fear or worry that the cancer will return or progress in the same organ or in another part of the body”* (Vickberg, 2003)
- The most frequent unmet need cited by cancer survivors (Baker et al., 2005) throughout the disease trajectory (Lebel et al., 2007)
- Moderate to high levels of FCR have been reported by 33 to 56% of cancer patients (Vickberg, 2003)
- FCR is associated with increased functioning impairment, psychological distress, stress-response symptoms, and lower quality of life (Vickberg, 2003)
- Few manualized interventions exist to address FCR among cancer survivors

Methods

- Design: pre-post + 3-month follow-up
- Completed 6 groups consisting of 5-8 women with either breast or ovarian cancer; n=37
- Participants were recruited from the Breast Cancer Survivorship Program in Toronto and the Ottawa Hospital
- Treatment consisted of 6 weekly, 90 minute sessions
- Each session addressed different topics relative to FCR, including psychoeducation, coping strategies, identifying triggers, cognitive restructuring, confronting fears, setting goals, emotional expression, and homework exercises

Results

- We found a moderate effect of the intervention in reducing FCR, cancer-specific distress, and uncertainty and improving positive coping and quality of life
- Most of the improvements were sustained at the 3-month follow-up

	Mean (SD)				<i>p</i> value	Effect size
	T1	T2	T3	N	Time	
FCR	61.59 (4.03)	56.94 (4.35)	59.63(4.87)	17	.000	0.39
IES	39.10(12.41)	31.42(12.68)	29.53(12.49)	17	.004	0.29
MUISC	91.10(8.10)	86.85(9.57)	84.78(8.37)	15	.045	0.20
COPE-Acceptance	6.20(1.61)	7.20(1.01)	7.07(1.16)	15	.008	0.30
COPE-Positive	4.44(1.86)	5.69(1.20)	5.19(2.04)	16	.017	0.24
Impact of Cancer Positive QOL	3.95(0.60)	4.00(0.61)	4.01(0.67)	16	.65	0.03
Impact of Cancer Negative QOL	3.67(0.61)	3.31(0.56)	3.24(0.55)	15	.002	0.36