

2007 Congress Report

The 9th World Congress of Psycho-Oncology was held on the 16th -19th of September 2007. The theme of the conference this year was integrating the psychosocial to achieve quality cancer care. The programme included a wide range of topics including social aspects of living with breast cancer, psychosocial interventions, survivorship, employment issues, caregiver and family issues, palliative care and quality of life.

Cherie Booth opened the conference with a lively presentation and Mike Richards was extremely interesting and informative as always.

We felt the conference did a good job of highlighting the diverse needs of cancer patients. The difficult decisions faced by those with BRAC1/BRAC2 mutation carriers were presented. There was a good session on fertility which expressed the fact that people now go on to live with cancer and that this is an important issue for pre menopausal women, as having children is often in the mind of those diagnosed young. There was also an interesting session on the quality of life in women of different race and income and another on the how the impact of cancer pain differs with age.

Palliative care and advanced cancer was a theme at the conference. There were discussions on the difficulties that those with metastatic breast cancer face. We thought this was particularly important as it was shown that many women are now living more than five years with metastatic breast cancer. Key findings from the studies depicted that this group of patients can feel very alone and unsupported and it is very difficult to cope with the relentlessness of the illness. Another longitudinal study of patients with metastatic disease reinforced this finding as it was found that patients suffered significantly with the disease burden long before end of life. In a study examining the physical and psychological symptom burden with time of death among outpatients it was discovered that the symptoms associated with time to death were appetite, fatigue and drowsiness, interestingly neither anxiety or depression were significantly correlated with time to death. In terms of determining who was referred to specialised palliative care it was found that those referred tended to be younger, living alone and had a higher physical symptom severity. Those who were referred earlier had higher depression and hopelessness scores.

Practical issues such as returning to employment were also raised. In a talk on returning to work after breast cancer it was discussed that there can be undesired changes in work situations and important wage losses for women with breast cancer. There is however an increase in the percentage of people who are working at diagnosis. In a study done by the Macmillan Research Unit key findings included that if people are away from work for more than a year they were significantly less likely to return. Those undergoing chemotherapy, radiotherapy and hormone therapy were less likely to return to work. However of those who were only off for six months ninety percent returned to work.

Another theme during the conference was survivorship. One study reported findings that physical activity helped improve outcome both during and after treatment and helped to reduce fatigue. A reoccurring topic was that of quality of life (QOL). Talks were conducted on quality of life regarding the measurement of QOL and factors influencing QOL. It has found that measuring QOL meant that there were more discussions between patient and doctor about physical and emotional functioning. Generally it was found that the use of a QOL measure had a positive impact on patient wellbeing and symptom control.

We were happy to see the patient voice as a topic and enjoyed all the presentations in this symposium. Lynn Faulds Wood spoke with humour and depicted clearly the difference between her experiences as a patient in two different hospitals during her own treatment for bowel cancer. She made very profound points regarding how attitudes of staff can make or mar the patient perception of care and the sense of value of the patient by the staff. However given the subject it could have been interesting to have a wider discussion with further contributions from the floor.

Overall we enjoyed the conference and look forward to IPOS next year!

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