

Quality of Life in Adult Cancer Patients with Dependent Children: An Integrative Review

Gabriela Mota-George, MSN, APRN, FNP-BC, AOCNP

Department of Breast Medical Oncology, The University of Texas MD Anderson Cancer Center

Background & Significance

- 24.7% of cancer patients have dependent children
- Incidence of cancer patients with dependent children may rise
- Young cancer patients face unique challenges
- No recent systematic review on quality of life (QoL)
- With an understanding of QoL, healthcare professionals can best provide patient-centered care

Methods

- Pubmed and Scopus searched from 12/12/2006 to 12/12/2021
- 280 search results
- 394 articles through citation searching
- 9 articles included: 6 cross-sectional and 3 longitudinal
- Inclusion criteria:
 - English
 - Parental cancer patients with children ≤ 18
 - Objective instrument to measure patients' QoL
 - Report patients' QoL results

Findings

Population Studied

- 1846 patients (Average age 40-47)
- 1 – 4+ children aged 0 – 18
- Diagnosis to 6 years after
- Stage I – Stage IV
- Most patients:
 - Women
 - Breast Cancer
 - In Partnerships
 - Employed
 - Educated
 - Middle to High Socioeconomic Status

QoL Instruments

- Short Form Health Survey
- European Organization for Research and Treatment of Cancer QoL Questionnaire
- Dutch RAND-36 Health Survey
- The Functional Assessment of Cancer Therapy—General
- Dutch Impact of Event Scale

QoL Results

- 1st year of diagnosis:
 - Low global QoL
 - Lowest scores psychosocially; highest physically
- 1-2 years post diagnosis:
 - Improvement in QoL
 - Deficits in cognitive and emotional functioning
- > 2 years post diagnosis:
 - Low mental and physical QoL

QoL Comparisons

- Compared to the norm:
 - Low QoL at diagnosis, during initial treatment, and up to six years after
- Compared to other cancer patients:
 - Mixed results
- Compared to patients with mental illness:
 - Improved mental QoL

Discussion

Limitations

- Most studies cross-sectional
- Lack of heterogeneity
- High mortality, palliative intent, and mental illness excluded

Implications

- Low QoL in parental cancer patients
- Average age 40-47: Beyond Adolescent and Young Adult but not yet geriatric
- Use valid/reliable QoL tools
- Assess survivors
- Future research: longitudinal designs, expand population studied, risk factors and effective interventions for decreased QoL

Acknowledgements

With special appreciation to Dr. Ashley Martinez, DNP, APRN, FNP-BC, AOCNP, CPHQ, NEA-BC, NPD-BC, and Dr. Joyce Dains, DrPH, JD, APRN, FNP-BC, FNAP, FAANP, FAAN, for assistance with manuscript preparation, as well as Laurissa Gann, MSLS, AHIP, for her contribution to this review

References

1. Bultmann, J. C., Beierlein, V., Romer, G., Möller, B., Koch, U., & Bergelt, C. (2014). Parental cancer: Health-related quality of life and current psychosocial support needs of cancer survivors and their children. *International Journal of Cancer*, 135(11), 2668–2677. <https://doi.org/10.1002/ijc.28905>
2. Ernst, J., Götze, H., Brähler, E., Körner, A., & Hinz, A. (2012). Quality of life of parents diagnosed with cancer: Change over time and influencing factors. *European Journal of Cancer Care*, 21(4), 535–541. <https://doi.org/10.1111/j.1365-2354.2012.01330.x>
3. Gazendam-Donofrio, S. M., Hoekstra, H. J., van der Graaf, W. T., Pras, E., Visser, A., Huizinga, G. A., & Hoekstra-Weebers, J. E. (2008). Quality of life of parents with children living at home: When one parent has cancer. *Supportive Care in Cancer: Official Journal of the Multinational Association of Supportive Care in Cancer*, 16(2), 133–141. <https://doi.org/10.1007/s00520-007-0299-7>
4. Gazendam-Donofrio, S., Hoekstra, H., van der Graaf, W., van de Wiel, H., Visser, A., Huizinga, G., & Hoekstra-Weebers, J. (2009). Parent-child communication patterns during the first year after a parent's cancer diagnosis: The effect on parents' functioning. *Cancer*, 115(18), 4227–4237. <https://doi.org/10.1002/cncr.24502>
5. Götze, H., Ernst, J., Brähler, E., Romer, G., & von Klitzing, K. (2015). Predictors of quality of life of cancer patients, their children, and partners. *Psycho-Oncology*, 24(7), 787–795. <https://doi.org/10.1002/pon.3725>
6. Inhestern, L., Johannsen, L. M., & Bergelt, C. (2021b). Families affected by parental cancer: Quality of life, impact on children and psychosocial care needs. *Frontiers in Psychiatry*, 12, Article 765327. <https://doi.org/10.3389/fpsyt.2021.765327>
7. Krattenmacher, T., Kühne, F., Halverscheid, S., Wiegand-Grefe, S., Bergelt, C., Romer, G., & Möller, B. (2014). A comparison of the emotional and behavioral problems of children of patients with cancer or a mental disorder and their association with parental quality of life. *Journal of Psychosomatic Research*, 76(3), 213–220. <https://doi.org/10.1016/j.jpsychores.2013.11.020>
8. Park, E. M., Deal, A. M., Check, D. K., Hanson, L. C., Reeder-Hayes, K. E., Mayer, D. K., Yopp, J. M., Song, M. K., Muriel, A. C., & Rosenstein, D. L. (2016). Parenting concerns, quality of life, and psychological distress in patients with advanced cancer. *Psycho-Oncology*, 25(8), 942–948. <https://doi.org/10.1002/pon.3935>
9. Park, E. M., Deal, A. M., Yopp, J. M., Edwards, T., Resnick, S. J., Song, M. K., Nakamura, Z. M., & Rosenstein, D. L. (2018). Understanding health-related quality of life in adult women with metastatic cancer who have dependent children. *Cancer*, 124(12), 2629–2636. <https://doi.org/10.1002/cncr.31330>