

Psychological reaction to brain tumour

Dr Orazio Giuffrida
Consultant Clinical
Neuropsychologist



Psychological Reaction To Brain Tumour Diagnosis

- A Key word to understand is “Adjustment”
 - Adjustment refers to the psychological process that occurs when a person adapt to the changes that have been precipitated by the illness
 - Adjustment can be positive or negative (successful or unsuccessful)
- Several theories have studied this reaction
 - Coping Theory
 - Life Trajectory
 - Beliefs about the Self-control and Self-Worth
 - Attachments

Coping

- Coping refers to the behavioural strategies that people employ to mitigate the negative emotions generated by threat
 - Coping styles can be quite personal and may reflect a behavioural style or a personality trait.
- Watson et al. (1998). Mental adjustment to Cancer scale (MAC)
 - Five behavioural styles of coping: denial/avoidance, fighting spirit, fatalism, helplessness/hopelessness and anxious preoccupation

Life Trajectory

- Much of person's sense of themselves, or their identity, is derived from a personal "trajectory" which offers goals and rewards in the future. Goals are often age dependent and can be short or long term.
 - **Positive Transition**
 - A life-threatening diagnosis expose to mortality. Implicit life goals may suddenly become clear while other goals may be dismissed as trivial. This revision can be perceived as "positive"
 - **Negative Transition**
 - Knowledge of a shortened life expectancy leads to preoccupation. This can lead to feel that life is pointless, apathy, sense of hopelessness and depression

Beliefs about the Self-control and Self-Worth

- The diagnosis of cancer can lead to fundamental changes in the relationship between the individual and their environment, changes that can radically alter their assumptions about personal control and self-worth.
 - **Positive Transition**
 - Over the course of the illness many people decide to collaborate more closely with their doctors and become fully informed about the illness. This may lead to positive life adaptations (change of diet, sleep hygiene, regular exercising)
 - **Negative Transition**
 - In line with Bowlby's theory (attachment) in situation of novelty, ambiguity and fear, some people are likely to regress in a more infantile ways of behaving. They are likely to welcome any figure of authority (doctors). However, the cost of greater dependency is the risk of perceiving a further loss of personal control.

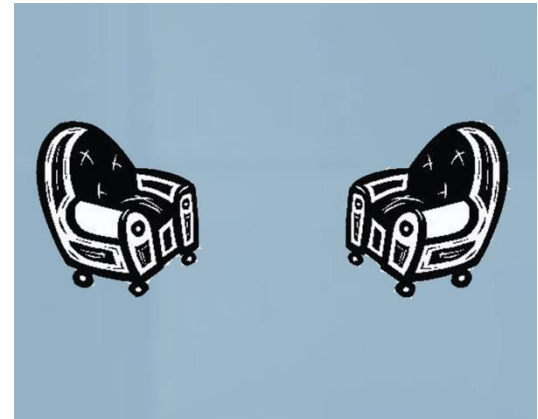
Attachment

- Cancer force patients and their loved ones to consider the possibility of permanent separations. The examination of this reality can be very distressing. Under these circumstances the nature of attachments and relationships are often re-examined
 - **Positive Transition**
 - This re-examination can reinforce the existing relationships or help to revalue existing and new relationships
 - **Negative Transition**
 - The primary threat that cancer poses to relationships is separation. This might lead the couple or family to utilise unhelpful defences such as **withdrawal** and **criticism**

Psychological treatment

Dr Andy Bendell

Principal Clinical Psychologist



Coping with symptoms

- Fatigue
- Pain management and physical disability
- Hormone imbalance
- Sleep quality
- Epilepsy/seizures
- Sensory loss
- Effects of treatment
 - Neurosurgery, chemotherapy, radiotherapy, medication

Mood & adjustment

- Adjustment work – diagnosis, recurrence
- Guided self-help
 - Coping with psychological distress
- Supportive Counselling
- Mindfulness and relaxation
- Optimising quality of life and well-being

Mood & adjustment

- Psychotherapy: Cognitive Behavioural Therapy (CBT)
 - Depression
 - Anxiety, fear
 - Post traumatic stress
 - Uncertainty
- Education, self-care and coping, activity management & scheduling, cognitive therapy



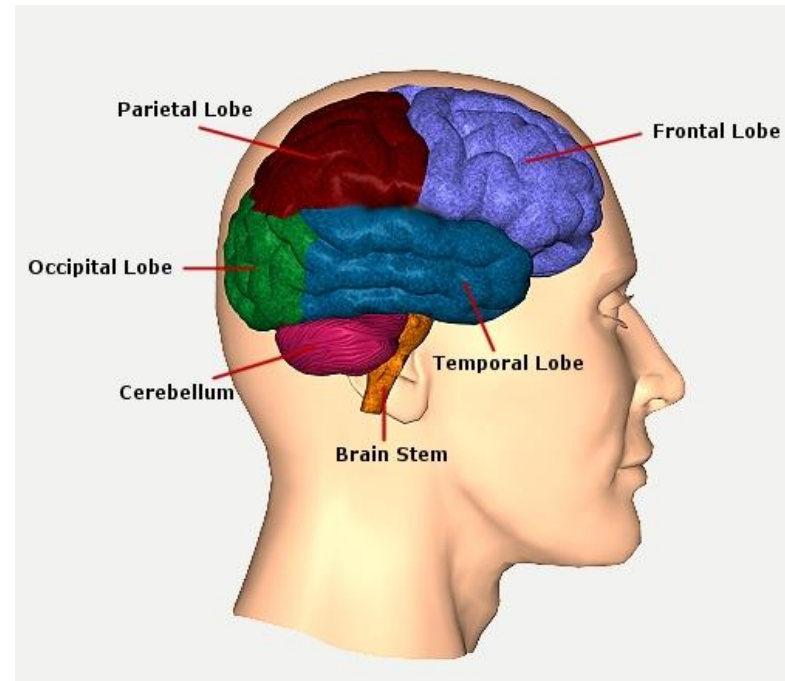
Treatment, management and rehabilitation

- Individual, family or group based
 - Psychotherapy
 - Couples counselling
 - Information groups, Support groups



Cognitive Rehabilitation

- Cognitive deficits can be caused by the tumour, by tumour-related epilepsy and its treatment, and by psychological distress
- Memory
- Attention
- ‘Executive’ functions
- Language
- Visual perception
- Slowed processing
- Insight



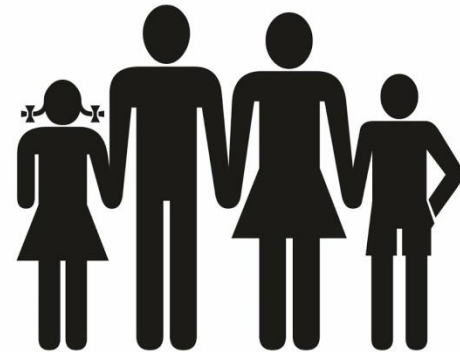
Vocational rehabilitation



- Goal setting
- Provision of health advice in support of returning to work
- Adjustments to the medical and psychological impact of disability
- Case management, referral, and service coordination
- Psychosocial interventions
- Career counseling, job analysis, job development, and placement services
- Functional and work capacity evaluations

Carers

- Working with families
- Carer stress
- Adjustment work
- Emotional support
- Carer groups
- Couples and family therapy



The Psychology Neuro Clinic The London Mental Wellbeing Clinic

Spatium

- Dr Orazio Giuffrida (Consultant Clinical Neuropsychologist)

Contact Information

- Phone: 07775 681498
- Email: psychneuro@outlook.com

<http://www.psychologyneuroclinic.co.uk/>