



**The George Pantziarka  
TP53 Trust**

**Helping families with Li Fraumeni Syndrome  
and related conditions**

# **Coping with risk: a practical approach**

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# Overview

- ◆ Australian TP53 study
- ◆ Coping with risk:
  - Coping Strategies and Quality of Life
  - Worrying
  - Relaxation and Imagery
- ◆ Conclusions

ORIGINAL ARTICLE

# **Psychosocial morbidity in *TP53* mutation carriers: is whole-body cancer screening beneficial?**

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Leslie G. Walker<sup>9</sup> · Sue Shanley<sup>4</sup> · David M. Thomas<sup>3</sup> · Gillian Mitchell<sup>4,10</sup>**

# Background

- ◆ Germline TP53 mutation carriers are at high risk of developing a range of cancers
- ◆ Effective cancer risk management is an important issue for these individuals
- ◆ One approach is WB-MRI screening (Surveillance in Multi-Organ Cancer (SMOC+) protocol)
- ◆ Aim was to assess the psychosocial impact of WB-MRI screening

# Methods

Based on SIGNIFY protocol plus qualitative measures (psychological questionnaires and in-depth interviews about experience of screening).

- unmet needs
- psychological impact of screening (e.g. anxiety, depression, cancer worry)

# Participants

17 participants in SMOC+ during their first 12 months on the trial (SIGNIFY has 44 participants and 44 matched controls)

Focus on qualitative results – 4 themes

# Burden of screening

Participants had reduced anxiety and believed screening would detect any cancer at an earlier, more treatable stage.

# Perceived Efficacy of Screening

After an initial relief given by screening, some participants felt the screening was burdensome.

Some also had started to become worried about being 'abandoned' after the trial finished.

# Burden of TP53

TP53 mutations have an ongoing effect on carriers of this mutation and their families, irrespective of screening, due to the extent of cancer in the family and associated deaths

# Mitigation of Impact

Screening, and having a 'clinical point of contact', appears to be beneficial emotionally for some participants.

# Conclusions

Preliminary results suggest that WB-MRI is acceptable, at least within the context of a clinical trial.

Importance of support (family, friends, professionals).

Consistent with results of SIGNIFY (to date no evidence of clinically significant adverse psychosocial effects).

# Coping Strategies

- ◆ Problem focused (information, practical solutions)
- ◆ Emotion focused (regulation, expression, suppression, RTGI)
- ◆ Meaning focused (why do I carry the TP53 gene and what are the implications [+ and -])
  
- ◆ Approach versus avoidance
- ◆ **Minimisation versus sensitisation**

# Coping

- ◆ Individual differences
- ◆ Some situational specificity
- ◆ People use more than one strategy
- ◆ Some strategies associated with better quality of life
- ◆ What works, works!

# Some Specific Coping Strategies

- ◆ Fighting spirit
- ◆ Minimisation
  
- ◆ Stoic acceptance/fatalism
- ◆ Hopelessness
- ◆ Anxious pre-occupation

# Worrying

- ◆ Normal response
- ◆ Constructive worry
- ◆ Destructive worry
  
- ◆ The farmer and the student
- ◆ General Lee

# Worrying

Yesterday is history

Tomorrow is a mystery

Today is a gift

That's why it's called the present!

# Worrying

Grant me the serenity to accept the things I cannot  
change,  
Courage to change the things I can,  
And wisdom to know the difference.

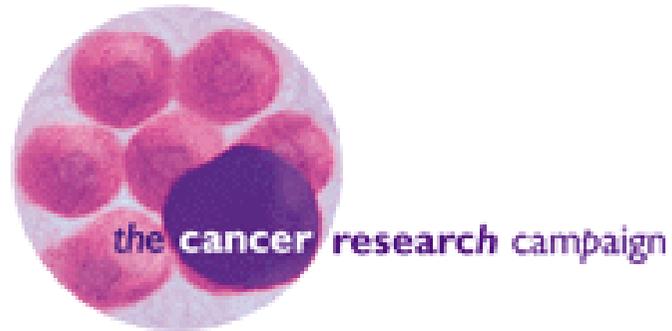
R Niebhur

# Worrying

*Carpe diem!*  
(Seize the day!)

Horace, 23BC

The psychoimmunological effects of relaxation and guided imagery in women with locally advanced breast carcinoma: a randomised controlled trial.



# Introduction

- ◆ Diagnosis and treatment stressful and high levels of morbidity reported.
- ◆ Stress can be immunosuppressive and immunosuppression may affect clinical outcome.
- ◆ Perhaps psychosocial interventions can offset stress-induced immunosuppression.

# Aims

To evaluate the effects of an intervention designed to reduce stress and enhance coping on:

- ◆ Quality of Life
- ◆ Mood
- ◆ Coping
- ◆ Host defences

# Psychological Intervention

## Randomised to:

### Control:

High level of support in the Behavioural  
Oncology Unit

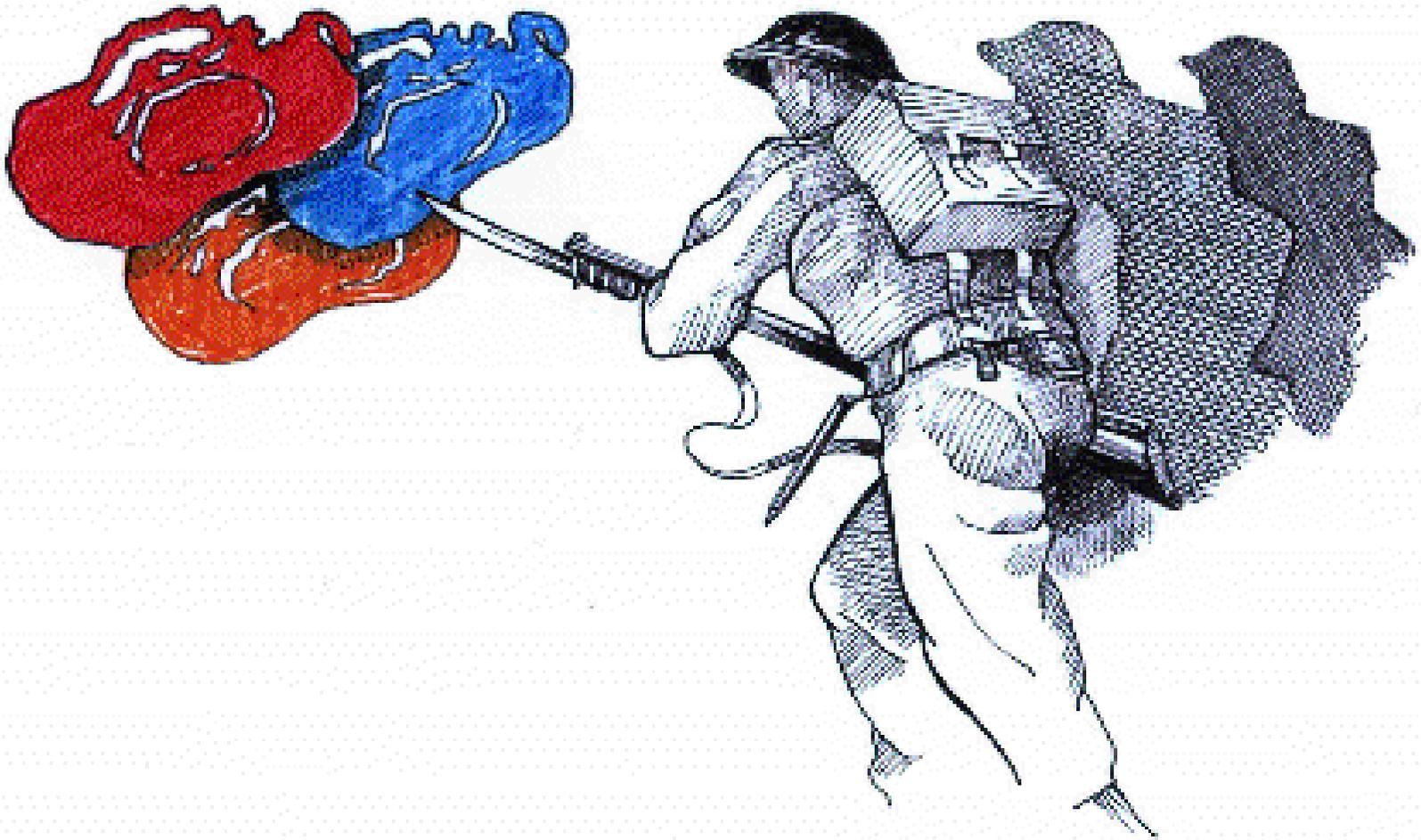
### Experimental:

Similar support plus relaxation and guided  
imagery

# Relaxation Response

- ◆ Integrated hypothalamic response.
- ◆ Opposite of the 'fight-flight' response.
- ◆ Increased parasympathetic a.n.s. tone.
- ◆ Associated with feelings of relaxation, calmness and confidence.
- ◆ Can be taught using live training or audio-cassette recordings.





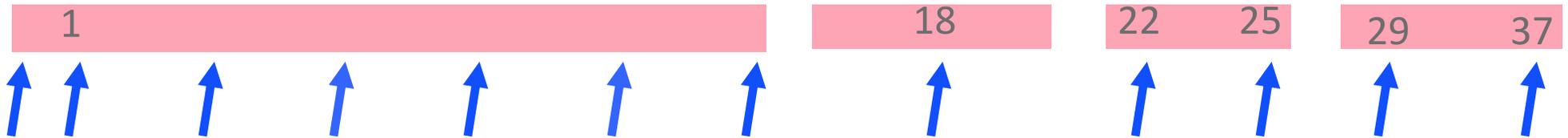
# Trial Design

CVAP chemotherapy  
6 cycles every 3 weeks

Surgery

RT

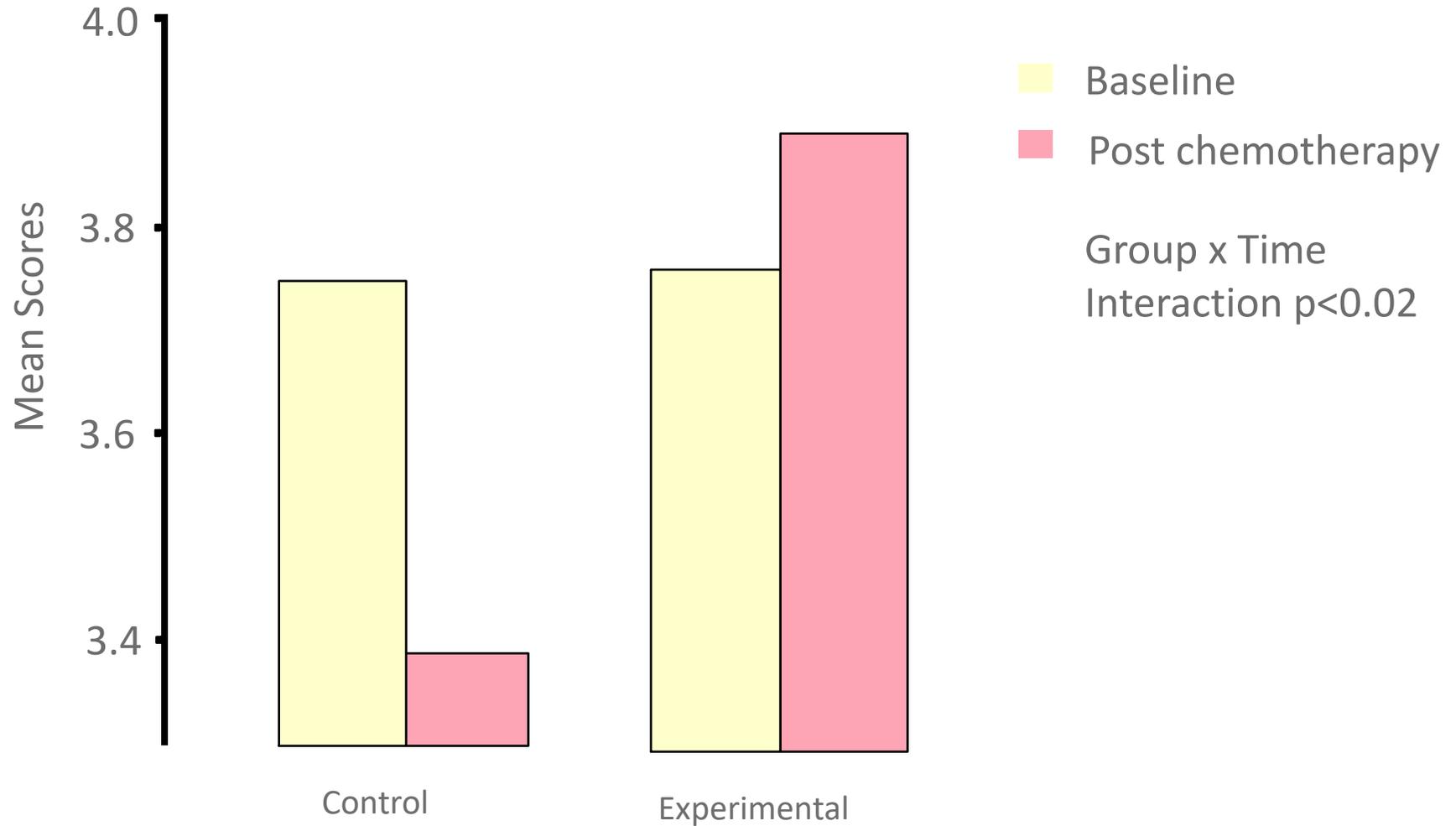
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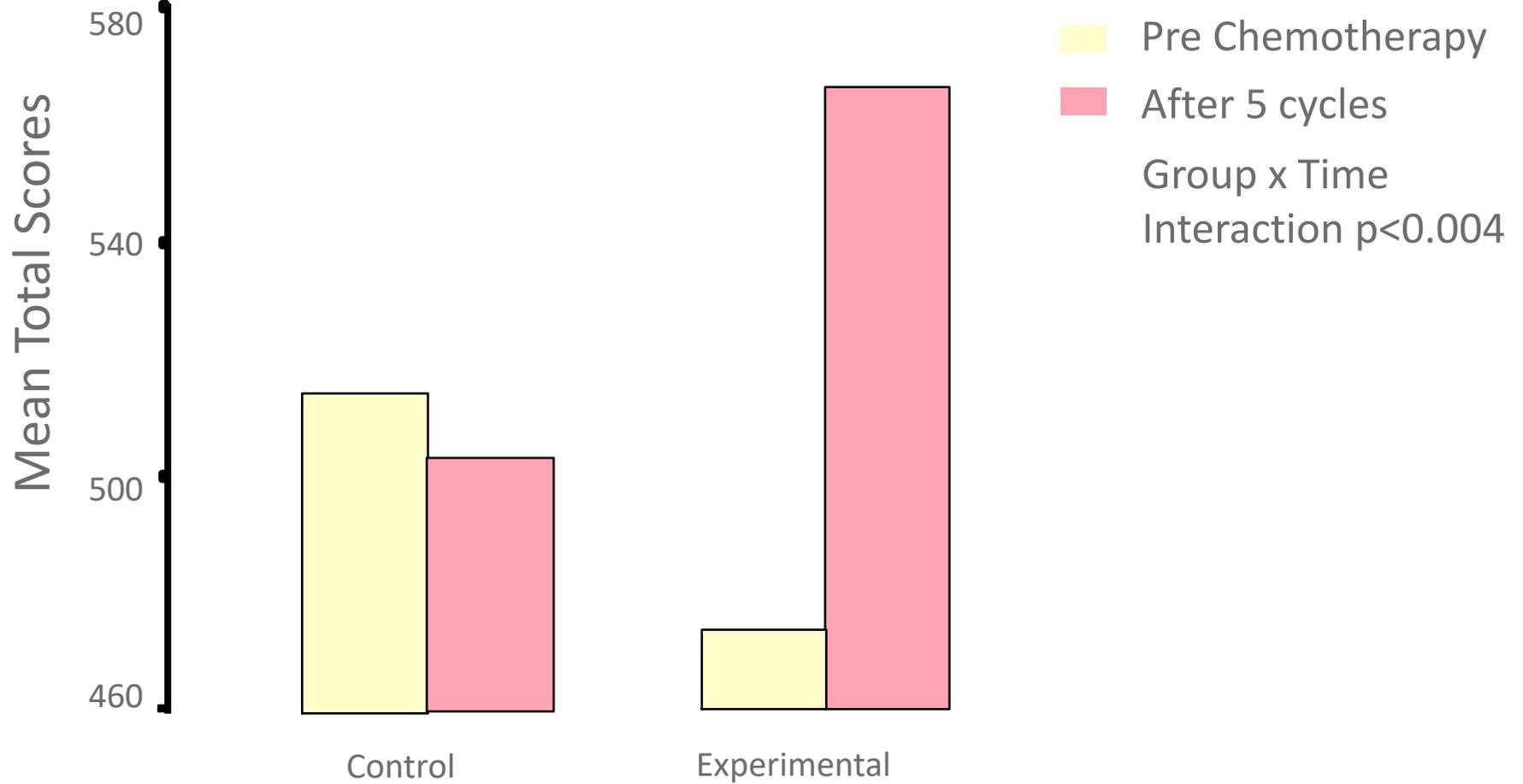
# Participants

96 women with large (>4cms) or locally advanced  
(T<sub>3</sub>, T<sub>4</sub>, N<sub>2</sub> and M<sub>0</sub>) breast carcinoma

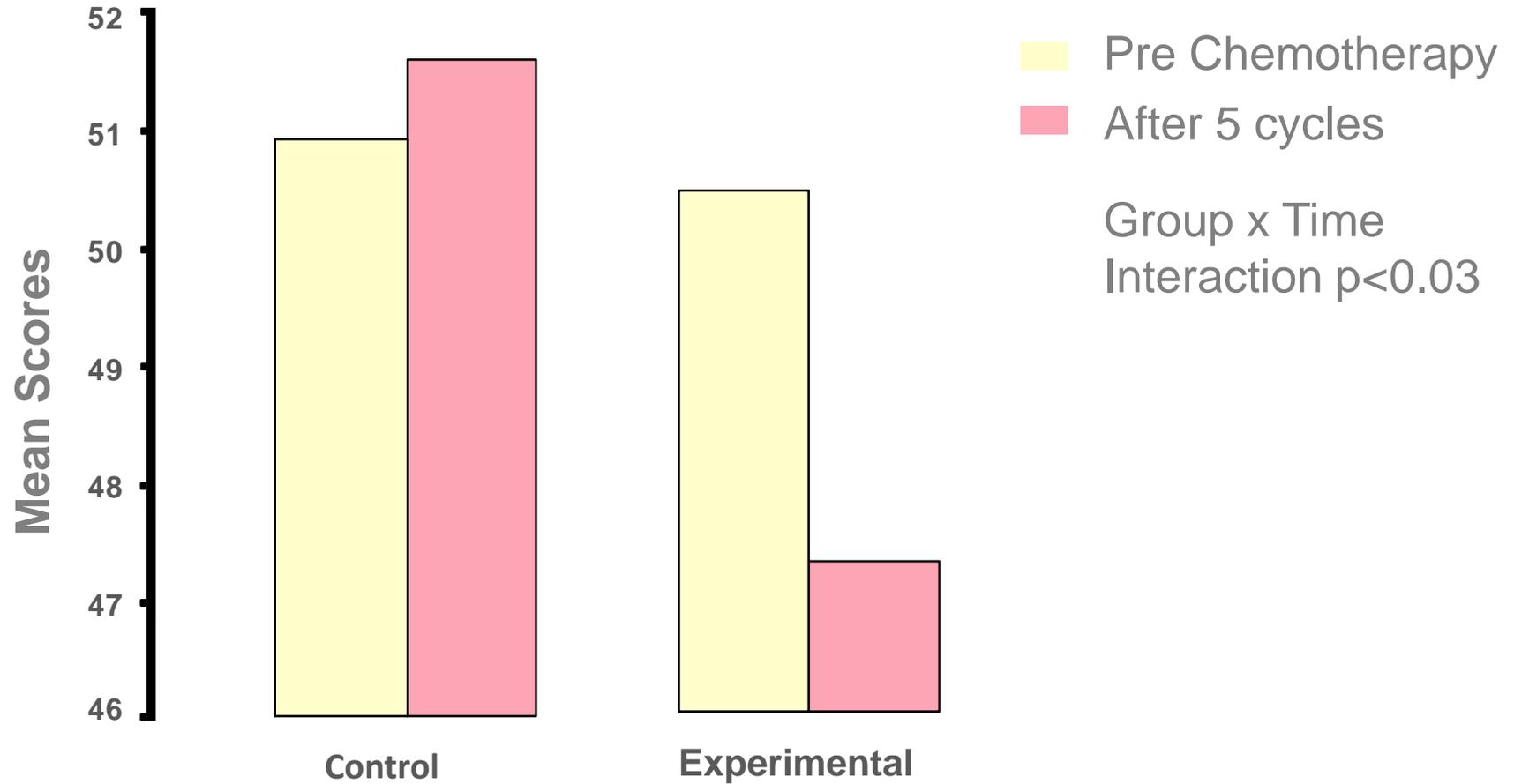
# Global Quality of Life



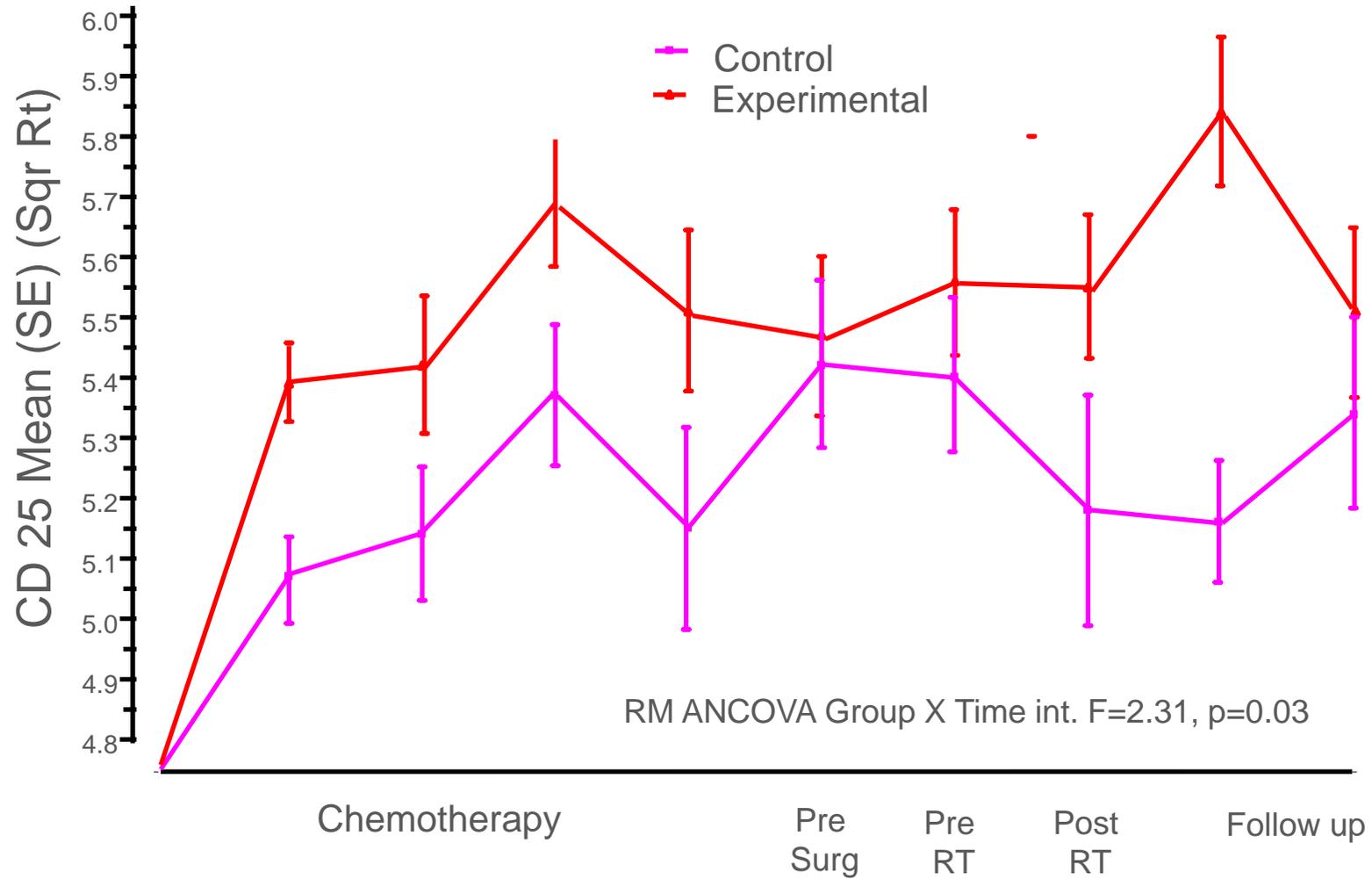
# Mood Rating Scale



# Emotional Suppression



# Activated T cells (CD25+)



# Summary

## The Intervention:

- ◆ Improved mood
- ◆ Enhanced coping
- ◆ Enhanced LAK cell activity.
- ◆ Enhanced NKCA in women who had good imagery
- ◆ Increased number of various T lymphocyte subsets (CD3+, CD25+ and CD56+).
- ◆ Reduced TNF- $\alpha$ .

# Conclusions

- ◆ Relaxation and guided imagery improve key aspects of quality of life in women with LABC.
- ◆ The clinical significance of the biological effects needs further study.

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