

Psychological Intervention Improves Quality of Life, but Survival in Patients with Early-Stage Cancer: a Systematic Review and Meta-analysis of randomized clinical trials

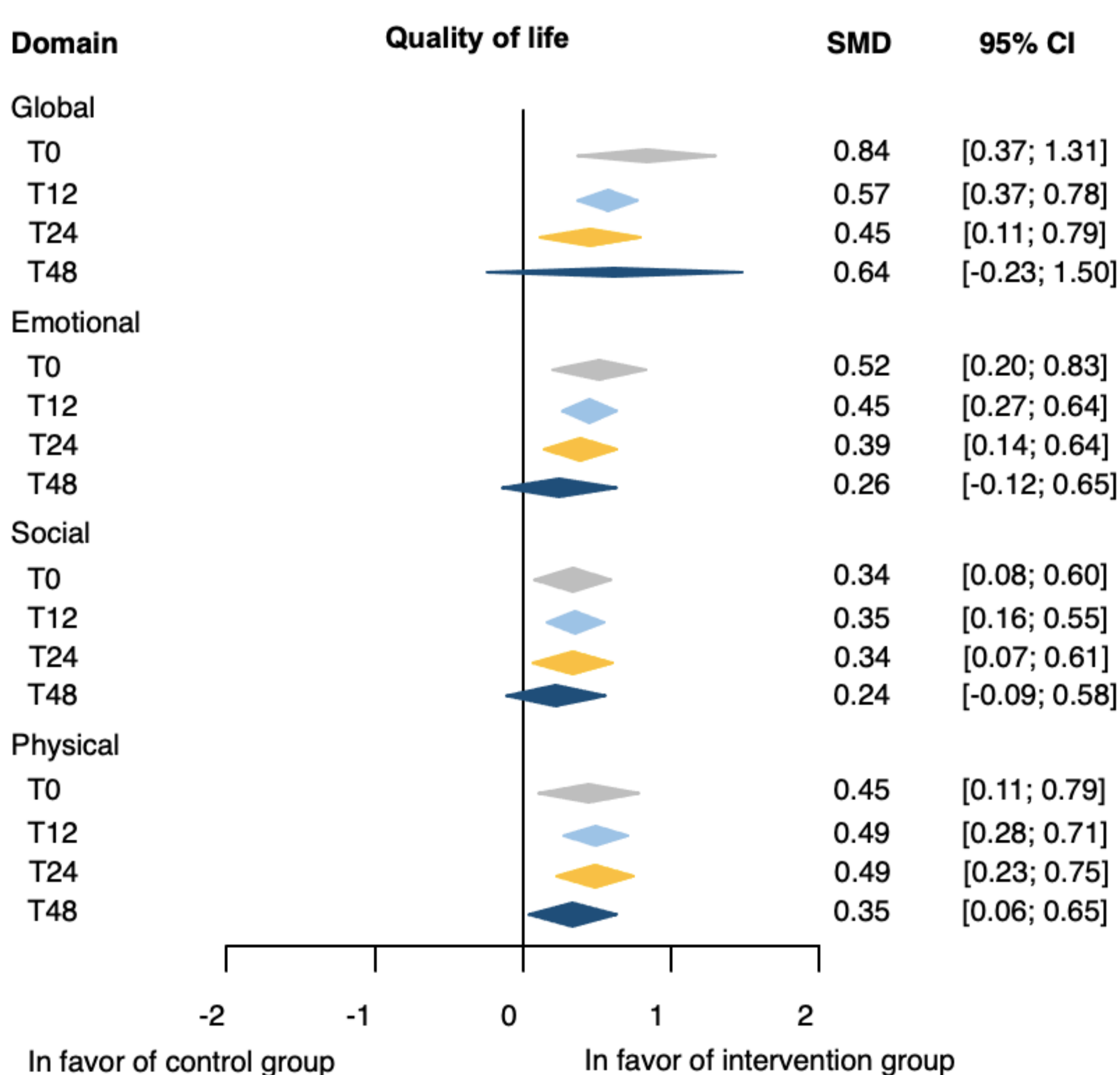
Sára Anna Bognár, Brigitta Teutsch, Stefania Bunduc, Dániel Sándor Veres, Bence Szabó, Beatrix Fogarasi,, Nóra Vörhendi, Omer Almog, Yael Hadani, Dorottya Gergő, Emese Mihály, Bálint Erőss, *Katalin Márta and *Péter Hegyi
*Contributed equally

BACKGROUND AND AIM

Psychological interventions (PI) are rapidly increasing in every disorder, however their effectiveness, particularly in malignant diseases, is still debated. Our aim was to investigate the effect of PI on survival and quality of life (QoL) in patients with cancer.

METHOD

The systematic search was performed in MEDLINE, Cochrane and Embase databases from inception until 18th October 2021 to identify randomized controlled trials comparing PI to standard care. Outcomes were overall survival (OS), recurrence-free survival (RFS) and different domains of QoL: global, emotional, social and physical. Subgroup analysis was performed based on intervention provider, -type, -environment, -duration and cancer stage. Pooled hazard ratios (HR) and standardized mean difference (SMD) with 95% confidence intervals (CI) were calculated with a random effect model.



RESULTS

129 articles were eligible for data analysis. The OS and RFS did not differ significantly between the groups (OS: HR=1.01; CI: 0.95,1.07; RFS: HR=0.99; CI: 0.84,1.16). However, our analysis showed significant improvements in the intervention group in all the analyzed domains of QoL; the global (SMD=0.84; CI: 0.37,1.31), emotional (SMD=0.52; CI: 0.20,0.83), physical (SMD=0.45; CI: 0.11,0.79) and in the social (SMD=0.34; CI: 0.08,0.60). Importantly, the effect of PI on QoL was positive immediately, 12 and 24 weeks after intervention, but not at 48 weeks. The effect was mainly observed in early-stage cancer patients.

CONCLUSION

PIs weren't found to prolong survival in cancer patients, however they significantly improve the QoL. PIs should be implemented 3-4 times per year as standard care at least for patients with early-stage cancer.