Early Days of COVID-19 Brought Increased Anxiety for Some Cancer Survivors

Cancer survivors who had developed skills for coping with uncertainty were not spared the stress of COVID-19, finds researchers.

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Among the many lessons collectively learned during the initial months of the worldwide COVID-19 pandemic was this: The experience was uncharted psychological and emotional terrain. It wasn't uncommon for people across the globe to express uncertainty about how to navigate new stresses and new emotions.

For University of Colorado Cancer Center member Joanna Arch, PhD, an associate professor of psychology and neuroscience at CU Boulder, the early days of the pandemic were a time to consider how cancer survivors who previously participated in group Acceptance and Commitment Therapy (ACT) were coping with the fear and uncertainty. Would the skills they learned in ACT inform how they dealt with anxiety stemming from the pandemic?

What she learned and documented in recently published research is that prior treatment with ACT did not provide protective benefit to cancer survivors feeling anxious during the pandemic, and that future ACT interventions may need to be targeted to pandemic-specific stressors.

"One of the lessons for me as a clinical scientist and practicing clinician is that when people experience a new, profound vulnerability in their life and they also have historical vulnerabilities, like having had cancer, they may need to touch back in," Arch explains. "It may be important to get support in remembering their strengths or coping skills."

Anxiety in the early days of the pandemic

Arch previously worked with cancer survivors and ACT treatment in an American Cancer Society-funded trial published a year ago. In that research, anxious cancer survivors who had finished treatment and showed no evidence of disease participated in seven two-hour ACT group sessions that supported participants in learning skills to manage anxiety.

“We were trying to address the finding that many of these folks were feeling really anxious even though their cancer had been successfully treated,” Arch says.

That research demonstrated that participants who completed the ACT interventions reported a greater ability to manage anxiety and fear of cancer recurrence symptoms compared with participants who experienced minimally-enhanced usual care (MEUC).

As the COVID-19 pandemic began growing, Joel Fishbein, one of Arch’s doctoral students, had the idea of reaching back out to participants in from the initial ACT research to learn how they were managing anxiety and distress relating to the pandemic.

“It was a really scary time, and still is for certain groups of cancer survivors,” Fishbein explains. “They were living with the idea that chemotherapy can compromise immune function or change immune function and make some cancer survivors more susceptible to COVID-19. And there was so much we didn’t know about the virus in the early days.”

Tailoring therapy to novel stressors

Even though almost three years had passed, Arch and Fishbein reached out to previous research participants who are cancer survivors and more than 70 agreed to participate. As they did during the initial trial, they completed measures of anxiety symptoms, fear of cancer recurrence, and emotional approach to coping during the pandemic in May, June/July, and November 2020.

Arch and Fishbein found that across the entire sample, anxiety symptoms and emotional approach to coping worsened from the final trial assessment almost three years ago to May 2020. During this period, participants who had ACT intervention worsened significantly more on emotional approach coping than MEUC participants. There were no significant condition differences in the later pandemic timepoints.

“I think there are at least three reasons why we found that ACT participants were not better off than the folks who did not receive ACT treatment,” Arch says. “One is that COVID is really novel and an unprecedented stressor, and as a novel threat may have made people with a history of cancer feel particularly vulnerable.”

Another reason is that almost three years had passed, on average, between the initial ACT intervention and the onset of the pandemic, so the skills participants learned in ACT may have dimmed in strength or prominence.

A third possible reason, Arch says, “is we were really focused on general cancer survivorship and fear of recurrence issues, the difficulties in talking about cancer, making sense of cancer, approaching the threat of what cancer had been for them. We were not focused on novel sources of anxiety.”

Adapting ACT interventions

As a researcher, presenting findings that demonstrate an intervention didn't have a sustained effect was intimidating, "but I think it's important for scientific honesty," Arch says. "I do think it took courage to publish these data because they're demonstrating that our intervention was not enough to help during COVID. That may not be something that everybody would want know, but Joel and I are very committed to scientific integrity and truth telling."

One of the outcomes that this research can support is how ACT interventions can be adapted to novel stressors beyond cancer survivorship. "What I might emphasize more now as a clinician is to use the COVID pandemic as an example that life throws us real curve balls," Arch says. "So, what are the basic coping skills that can be applied to any curve ball that life throws at us?"

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