

The Mediation Effect of Anxiety Between Post-Traumatic Stress Symptoms and Preparatory Grief in Advanced Cancer Patients

Presented by: Ray Purdy, May 17, 2012

Reference: J Pain Symptom Management. 2011 Mar;41(3):511-21

Background: Preparatory Grief is the grief terminally ill patients go through, as they anticipate death and mourn the loss of the self. Many terminally ill patients exhibit a similar symptom profile to PTSD (flashbacks, nightmares, avoidance behavior, heightened autonomic response etc). The authors of this study hypothesized that cancer patients with PTSD symptoms experience preparatory grief, and that anxiety mediates this association.

Methods: 94 patients were enrolled from an outpatient palliative care unit at an Athens hospital. Inclusion criteria: spoke Greek, over 18 yrs old, terminal cancer diagnosis and were aware of their diagnosis. Excluded were patients with psychotic illnesses or cognitive impairment. Table 1 illustrates demographic data. The Preparatory Grief in Advanced Cancer Patients (PGAC) scale, a valid and reliable assessment of preparatory grief, was administered. To measure anxiety, the HADS-anxiety scale (Hospital Anxiety and Depression, anxiety subscale) was used. The Revised Impact of Events Scale (IES-R) attempts to measure hyperarousal, avoidance, and intrusion symptoms common to PTSD, and was also administered to this patient group. The authors then statistically attempted to show that PTSD is associated with preparatory grief, PTSD is associated with anxiety, anxiety is associated with preparatory grief (when controlling for PTSD symptoms), and lastly that a direct pathway exists between PTSD symptoms and preparatory grief, through anxiety.

Results: Scores for each of the rating scales is displayed in table 2. Statistically, PTSD symptoms (hyperarousal, avoidance, and intrusion symptoms) were associated with preparatory grief, and all three of these symptom profiles were partially mediated through anxiety. Figures 1, 2, and 3 outline the results of the statistical analysis.

Strengths: Reliable and valid assessment tools were used.

Weaknesses: The cut-off scores for PTSD symptoms using the IES scale are not well validated. Only patients with cancer were studied.

Relevance: Targeted therapy towards PTSD symptoms may be useful in decreasing anxiety and alleviating suffering in our palliative population.