

Background

- Fear of cancer recurrence (FCR) is the fear, worry, or concern that cancer may return or progress.¹
- FCR is one of the most common unmet needs reported by individuals living with melanoma.²
- To address this need, the Melanoma Care Program (MCP),³ an evidence-based psychological intervention delivered through a stepped-care model, was utilised to treat FCR in patients with early-stage melanoma.
- The MCP was found to effectively reduce FCR for patients with early-stage melanoma post-intervention.⁴

Methods

- Dieng et al's (2015) MCP has been implemented as the standard service provision model within the Clinical Psychology Service (CPS) at the Melanoma Institute Australia for patients with any stage of melanoma.

Initial Session

90 minutes

Melanoma Story

Space provided for patient to share, express and explore emotions, cognitions, behaviours and coping related to related to melanoma diagnosis and treatment.

+

Needs Analysis

Patient goals and issues, difficulties and/or unmet needs identified.

Subsequent Sessions

60 minutes

Key Psychological Strategies



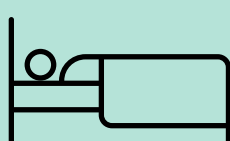
Detached Mindfulness



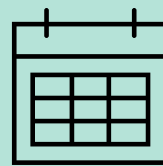
Worry Postponement



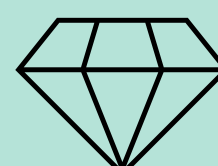
To do lists



Sleep Hygiene



Activity Scheduling



Values Clarification

Patient Supports

- Melanoma Patients Australia support groups
- Open, trusting and supportive relationships with medical team

Melanoma Education



FIND OUT MORE AT
melanoma.org.au/for-patients/patient-information

Impact on Practice

- Patients reported finding engaging with CPS helpful, wherein they felt their melanoma experience was understood and validated, and they learnt psychological strategies to better cope with their melanoma.
- Patients identified that being able to share their melanoma story enabled them to reflect upon and process their experience with melanoma.
- The flexibility of the MCP allowed clinicians to draw from and implement strategies from varied psychotherapeutic approaches to best address identified patient needs.

Discussion

- The MCP provides a sound model for clinical psychology service provision to patients with melanoma, with anecdotal evidence that patients find the service helpful.
- A CPS evaluation project has been developed to establish a quantitative evidence-base for the effectiveness of the CPS service provision on psychosocial outcomes and patient satisfaction.

References

- ¹Lebel S, Ozakinci G, Humphris G, et al. From normal response to clinical problem: definition and clinical features of fear of cancer recurrence. *Supportive Care in Cancer*. 2016;24:3265-3268.
- ²Luigjes-Huizer YL, Tauber NM, Humphris G, et al. What is the prevalence of fear of cancer recurrence in cancer survivors and patients? A systematic review and individual participant data meta-analysis. *Psycho-Oncology*. 2022;31(6):879-892.
- ³Dieng M, Kasparian NA, Morton RL, Mann GJ, Butow P, Menzies S, et al. The Melanoma care study: Protocol of a randomised controlled trial of a psycho-educational intervention for melanoma survivors at high risk of developing new primary disease. *BMC Psychol* 2015; 3(23): 1-13. <https://doi.org/10.1186/s40359-015-0074-3>
- ⁴Thompson, J. R., Gomes, L., et al. Short-Term Effectiveness of a Stepped-Care Model to Address Fear of Cancer Recurrence in Patients With Early-Stage Melanoma. *Psycho-Oncology*, 33(12): e70041. <https://doi.org/10.1002/pon.70041>

Acknowledgements

We would like to thank Robert Purves AM and The Raymond E. Purves Foundation for their generous support of the MIA Clinical Psychology Service.

