Adherence to self-management and psychological distress in women with breast cancer-related lymphoedema

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Abstract of a thesis for a Doctorate of Philosophy submitted to Macquarie University, Sydney, Australia

Nonadherence to breast cancer-related lymphoedema self-management is suboptimal. In addition, women with breast cancer-related lymphoedema experience psychological distress associated with this chronic illness. Adopting a social-cognitive theoretical framework, the aim of this thesis is to identify cognitive and affective predictors of adherence to self-management behaviours and predictors of psychological distress in women living with breast cancer-related lymphoedema. To achieve this aim, a longitudinal study was conducted that measured adherence to self-management behaviours, psychological distress, and cognitive and affective factors at baseline, 6- and 12-months. An additional cross-sectional study was conducted to identify lymphoedema therapists’ and affected women’s beliefs about barriers to adherence to self-management. The findings from the empirical studies on adherence suggest that cognitive and affective factors are not informative for understanding self-management behaviour in women with breast cancer-related lymphoedema. Furthermore, a disconnect between therapists’ and affective women’s beliefs about barriers to self-management was identified, with therapists believing more strongly than the affected women that financial cost, time, concerns about appearance, difficulty accessing treatment, insufficient knowledge, and physical limitations negatively impact adherence. In contrast, a number of cognitive and affective factors significantly predicted distress. Based on the results from the longitudinal study, an online self-compassion based writing activity was developed to minimise distress and body image disturbance in this population of lymphoedema-affected women. The online intervention received moderate to high user acceptability ratings from women affected with breast cancer-related lymphoedema suggesting the potential viability of this intervention. In sum, the findings from this thesis have important implications for researchers and health professionals. Regarding self-management, medical characteristics and knowledge were identified as important factors for identifying women at risk of nonadherence. In addition, it may be beneficial to screen women for symptoms of psychological distress and body image disturbance in order to identify who may benefit from additional psychosocial support.

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