Cancer-related fears: A significant psychological burden in cancer patients and their caregivers

The increasing proportion of patients diagnosed with cancer have resulted long-term survivors, living more than 5 years after their diagnosis without a recurrence ⁽¹⁾. The numbers of these patients are rapidly growing; nowaday smore than 3% of the adult populations in developed countries are cancer survivors ⁽²⁾. With this favorable trend, there is an increasing focus among patients, clinicians, and researchers in the Western world on cancer survivors' quality of life and well-being, and their unmet needs ^(2, 3, 4). In this issue of Reports of Radiotherapy and Oncology, we see a welcome sign of the same focus in Iran, in "Cancer-related fears in Iranian patients, a survey from South East of Iran".

Fear of progression of cancer (or fear of cancer recurrence) is totally understandable as a rational response to a very real threat. However, elevated levels of this fear can affect wellbeing, quality of life, and social functioning (5). Fear of progression is one of the common distress symptoms of patients with cancer, and one of the most important issues for cancer survivors and their caregivers; it can be a very significant psychological burden (5, 6, 7). But it is difficult to accurately estimate its frequency, as a clear clinical consensus in this regard is lacking. Based on recent systematic reviews, Herschbach and Dinkel suggest that probably 50% of cancer patients experience moderate to severe fear of progression (5). The present "survey from South East of Iran" in this issue of the journal reports descriptive indices of male and female surveyed patients concerning their social, personal, individual, and disease-related fears. Fear experienced by the caregivers of the cancer patients is another very important challenge. This aspect of the problem has unfortunately not been addressed in the present "survey from South East of Iran". Simard et al, in their systematic review of fear of cancer recurrence, found that caregivers reported higher fear in this regard than the patients did (6). According to Longacre et al, in their study of caregivers for head and neck cancer patients, caregivers experienced poorer psychological health, including higher levels of anxcious symptoms, compared to the patients (8). I hope that further surveys and studies from Iran address this matter too.

The field of cancer-related fears is an emerging research area in the cancer survivorship literature ⁽⁷⁾. I agree with the authors of "Cancer-related fears in Iranian patients" that their survey is important as a basis for comparison purposes and further researches, and hope that this significant problem of psychological well-being and quality of life in cancer patients and their caregivers in the course of treatment or follow-up is reported on and discussed more frequently in the Reports of Radiotherapy and Oncology.

Peiman Haddad/ MD

Cancer Institute, Tehran University of Medical Scieences, Tehran, Iran. Editorial Board Member, Reports of Radiotherapy and Oncology

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