Significance of Nonphysical Predictors of Distress in Cancer Survivors

Rhonda L. Johnson, PhD, Carly Larson, BA, Lora L. Black, PhD, MPH, Kimberly G. Doty, MS, and Lisa VanHoose, PhD, MPH, PT

Background: The Distress Thermometer (DT) is a well-validated tool that is frequently used in patients with cancer to screen for general distress and to generate referrals. However, a majority of the DT problem list items relate to physical concerns; this may lead to psychosocial issues being overshadowed.

Objectives: The purpose of the current study is to examine the endorsement rates for nonphysical items, as well as the relationship between these items and overall DT scores.

Methods: A multiple logistic regression analysis of the first-time distress rating scale of 1,209 patients from 2005–2009 was conducted to determine whether nonphysical items on the DT significantly contributed to a patient falling into one of two categories: at risk for distress or not at risk for distress.

Findings: This study provides evidence that emotional variables are particularly significant for patients who are at risk for distress and, consequently, should be prioritized for intervention when endorsed on the DT problem list.

The Distress Thermometer (DT) is a well-validated tool that is frequently used in patients with cancer to screen for general distress and to generate referrals. However, a majority of the DT problem list items relate to physical concerns; this may lead to psychosocial issues being overshadowed.

Objectives: The purpose of the current study is to examine the endorsement rates for nonphysical items, as well as the relationship between these items and overall DT scores.

Methods: A multiple logistic regression analysis of the first-time distress rating scale of 1,209 patients from 2005–2009 was conducted to determine whether nonphysical items on the DT significantly contributed to a patient falling into one of two categories: at risk for distress or not at risk for distress.

Findings: This study provides evidence that emotional variables are particularly significant for patients who are at risk for distress and, consequently, should be prioritized for intervention when endorsed on the DT problem list.

The Distress Thermometer (DT) is a well-validated tool that is frequently used in patients with cancer to screen for general distress and to generate referrals. However, a majority of the DT problem list items relate to physical concerns; this may lead to psychosocial issues being overshadowed.

Objectives: The purpose of the current study is to examine the endorsement rates for nonphysical items, as well as the relationship between these items and overall DT scores.

Methods: A multiple logistic regression analysis of the first-time distress rating scale of 1,209 patients from 2005–2009 was conducted to determine whether nonphysical items on the DT significantly contributed to a patient falling into one of two categories: at risk for distress or not at risk for distress.

Findings: This study provides evidence that emotional variables are particularly significant for patients who are at risk for distress and, consequently, should be prioritized for intervention when endorsed on the DT problem list.

The Distress Thermometer (DT) is a well-validated tool that is frequently used in patients with cancer to screen for general distress and to generate referrals. However, a majority of the DT problem list items relate to physical concerns; this may lead to psychosocial issues being overshadowed.

Objectives: The purpose of the current study is to examine the endorsement rates for nonphysical items, as well as the relationship between these items and overall DT scores.

Methods: A multiple logistic regression analysis of the first-time distress rating scale of 1,209 patients from 2005–2009 was conducted to determine whether nonphysical items on the DT significantly contributed to a patient falling into one of two categories: at risk for distress or not at risk for distress.

Findings: This study provides evidence that emotional variables are particularly significant for patients who are at risk for distress and, consequently, should be prioritized for intervention when endorsed on the DT problem list.