#### **DURING AND AFTER TREATMENT**

# Distress: Common Side Effect

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For distress, standards of care are based on established evidence-based practice.

#### **Definition**

■ Distress is a multifactorial and unpleasant emotional experience of a psychological (e.g., cognitive, behavioral, emotional), social, and/or spiritual nature that can interfere with the ability to effectively cope with a cancer diagnosis, physical symptoms and treatment, and long-term consequences of treatment.

■ All patients are expected to experience some level of distress at some point in the cancer trajectory.

#### **Assessment Tools and Recommended Intervals**

- NCCN Distress Thermometer and Problem List
  - ☐ Assess distress at every visit. Use NCCN's (2020) visual analog scale of o (no distress) to 10 (worst distress possible). A 39-item problem list helps to identify specific issues.
- Generalized Anxiety Disorder-7 scale
  - ☐ Scores of 5, 10, and 15 may represent mild, moderate, and severe levels of anxiety, respectively (Spitzer et al., 2006). A score of 10 or more is a reasonable cut point for identifying cases of generalized anxiety disorder.

### **Prevention**

■ Provide reputable resources for more information, from organizations such as the American Cancer Society, NCCN, or the National Cancer Institute.

## **Evidence-Based Interventions and Management**

- Recommend cognitive behavioral, supportive (individual and group), couples, or psychoeducational therapies.
- Consider antidepressants to treat anxiety and depression.
- Consider benzodiazepines to treat acute (not long-term)
- Consider antipsychotics for delirium, agitation, and psychosis.
- Encourage 30 minutes of intentional exercise daily.
- Recommend integrative therapies, such as yoga, relaxation therapy, guided imagery, music therapy, and art therapy.
- Refer patients scoring 4 or higher on the NCCN Distress Thermometer to a mental health professional for intensive assessment and intervention.

# **Agents and Interventions to Avoid**

- Alcohol use can impair cognition and lead to depression.
- Discourage nonprescribed pharmacologic agents.

## **Evidence-Based Resources for Providers**

NCCN Clinical Practice Guidelines in Oncology: Distress (www.nccn.org/professionals/physician\_gls/pdf/ (v.2.2021) distress.pdf)

# **Evidence-Based Resources for Patients and Family**

■ NCCN Guidelines for Patients: Distress During Cancer Care (www.nccn.org/patients/guidelines/content/PDF/distress -patient.pdf)

#### REFERENCES

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