



Memorial Sloan Kettering
Cancer Center

2nd Sapporo Conference for
Palliative and Supportive in Cancer

Meaning-Centered Psychotherapy for Cancer Patients

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“Hope is the creation of an uncertain future with meaning.” – William Breitbart



The Concept of Despair at the End of Life

- Desire for hastened death
- Suicidal ideation
- Loss of meaning/spiritual well-being
- Hopelessness
- Loss of Dignity
- Demoralization
- Depression/Anxiety/Panic



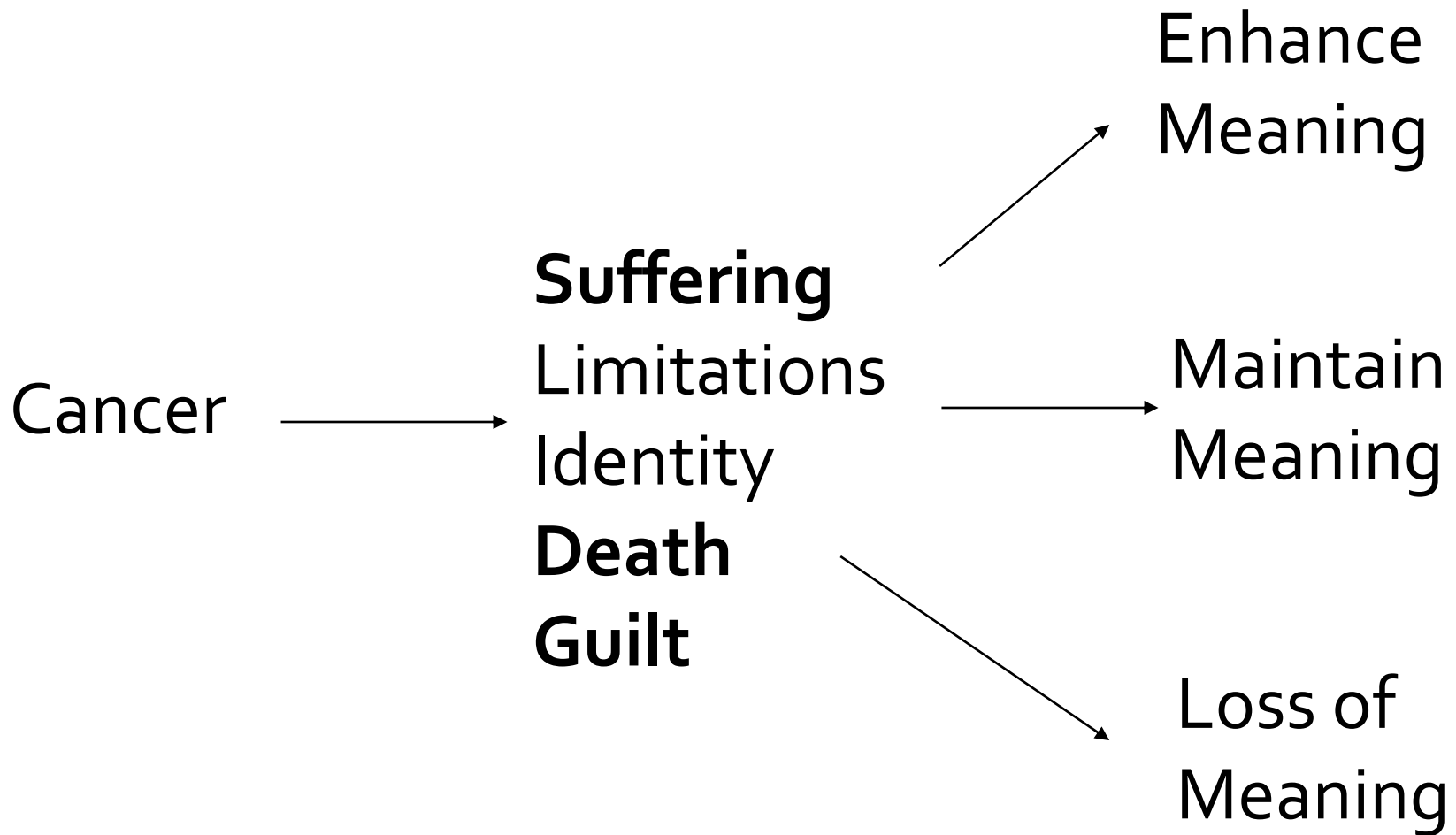
The Unique Nature of Human Existence

- Human Beings are Uniquely Aware of our Existence
(awe-dread paradox, finiteness, responsibility, guilt , culture)
- Meaning – Making is the Defining Characteristic of Human Beings as a Species
- Connection / Connectedness is Essential to Human Survival , and the Essence of the Human Experience
(to each other, past ,present, future, something greater)
- The Capacity for Transformation is Unique to Human Beings (growth, benefit finding, attitude towards suffering)





Cancer and Meaning



The Importance of Meaning and Spiritual Needs in Cancer

In a sample of 248 cancer patients the following rates of endorsement were found for questions regarding needs:

- Overcoming fears - 51%
- Finding hope - 42%
- Finding meaning in life - 40%
- Finding peace of mind - 43%
- Finding spiritual resources - 39%

Higher rate of spiritual/existential needs in ethnic minorities, unmarried patients, more recent diagnosis

The Universality of Existential Suffering

In a sample of 162 Japanese cancer inpatients, existential distress was related to:

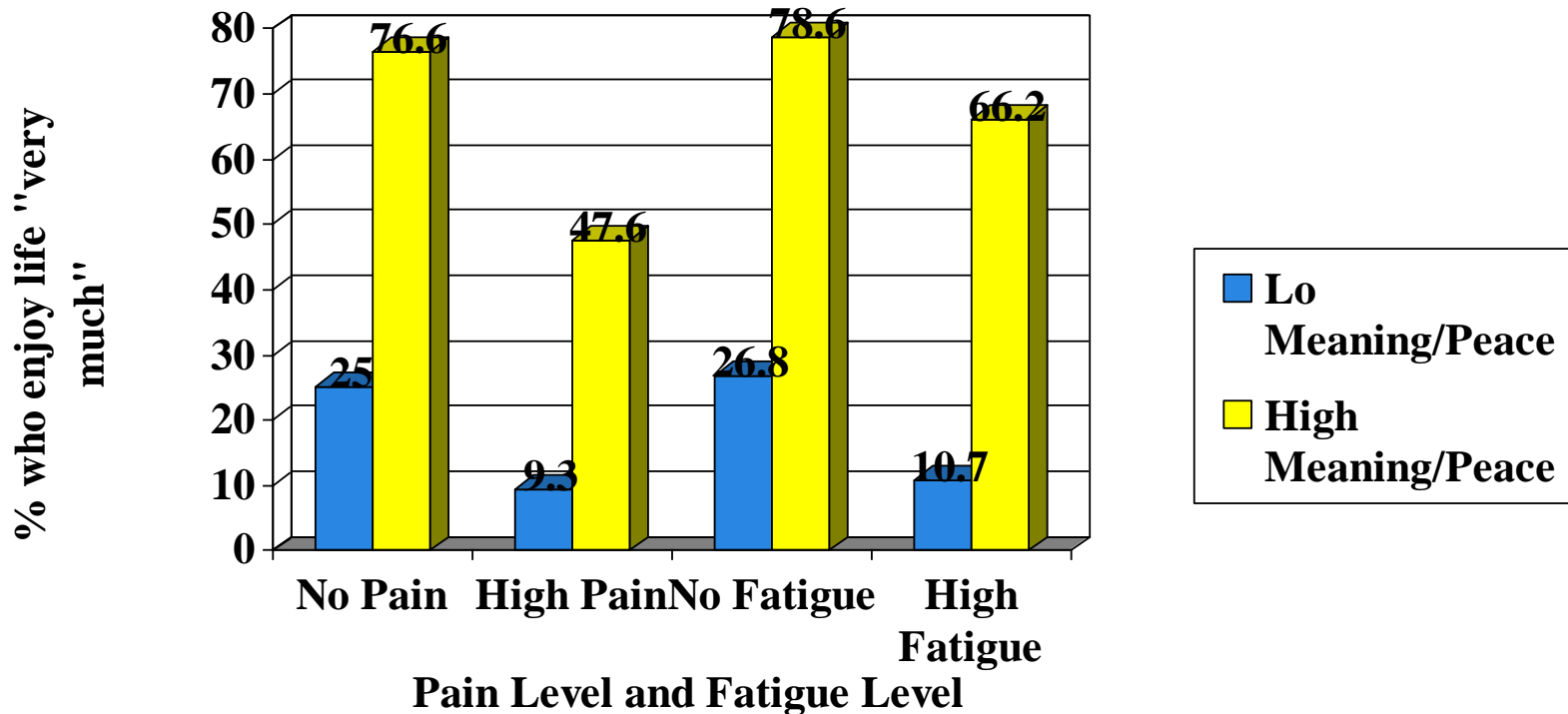
- Dependency - 39 %
- Meaninglessness - 37 %
- Hopelessness - 37 %
- Burden to others - 34 %
- Loss of social role - 29 %
- Feeling irrelevant - 28 %

Morita T, et al, psycho-oncology, 9:164-168, 2000.



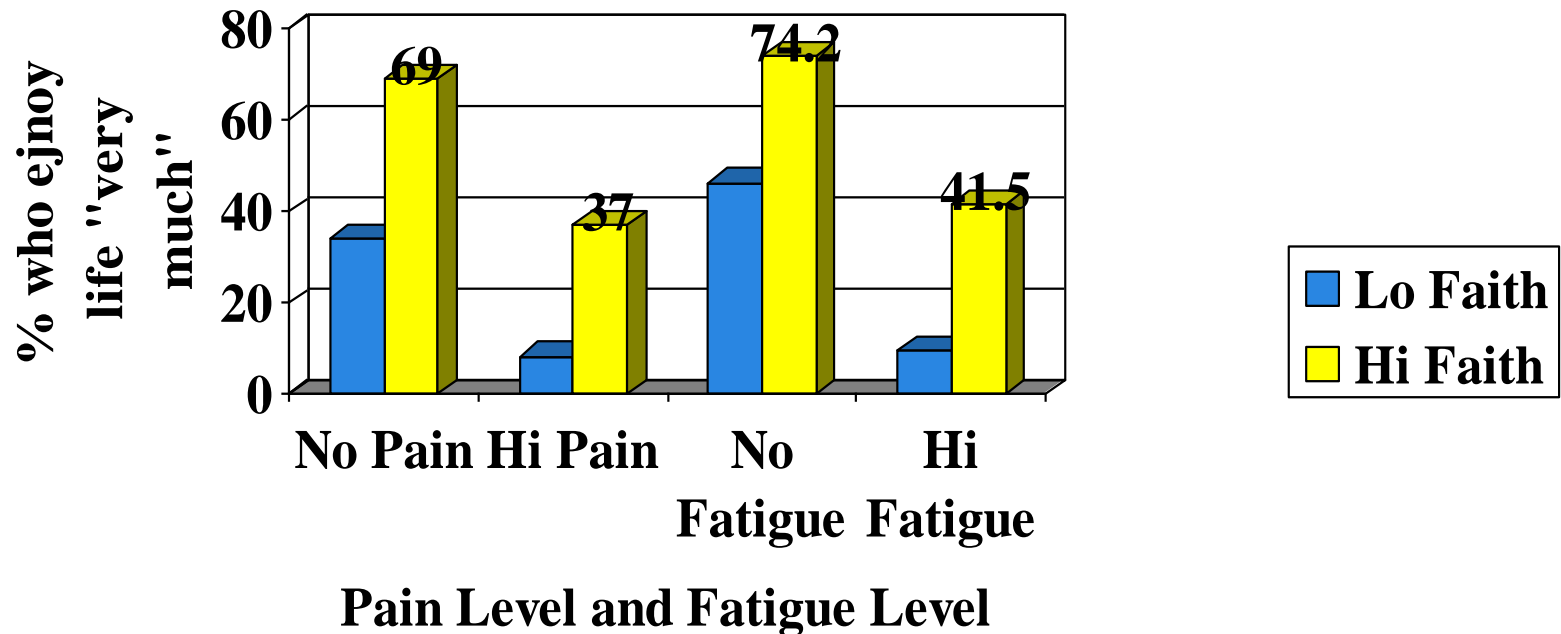
Spirituality and QOL in Cancer

Percent of Subjects Enjoying Life "Very Much" by Meaning/Peace and Symptoms Level



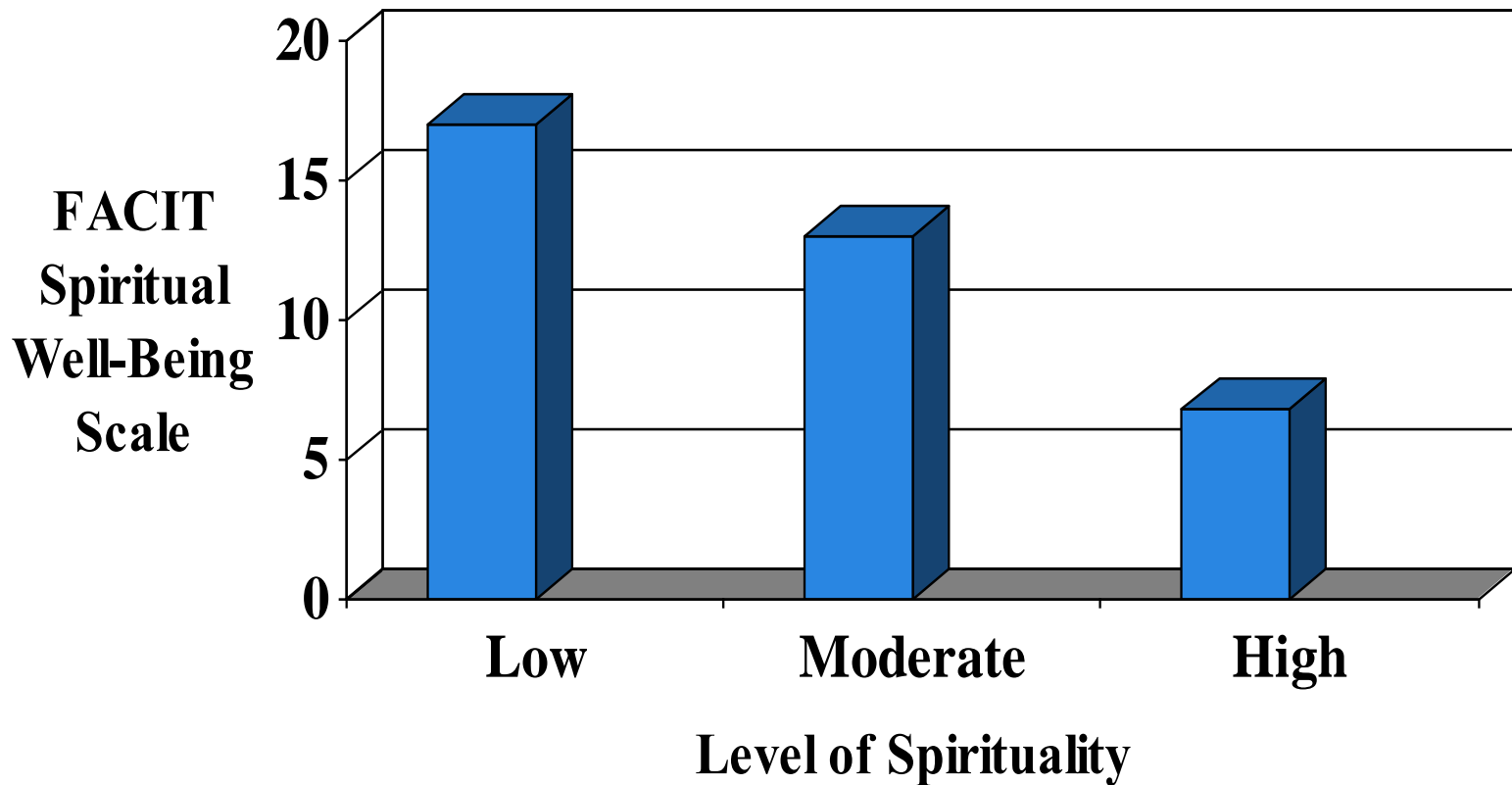
Spirituality in QOL in Cancer

Percent of Subjects Enjoying Life "Very Much" by Faith and Symptom Levels



Spirituality and Depression in Cancer

Severity of Depressive Symptoms (HDRS score)



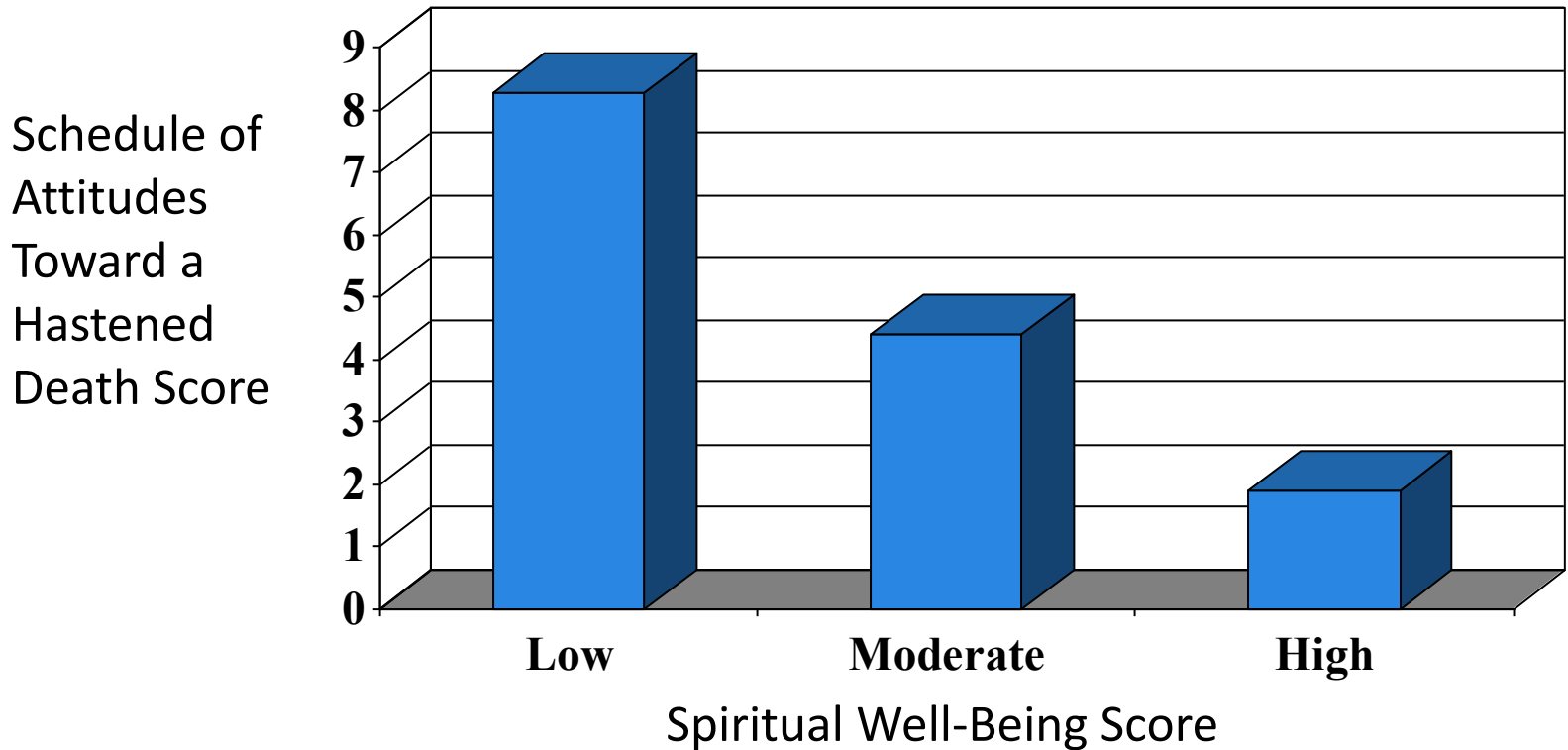


Spirituality and Depression in Cancer Patients

Correlation Between Spirituality/religion
And Depression

	Depression (HDRS)	p
Facit Total Score	-.40	.001
<i>Meaning/peace Subscale</i>	-.51	.001
Faith Subscale	-.13	n.s.
Religiosity Index	.04	n.s.

Spirituality & Desire for Hastened Death: A Group of 160 Terminally Ill Cancer Patients

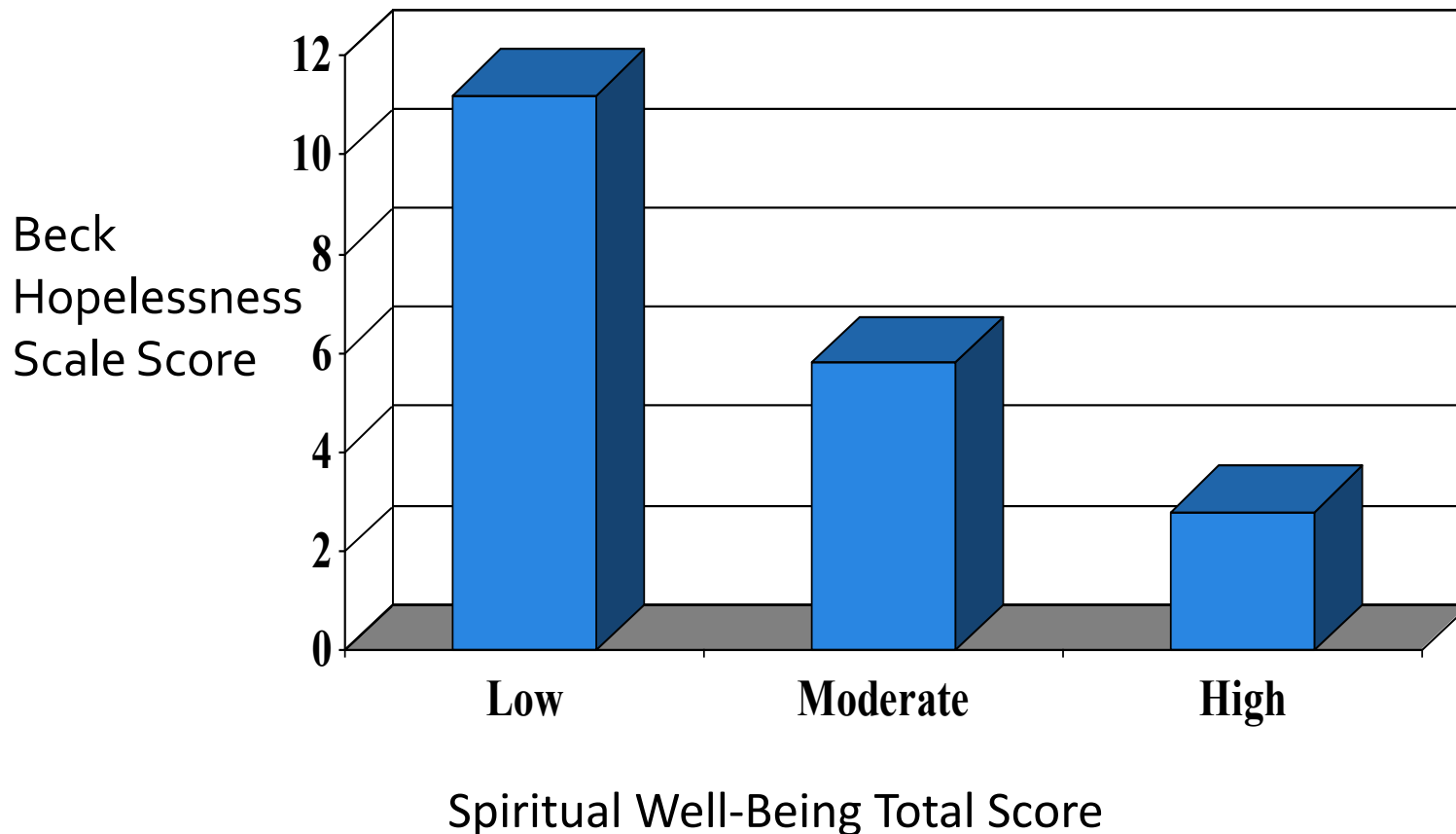


$p < .001$



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Spirituality & Hopelessness in Cancer: A Group of 160 Terminally Ill Cancer Patients

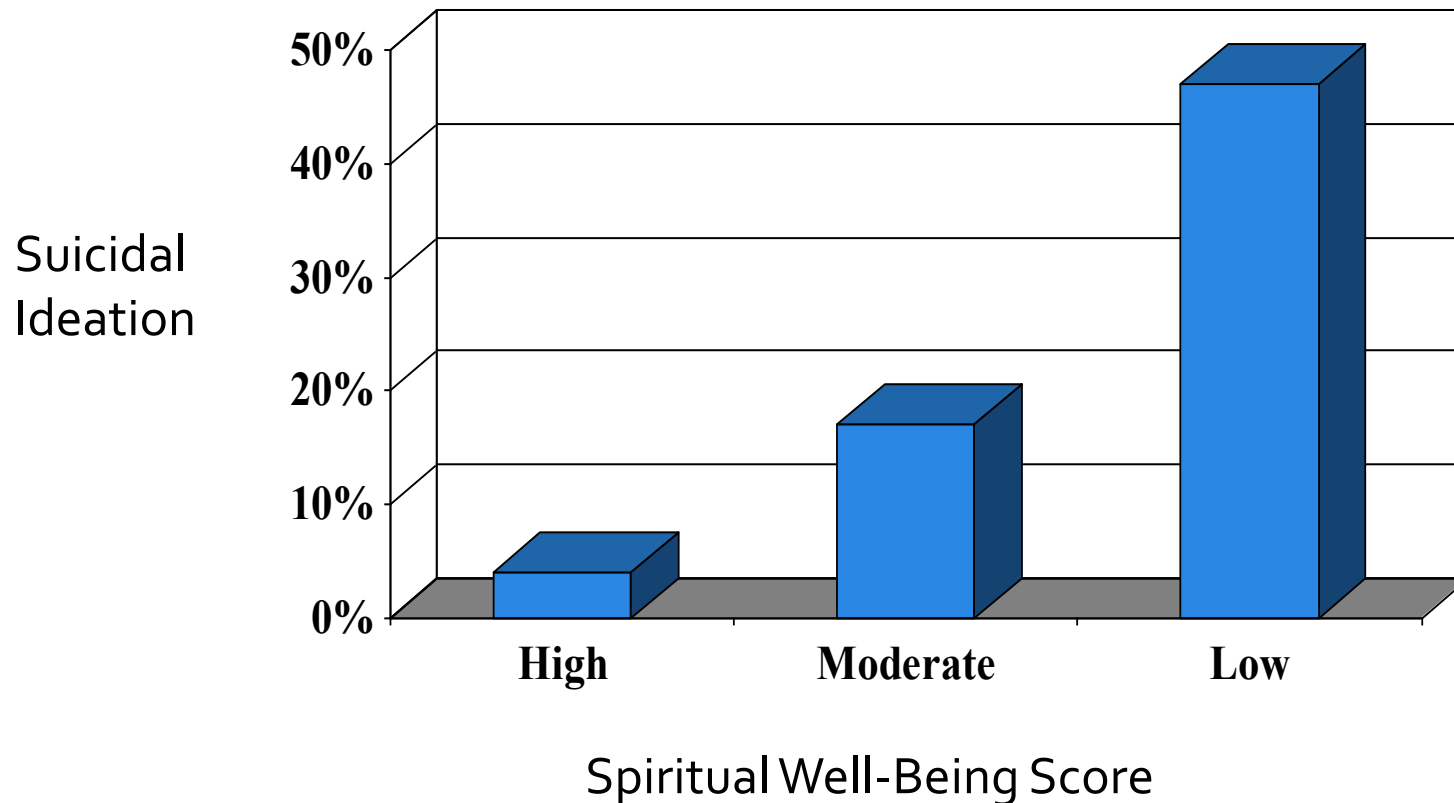


$p < .001$



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Spiritual Well Being and Suicidal Ideation: N=30 in Group of 160 Terminally Ill Cancer Patients



$p < .001$



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Spiritual Well-Being in Relation to End of Life Despair Among Cancer Patients

Regression models predicting end-of-life despair from Meaning, Faith and Depression

	BHS	SAHD	SI
FACIT Meaning subscale	-.44	-.44	-.84
FACIT Faith subscale	-.18	-.06	-.21
Depression (HDRS)	.26	.23	.11

(Correlations in **bold** are significant, $p < .05$)



A Meta-Analysis of Meaning and it's Relation to Distress in Cancer Patients

In a meta-analysis of 62 studies examining the relationship between “Meaning in Life” (usually measured by the FACIT-SWB) and distress in cancer patients:

Meaning in life demonstrated significant negative associations with cancer distress

($r = -0.41$, 95% CI = -0.47 to -0.35 , $k = 44$)

Viktor E. Frankl, M.D. (1905-1997)



Meaning Centered Psychotherapy

Basic Concepts

Meaning:

1. **Meaning of Life** - Life has meaning and never ceases to have meaning. The possibility of creating or experiencing meaning exists until the last moments of life
2. **Will to Meaning** - The desire to find meaning in human existence is a third primary and basic motivation for human behavior; (i.e. libido, will to power, will to meaning).
3. **Freedom of Will** - Freedom to find meaning in existence and to choose one's attitude towards suffering; to choose how we respond to uncertainty



Meaning Centered Psychotherapy Basic Concepts

The Sources of Meaning: Achieving Transcendence

1. **Creativity** - work, deeds, causes
2. **Experience** - nature, art, relationships
3. **Attitude** - the attitude one takes towards suffering and existential problems; limitations, uncertain future
4. **Historical** - individual, family, community history; Legacy: past, present, future

Meaning-Centered Psychotherapy

Session Topics & Themes

- **Session #1: Concepts & Sources of Meaning**
 - *Introductions to Intervention & Meaning*
- **Session #2: Cancer & Meaning**
 - *Identity – Before & After Cancer Diagnosis*
- **Session #3: Historical Sources of Meaning**
 - *Life as a Living Legacy (past-present-future)*
- **Session #4: Attitudinal Sources of Meaning**
 - *Encountering Life's Limitations*
- **Session #5: Creative Sources of Meaning**
 - *Actively Engaging in Life (via: creativity & responsibility)*
- **Session #6: Experiential Sources of Meaning**
 - *Connecting with Life (via: love, beauty & humor)*
- **Session #7: Transitions**
 - *Reflections & hopes for future*



Session #1

Concepts and Sources of Meaning: Experiential Exercises

- *List one or two experiences or moments when life has felt particularly meaningful to you- whether it sounds powerful or mundane. For example, it could be something that helped you through a difficult day, or a time when you felt most alive.*





Session # 2

Cancer and Meaning: Experiential Exercises

- *Write down 4 answers to the question, "Who am I?" These can be positive or negative, and include personality characteristics, body image, beliefs, things you do, people you know, etc.... For example, answers might start with, "I am someone who _____," or "I am a ____."*
- *How has cancer affected your answers?*



Sessions # 3

Meaning & the Historical Context of Life: Experiential Exercises

- *Tell us the story of your name.*
- *Tell us about your life and the history of your family.*
- *What are your most important accomplishments, and what do you feel most proud of?*
- *What have you learned about life that you would want to pass on to others?*



Session # 4- Meaning & Attitudinal Values: Limitations, Finiteness of Life

- *Are you still able to find meaning in your daily life despite the finiteness of life?*
- *Since your diagnosis, have you felt a sense of a loss of meaning in life? That life is not worth living?*
- *Thoughts about what is a "good" or "meaningful" death.*
- *Thoughts about what happens after death?*





Session # 5- Meaning Derived from Creative Values & Responsibility

Courage, Commitment and Care

- *What are your responsibilities?*
- *What are the tasks you have for your life?*
- *Who are you responsible to and for?*
- *What is your unfinished business?*
- *What tasks have you always wanted to do, but have yet to undertake?*






Session # 6- Meaning & Experiential Values: Love, Nature, Art, Beauty, Humor:

- *List and discuss 3 things that strike you as beautiful and still make you feel alive.*
- *List 3 things that still make you laugh.*





Session # 7- Transitions

- *Process Termination*
- *Review of memoirs, legacy project*
- *Review sources of meaning*
- *Hopes for future- List 3 hopes for the future*
- *Saying good-bye*



Meaning Centered Psychotherapy in Advanced Cancer

- Meaning-Centered Psychotherapy, in Group and Individual Formats, has been demonstrated in multiple Randomized Controlled Trials to:
 - Enhance Spiritual Well Being, Meaning, Faith,
 - Enhance Quality of Life
 - Decrease Hopelessness, Desire for Hastened Death, Symptom Distress, Depression, Anxiety

Funding: R21 AT/CA 0103; RO1 CA 128134; RO1 CA 128187; Fetzer Institute; Kohlberg Foundation
Breitbart et al, Psycho-oncology 2010, Breitbart, et al 2002,2004,2006
Breitbart et al, JCO 30: 1304-1309, 2012, Breitbart et al JCO 33: 749-54 2015



Meaning-centered group psychotherapy for patients with advanced cancer: a pilot randomized controlled trial

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Abstract

Objective: An increasingly important concern for clinicians who care for patients at the end of life is their spiritual well-being and sense of meaning and purpose in life. In response to the need for short-term interventions to address spiritual well-being, we developed Meaning-Centered Group Psychotherapy (MCGP) to help patients with advanced cancer sustain or enhance a sense of meaning, peace and purpose in their lives, even as they approach the end of life.

Methods: Patients with advanced (stage III or IV) solid tumor cancers ($N = 90$) were randomly assigned to either MCGP or a supportive group psychotherapy (SGP). Patients were assessed before and after completing the 8-week intervention, and again 2 months after completion. Outcome assessment included measures of spiritual well-being, meaning, hopelessness, desire for death, optimism/pessimism, anxiety, depression and overall quality of life.

Results: MCGP resulted in significantly greater improvements in spiritual well-being and a sense of meaning. Treatment gains were even more substantial (based on effect size estimates) at the second follow-up assessment. Improvements in anxiety and desire for death were also significant (and increased over time). There was no significant improvement on any of these variables for patients participating in SGP.

Conclusions: MCGP appears to be a potentially beneficial intervention for patients' emotional and spiritual suffering at the end of life. Further research, with larger samples, is clearly needed to better understand the potential benefits of this novel intervention.
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Keywords: psychotherapy; meaning; spiritual well-being; palliative care; existential

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Introduction

An increasingly important concern for mental health clinicians who care for patients at the end of life is their spiritual well-being and sense of meaning and purpose in life [1–4]. An Institute of Medicine (IOM) report identified spiritual well-being as one of the most important influences on patient quality of life at the end of life [5]. Our research group has demonstrated a central role for meaning, buffering against depression, hopelessness and desire for hastened death among advanced cancer patients [6–8]. Such findings suggest that non-pharmacologic, psychotherapeutic interventions need to be developed to help patients with cancer enhance their sense of meaning and purpose in life despite their illness.

There is strong evidence that group psychotherapy interventions for cancer patients are time-efficient, economical and effective in improving

quality of life, reducing psychological distress, improving coping skills and reducing the distress associated with symptoms such as pain [9–13]. However, few interventions have specifically focused on existential or spiritual domains in treatment or measured the impact of treatment on such outcomes, particularly in patients with advanced cancer. Early research by Yalom, Spiegel and colleagues demonstrated that a 1-year supportive group psychotherapy (SGP), which included a focus on existential issues, decreased psychological distress and improved quality of life [14–16]. The authors concluded, based on relatively weaker findings at 4- and 8-month assessments, that 'participation in the group over a one-year period was necessary to consolidate measurable change [15].' Moreover, although significant improvement was noted for some of the variables studied, others (e.g. depression) were not impacted by this intervention.

William Breitbart, Andrew J. Vickers, Yuelin Li, Hayley Pessin, Wendy Lichtenhal, Daniel Sjoberg, and Bernice R. Cassileth, Memorial Sloan-Kettering Cancer Center, Megan Olden, Weill-Cornell Medical College of Cornell University, New York, Barry Rosenfeld, Fordham University, Bronx, NY, Shannon Poppio, Memorial Sloan-Kettering Cancer Center, New York, NY, and Jennifer Abbey, Independent Practice, Montclair, NJ.

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Pilot Randomized Controlled Trial of Individual Meaning-Centered Psychotherapy for Patients With Advanced Cancer

William Breitbart, Shannon Poppio, Barry Rosenfeld, Andrew J. Vickers, Yuelin Li, Jennifer Abbey, Megan Olden, Hayley Pessin, Wendy Lichtenhal, Daniel Sjoberg, and Bernice R. Cassileth

ABSTRACT

Purpose

Spiritual well-being and sense of meaning are important concerns for clinicians who care for patients with cancer. We developed Individual Meaning-Centered Psychotherapy (IMCP) to address the need for brief interventions targeting spiritual well-being and meaning for patients with advanced cancer.

Patients and Methods

Patients with stage III or IV cancer ($N = 120$) were randomly assigned to seven sessions of either IMCP or therapeutic massage (TM). Patients were assessed before and after completing the intervention and 2 months postintervention. Primary outcome measures assessed spiritual well-being and quality of life; secondary outcomes included anxiety, depression, hopelessness, symptom burden, and symptom-related distress.

Results

Of the 120 participants randomly assigned, 78 (65%) completed the post-treatment assessment and 67 (56%) completed the 2-month follow-up. At the post-treatment assessment, IMCP participants demonstrated significantly greater improvement than the control condition for the primary outcomes of spiritual well-being ($b = 0.39$; $P < .001$, including both components of spiritual well-being [sense of meaning: $b = 0.34$; $P = .003$ and faith: $b = 0.42$; $P = .03$]), and quality of life ($b = 0.76$; $P = .013$). Significantly greater improvements for IMCP patients were also observed for the secondary outcomes of symptom burden ($b = -6.56$; $P < .001$) and symptom-related distress ($b = -0.47$; $P < .001$) but not for anxiety, depression, or hopelessness. At the 2-month follow-up assessment, the improvements observed for the IMCP group were no longer significantly greater than those observed for the TM group.

Conclusion

IMCP has clear short-term benefits for spiritual suffering and quality of life in patients with advanced cancer. Clinicians working with patients who have advanced cancer should consider IMCP as an approach to enhance quality of life and spiritual well-being.

J Clin Oncol 30:1304-1308. © 2012 by American Society of Clinical Oncology

INTRODUCTION

A growing literature has highlighted the importance of spiritual well-being and a sense of meaning for patients with advanced cancer.¹ Supportive care experts increasingly recognize the significance of the spiritual domain of care and identify the need for interventions that target spiritual well-being.²⁻⁵ In response to this need, we developed Individual Meaning-Centered Psychotherapy (IMCP), specifically tailored to the needs of patients with advanced cancer.^{6,7} This intervention is grounded in the writings of Frankl⁸ and informed by the work of Spiegel et al,^{9,10} Yalom et al,¹¹ and Kissane et al.¹² A randomized controlled trial comparing Meaning-Centered Group Psychotherapy (MCGP) with supportive

group psychotherapy demonstrated the efficacy of MCGP in improving spiritual well-being, meaning, and hopelessness.⁷ However, that study revealed several logistical barriers that exist when providing group interventions to patients with advanced cancer, resulting in substantial attrition. Because of the inflexibility inherent in group interventions, we adapted MCGP to an individual intervention in hopes of reducing attrition and missed sessions while maintaining the benefits.

Most psychotherapy intervention trials with patients who have advanced cancer have used a group format.¹³⁻¹⁷ Of the handful of individual psychotherapy interventions for patients with advanced cancer, few have used randomized controlled research designs. de Vries et al¹⁸ conducted an open

Pilot Randomized Controlled Trial of Individual Meaning-Centered Psychotherapy for Patients With Advanced Cancer

William Breitbart, Shannon Poppito, Barry Rosenfeld, Andrew J. Vickers, Yuelin Li, Jennifer Abbey, Megan Olden, Hayley Pessin, Wendy Lichtenthal, Daniel Sjoberg, and Barrie R. Cassileth

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J Clin Oncol 30:1304-1309. © 2012 by American Society of Clinical Oncology

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Meaning-Centered Group Psychotherapy: An Effective Intervention for Improving Psychological Well-Being in Patients With Advanced Cancer

William Breitbart, Barry Rosenfeld, Hayley Pessin, Allison Applebaum, Julia Kulikowski, and Wendy G. Lichtenthal

ABSTRACT

Purpose

To test the efficacy of meaning-centered group psychotherapy (MCGP) to reduce psychological distress and improve spiritual well-being in patients with advanced or terminal cancer.

Patients and Methods

Patients with advanced cancer (N = 253) were randomly assigned to manualized eight-session interventions of either MCGP or supportive group psychotherapy (SGP). Patients were assessed before and after completing the treatment and 2 months after treatment. The primary outcome measures were spiritual well-being and overall quality of life, with secondary outcome measures assessing depression, hopelessness, desire for hastened death, anxiety, and physical symptom distress.

Results

Hierarchical linear models that included a priori covariates and only patients who attended \geq three sessions indicated a significant group \times time interaction for most outcome variables. Specifically, patients receiving MCGP showed significantly greater improvement in spiritual well-being and quality of life and significantly greater reductions in depression, hopelessness, desire for hastened death, and physical symptom distress compared with those receiving SGP. No group differences were observed for changes in anxiety. Analyses that included all patients, regardless of whether they attended any treatment sessions (ie, intent-to-treat analyses), and no covariates still showed significant treatment effects (ie, greater benefit for patients receiving MCGP v SGP) for quality of life, depression, and hopelessness but not for other outcome variables.

Conclusion

This large randomized controlled study provides strong support for the efficacy of MCGP as a treatment for psychological and existential or spiritual distress in patients with advanced cancer.

J Clin Oncol 33:749-754. © 2015 by American Society of Clinical Oncology

INTRODUCTION

Coping with advanced cancer can cause serious psychological distress in even the most resilient individuals. Distress can manifest in many ways, ranging from depression and hopelessness to a loss of spiritual well-being, existential distress, and even desire for hastened death. The assessment and treatment of psychological disorders (eg, depression, anxiety) are widely recognized as critical components of care in oncology and palliative care settings; however, few interventions specifically target the loss of spiritual well-being and existential distress that that often accompany advanced cancer. Several psychotherapeutic interventions have focused on patients with advanced or terminal illness, but these studies have often generated modest results (eg, small treatment

effects, inconsistent findings across outcome variables) and have typically relied on small samples (eg, < 100 participants).¹⁻⁹ A number of interventions focused primarily on existential issues have not targeted patients with advanced or terminal cancer.¹⁰⁻¹²

We developed meaning-centered psychotherapy (MCP) specifically to address the loss of spiritual well-being or sense of meaning in life and the existential distress that often arise in patients with advanced cancer.^{13,14} Our pilot studies of group and individualized formats of MCP provided preliminary support for this intervention.^{15,16} Although these randomized controlled trials (RCTs) demonstrated significant improvement in spiritual well-being, results for other outcome variables (eg, quality of life, hopelessness, desire for hastened death, depression) were weaker and/or inconsistent

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Clinical trial information: NCT00494910.

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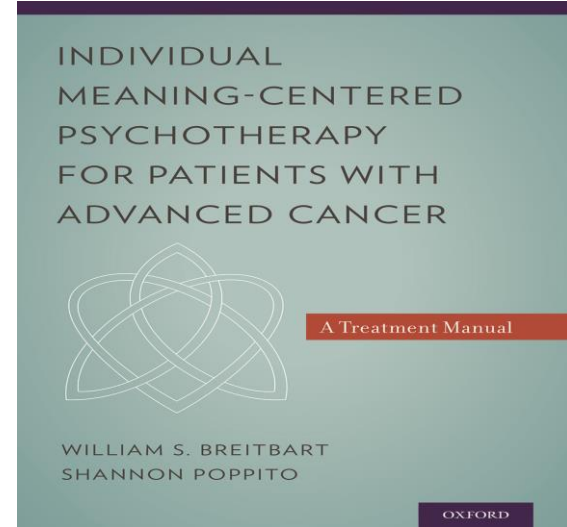
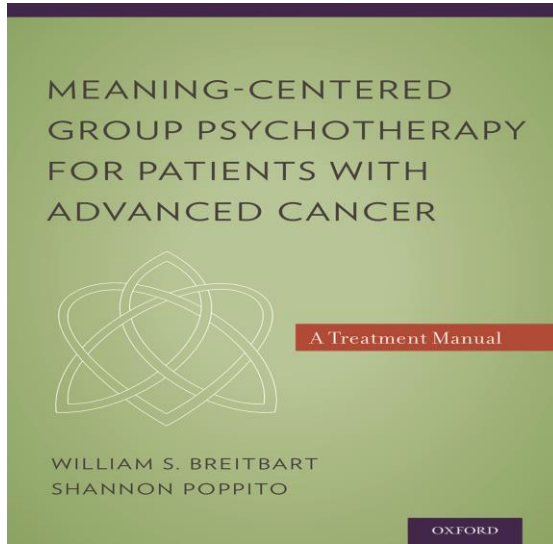
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DOI: 10.1200/JCO.2014.57.2198

Meaning-Centered Group Psychotherapy for Patients with Advanced Cancer

Program Title	Meaning-Centered Group Psychotherapy for Patients with Advanced Cancer	This program has been evaluated on criteria from the RE-AIM framework, which helps translate research into action.
Purpose	Designed to enhance the quality of life for cancer survivors. (2015)	
Program Focus	Psychosocial - Anxiety, Psychosocial - Coping, Psychosocial - Depression and Psychosocial - Stress/distress (post-traumatic stress)	Reach 80.0%
Population Focus	Cancer patients	
Topic	Survivorship/Supportive Care	Effectiveness 100.0%
Age	Adults (40-65 years), Older Adults (65+ years), Young Adults (19-39 years)	
Gender	Female, Male	Adoption 16.7%
Race/Ethnicity	Asian, Black, not of Hispanic or Latino origin, Hispanic or Latino, White, not of Hispanic or Latino origin	
Setting	Clinical	Implementation 71.4%
Origination	United States	
Funded by	NCI (Grant number(s): CA 128187)	

From Oxford University Press



Meaning-Centered Group Psychotherapy for Patients with Advanced Cancer: A Treatment Manual

August 2014 | Paperback
ISBN: 9780199837250
128 pp. | LIST PRICE: \$29.95

Individual Meaning-Centered Psychotherapy for Patients with Advanced Cancer:

A Treatment Manual

August 2014 | Paperback
ISBN: 9780199837243
112 pp. | LIST PRICE: \$29.95

Meaning-Centered Psychotherapy (MCP) for advanced cancer patients is a highly effective intervention for advanced cancer patients, developed and tested in randomized controlled trials by Dr. Breitbart and colleagues at Memorial Sloan-Kettering Cancer Center. These treatment manuals for group therapy and individual therapy provide clinicians in the oncology and palliative care settings with a highly effective, brief, structured intervention shown to be effective in helping patients sustain meaning, hope and quality of life.

ABOUT THE AUTHORS

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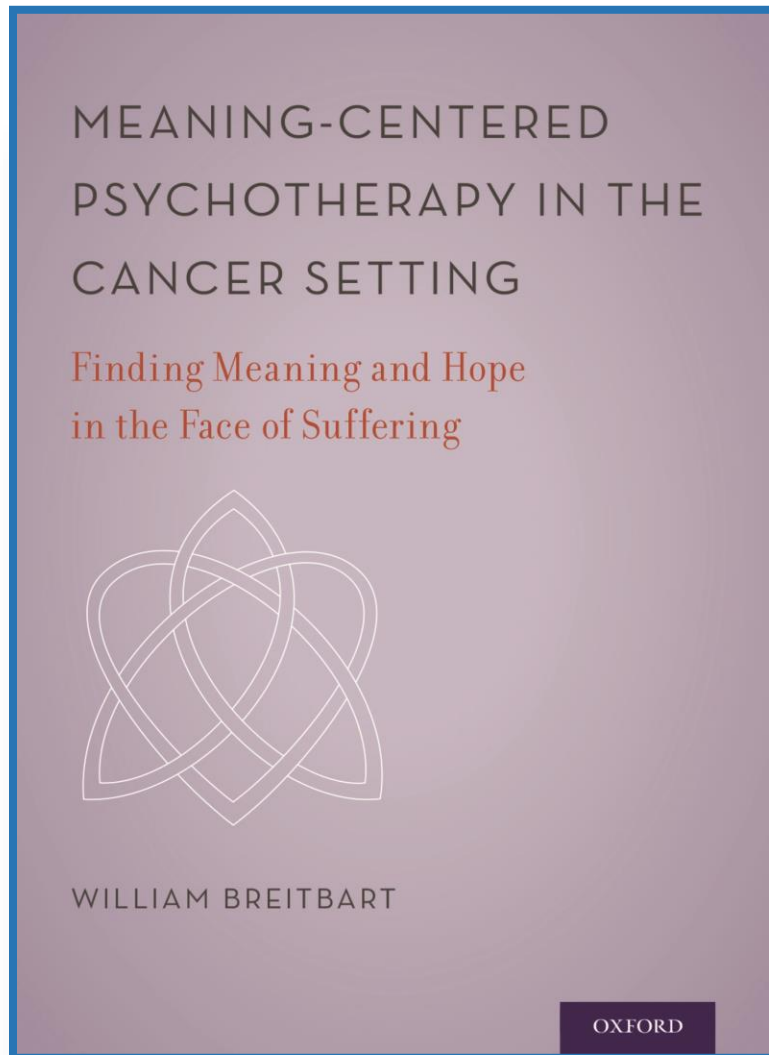
Novel Adaptations of MCP for New Populations and Purposes in Cancer

- W. Lichtenthal ~ USA: Meaning- Centered Grief Therapy (MCGT) **NCI RO₃, NCI K-award**
- W. Lichtenthal ~ USA: Meaning- Centered Group Psychotherapy for Breast Cancer Survivors (MCGP-BCS) **ACS**
- A. Applebaum ~ USA: Meaning -Centered Psychotherapy for Caregivers (MCP-C) **NCI-RO₃, ACS**
- I. Verdonck ~ The Netherlands: MCGP for General Cancer Survivors (MCGP-CS) **DCS**
- J.Keraney ~ USA : Meaning-Centered Psychotherapy for AYA with Cancer **Silverberg Foundation**
- L. Fillion~ Canada: MCP for Hospice Nurses **NCIHR**
- *Replication Studies in: Italy, the Netherlands, Spain, Israel, Taiwan*



Meaning-Centered Psychotherapy in the Cancer Setting

FINDING MEANING AND HOPE IN THE FACE OF SUFFERING



Meaning-Centered-Psychotherapy in the Cancer Setting provides a theoretical context for Meaning-Centered Psychotherapy (MCP), a non-pharmacologic intervention which has been shown to enhance meaning and spiritual well-being, increase hope, improve quality of life, and significantly decrease depression, anxiety, desire for hastened death, and symptom burden distress in the cancer setting.

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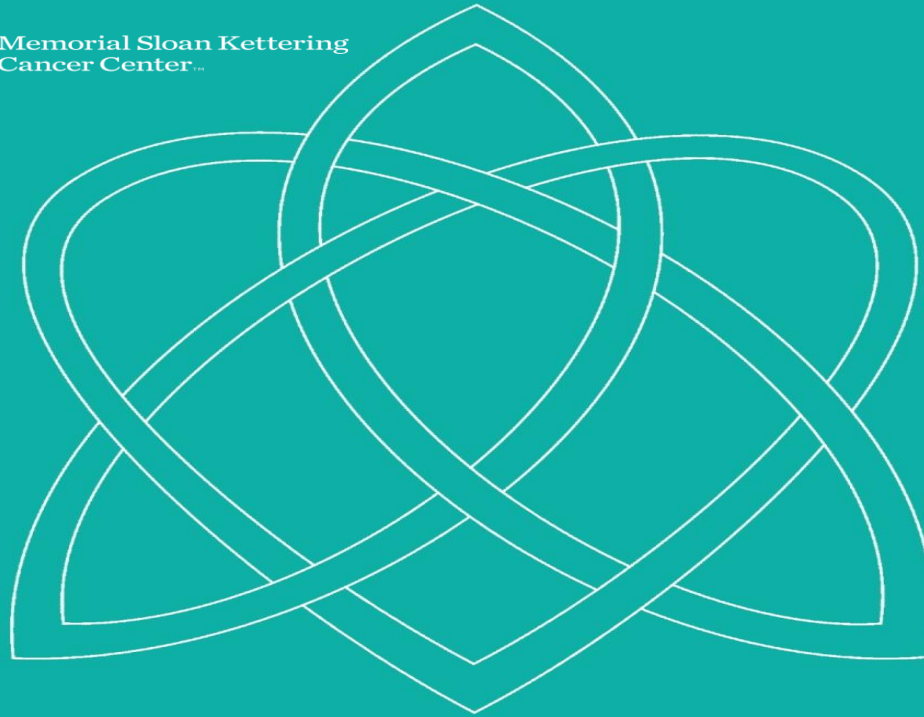
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For more information

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