



Anxiety, Fear, and Depression

A cancer diagnosis can affect your emotional health

Most patients, families, and caregivers face some degree of depression, anxiety, and fear when cancer becomes part of their lives. These feelings are normal responses to such a life-changing experience. In people with cancer, these feelings may be caused by many things, including changes in how they are able to fill family or work roles, the loss of control over life events, body image changes, fear of death, fear of suffering and pain, or fear of the unknown. Family members may have these feelings because they are afraid of losing their loved one. They may also feel angry because someone they love has cancer, frustrated that they cannot "do enough," or stressed because they have to do more at home.

It's important to remember that people can feel distress at any time after cancer diagnosis and treatment, even many years after the cancer is treated. As their health situations change, people with cancer must cope with new stressors along with the old, and their feelings often change, too. For instance, people with advanced cancer may have more emotional distress than those with earlier-stage cancers.

People who have physical symptoms such as pain, nausea, or extreme tiredness (fatigue) also seem more likely to have emotional distress. Most of the time, these physical symptoms can be controlled with medicines -- but it may take more than one try to find the right drug or combination of drugs. This is one reason to stay in touch with your cancer care team, so that they can help you with these kinds of symptoms before you feel overwhelmed.

The information we talk about here will help families, friends, and caregivers know what feelings and behaviors they may expect from their loved one who has been diagnosed with cancer. It will also help you understand what is not normal and when outside help may be needed.

Depression

It is normal to grieve over the changes that cancer brings to a person's life. The future, which may have seemed so sure before, now becomes uncertain. Some dreams and plans may be lost forever. But if you are caring for a person who has been sad for a long time or is having trouble carrying out day-to-day activities, that person may have clinical depression. In fact, up to 1 in 4 people with cancer do have clinical depression. Clinical depression causes great distress, impairs functioning, and may even make the person with cancer less able to follow their cancer treatment plan. The good news is that clinical depression can be treated.

If you are caring for someone who has symptoms of clinical depression, encourage him or her to get help. There are many treatments for clinical depression including medicines, counseling, or a combination of both. Treatments can reduce suffering and improve your loved one's quality of life.

Symptoms of clinical depression

- Ongoing sad or "empty" mood for most of the day
- Loss of interest or pleasure in almost all activities most of the time
- Major weight loss (when not dieting) or weight gain
- Being "slowed down" or restless and agitated almost every day, enough for others to notice
- Extreme tiredness (fatigue) or loss of energy
- Trouble sleeping with early waking, sleeping too much, or not being able to sleep
- Trouble focusing thoughts, remembering, or making decisions
- Feeling guilty, worthless, or helpless
- Frequent thoughts of death or suicide (not just fear of death), suicide plans or attempts

Keep in mind that some of these symptoms, such as weight changes, fatigue, or even forgetfulness can be caused by cancer treatment. But if 5 or more of these symptoms happen nearly every day for 2 weeks or more, or are severe enough to interfere with normal activities, encourage the person you are caring for to be checked for clinical depression by a qualified health or mental health professional. If your loved one tries to hurt himself or herself, or has a plan to do so, get help right away.

What to do

- Encourage the depressed person to continue treatment until symptoms improve, or to talk to the doctor about different treatment if there is no improvement after 2 or 3 weeks.
- Promote physical activity, especially mild exercise such as daily walks.
- Help make appointments for mental health treatment, if needed.
- Provide transportation for treatment, if needed.
- Engage your loved one in conversation and other activities they enjoy.
- Realize that negative thinking is one of the symptoms of depression and should get better with treatment.
- Reassure your loved one that with time and treatment, he or she will begin to feel better.

Keep in mind that caregivers and family members can also become depressed. If you suspect you may be depressed, see a doctor. Make time to get the help and support you need. If you notice symptoms in another friend or family member, try to get them help.

Anxiety and fear

At many different times during their treatment and recovery, people with cancer may be fearful and anxious. For most people with cancer, finding out that they have cancer or that the cancer came back causes the most anxiety and fear. Fear of treatment, doctor visits, and tests may also cause apprehension (the feeling that something bad is going to happen). It is normal to feel afraid. People may be afraid of uncontrolled pain, dying, or what happens after death, including what may happen to loved ones. Below are some signs and symptoms of fear and anxiety.

Symptoms of anxiety and fear

- Anxious facial expression
- Uncontrolled worry
- Trouble solving problems and focusing thoughts
- Muscle tension (looks tense or uptight)
- Trembling, shaking, and other signs of restlessness
- Dry mouth
- Angry outbursts

- Irritability (grouchy or short-tempered)

If a person has these symptoms, and they are interfering with her or his life, a mental health evaluation may be helpful. Keep in mind that sometimes, despite having all the symptoms, a person may deny having these feelings. But if they are willing to admit that they feel distressed or uncomfortable, therapy can often help.

What to do

- Encourage, but do not force, each other to talk.
- Share feelings and fears that you or your loved one may be having.
- Listen carefully to each other's feelings. Offer support, but don't deny or discount feelings.
- Remember that it is OK to feel sad and frustrated.
- Get help through counseling and/or support groups.
- Use prayer or other types of spiritual support if it helps.
- Try deep breathing and relaxation exercises. Close your eyes, breathe deeply, focus on each body part and relax it, start with your toes and work up to your head. When relaxed try to think of a pleasant place such as a beach in the morning or a sunny field on a spring day.
- Talk with a doctor about using anti-anxiety or anti-depressant medicines.

Do not

- Keep feelings inside.
- Force someone to talk if they are not ready to.
- Tell a person to cheer up if they seem depressed.
- Blame yourself or another person for feeling fearful, anxious, or depressed.
- Try to reason with a person whose fears, anxieties, or depression are severe; talk with the doctor about medicines and other kinds of help.

Panic attacks

Panic attacks can be an alarming symptom of anxiety. Panic attacks happen very suddenly and often reach their worst within about 10 minutes. The person may seem fine between attacks, but is usually afraid that they will happen again.

Symptoms of a panic attack

- Shortness of breath*
- Racing heart*
- Feeling dizzy, unsteady, lightheaded, or faint*
- Chest pain or discomfort*
- Feeling as if they're choking*
- Trembling or shaking
- Sweating
- Fear of losing control or "going crazy"
- Urge to escape
- Numbness or tingling sensations
- Feeling "unreal" or "detached" from themselves
- Chills (shaking or shivering) or hot flashes (may involve sweating or facial reddening)

**If a person is having any of the first 5 symptoms (marked with asterisks), it can mean an urgent or life-threatening condition. Call 911 or the doctor right away if the patient unexpectedly has any of these. These symptoms can be signs of other, more serious problems such as allergic reaction, heart attack, blood chemistry imbalance, collapsed lung, or others. It is not safe to assume that they are panic-related until diagnosed by a doctor.*

If the person has had panic attacks in the past, and it happens again exactly like it did before, they can often recognize it as a panic attack.

If the person recovers completely within a few minutes and has no more symptoms, it is more likely to be a panic attack. If panic attacks are diagnosed, brief therapy and medicines have been shown to be helpful.

What to do

- Check with the doctor to be sure that the symptoms are caused by panic and not another medical problem.
- Stay calm and speak softly during a panic attack.
- Sit with the person during panic attacks until he or she is feeling better.
- Call for help if needed.

- After the panic attack is over, encourage the person to get treatment for the panic attacks.
- Provide transportation to treatment if needed. The person may be afraid that a panic attack will happen while driving.
- The ideas listed in "What to do" in the section "Anxiety and Fear" may also be helpful.

Do not

- Minimize the person's terror or fear.
- Judge the person for feeling scared and acting strangely.
- Try to talk the person out of their fear or other feelings.
- Hesitate to call the doctor if you have questions about what is happening.

What if the person with cancer acts as if nothing is wrong?

Be aware that your loved one may put up a false front, or on a "happy face," even if he or she doesn't really feel that way. This may be their way to try to protect the people they love, and possibly themselves, from painful feelings. And some people believe that a person with cancer can improve their outcome by being cheerful and happy all the time.

Studies of coping styles and survival or recurrence show that being cheerful has little to no effect on cancer. But some people with cancer feel guilty for being sad or fearful, and may try to act happy and "be positive" even when it is painful to them. (See our document called *Attitudes and Cancer* for more information.)

If you think that this is happening, gently tell the person that you are willing to listen to their feelings, no matter what they are. The message may be something like, "I care for you, and I am here for you whether you are happy, afraid, angry, or sad."

Support from loved ones and the cancer team can help

It may help to know that patients with more social support tend to feel less anxious and depressed and have a better quality of life. People with cancer find it encouraging to have others who listen and help with the practical aspects of dealing with cancer. Asking family members and loved ones for this kind of support may help reduce your distress as well as the patient's.

Being able to talk with the cancer care team about medical fears, concerns about pain, and other issues may also help the patient feel more comfortable. You or someone who is

close to the patient might offer to go with (or take) them to the doctor. Your being with them may have a calming effect, and you might be able to help the person remember symptoms or problems that need to be addressed. The doctor and cancer care team can answer questions and talk about any concerns you or your loved one have. They can also refer your loved one to a mental health professional if needed.

When to call the doctor

Going through a wide range of emotions is a normal part of coping with cancer. But some things should not be ignored. If your loved one has any of these problems, please call the doctor right away:

- Has thoughts of suicide (or of hurting himself or herself)
- Is unable to eat or sleep
- Lacks interest in usual activities for many days
- Is unable to find pleasure in anything
- Has emotions that interfere with daily activities and last more than a few days
- Is confused
- Has trouble breathing
- Is sweating more than usual
- Is very restless
- Has new or unusual symptoms that cause concern

There is no doubt that cancer changes people's lives. The emotional stress it causes can be overwhelming, but no one has to manage it alone. Your loved one's health care team may seem focused on his or her physical health, but they care about emotional health, too. Keep them involved in and aware of what your loved one is feeling and doing. Learn about and use the resources available to you. Coping with cancer is stressful, but you don't have to do it alone.

Additional resources

More information from your American Cancer Society

The following related information may also be helpful to you. These materials may be ordered from our toll-free number 1-800-227-2345 or read on our Web site.

Distress in People With Cancer

Caring for the Patient With Cancer at Home: A Guide for Patients and Families (also available in Spanish)

Listen With Your Heart (also available in Spanish)

Caregiving: How to Care for a Loved One With Cancer -- and Yourself

Chemo Brain

After Diagnosis: A Guide for Patients and Families (also available in Spanish)

A Message of Hope: Coping With Cancer in Everyday Life (also available in Spanish)

Talking with Friends and Relatives about Your Cancer (also available in Spanish)

I Can Cope

When Someone You Know Has Cancer (also available in Spanish)

Attitudes and Cancer

Living With Uncertainty: The Fear of Cancer Recurrence

When Your Cancer Comes Back: Cancer Recurrence

National organizations and Web sites*

Along with the American Cancer Society, other sources of information and support include

Substance Abuse and Mental Health Service Administration (SAMHSA)

Web site: www.samhsa.gov

National Mental Health Information Center Clearinghouse

Toll-free number: 1-877-726-4727

TTY: 1-866-889-2647

Web site: <http://mentalhealth.samhsa.gov>

For information on mental health and treatment referrals

National Clearinghouse for Alcohol and Drug Information (NCADI)

Toll-free number: 1-877-SAMHSA (1-800-729-6686)

TTY: 1-800-487-4889}

Spanish toll-free number: 1-877-767-8432

International telephone number: 240-221-4017

Web site: <http://ncadi.org>

For substance use/abuse treatment referrals and information

Suicide Prevention Hotline

Toll-free number: 1-800-273-TALK (1-800-273-8255)

TTY: 1-800-799-4889

Web site: www.suicidepreventionlifeline.org

Free, confidential prevention counseling and information for anyone thinking of suicide

American Psychosocial Oncology Society (APOS)

Toll-free number: 1-866-276-7443 (if after hours, leave message -- calls returned within 48 hours)

Web site: www.apos-society.org

For a free, confidential referral to a local mental health professional or cancer support group

CancerCare

Toll-free number: 1-800-813-4673

Web site: www.cancercare.org

Telephone and Internet support available to anyone affected by cancer

National Institute of Mental Health (NIMH)

NIMH Public Health Inquiries

Toll-free number: 1-866-615-6464

TTY: 1-866-415-8051

Web site: www.nimh.nih.gov

For information on symptoms, diagnosis, and treatment of mental disorders

**Inclusion on this list does not imply endorsement by the American Cancer Society.*

No matter who you are, we can help. Contact us anytime, day or night, for information and support. Call us at **1-800-227-2345** or visit www.cancer.org.

References

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1 · 800 · ACS-2345 or www.cancer.org