Do psychological factors predict prognosis in lung cancer?

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To explore the influence of psychological factors - e.g. causal attribution, religiosity, mindfulness, Type D personality, benefit finding, and optimism - on survival, fatigue, depression, and health-related quality of life of stage IIIb/IV...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Respiratory and mediastinal neoplasms malignant and unspecified
Study type	Observational non invasive

Summary

ID

NL-OMON30385

Source ToetsingOnline

Brief title psychological factors and the prognosis of lungcancer

Condition

• Respiratory and mediastinal neoplasms malignant and unspecified

Synonym lungcancer, NSCLC

Research involving Human

Sponsors and support

Primary sponsor: Universiteit van Tilburg Source(s) of monetary or material Support: eigen bijdragen

Intervention

Keyword: lungcancer, psychological factors, quality of life

Outcome measures

Primary outcome

The most important outcome variables will be survival and health-related

quality of life.

Secondary outcome

Secundary outcome variables will be fatigue and depression, factors that also

influence quality of life.

Study description

Background summary

A central issue in psycho-oncology research has long been the prognostic influence of psychosocial factors on cancer. Results showed that psychological factors do not seem to influence the onset of cancer. However, hopelessness and repressive coping did seem to negatively influence the prognosis of cancer. Other psychological factors have not been explored in detail or not at all. Also, little research has focused on the terminally ill, because it was thought that the severity of the illness would override all psychological factors. Statistical analysis, however, can remedy this problem. It is expected that psychological factors will influence the prognosis and wellbeing of terminally ill cancerpatients.

Study objective

To explore the influence of psychological factors - e.g. causal attribution, religiosity, mindfulness, Type D personality, benefit finding, and optimism - on survival, fatigue, depression, and health-related quality of life of stage IIIb/IV lungcancer patients.

Study design

Prospective, longitudinal, questionnaire research

Study burden and risks

Participants will be asked to fill out nine short questionnaires about psychosocial factors and wellbeing.

At baseline/study onset they will fill in all questionnaires and answer some questions about their (medical) background.

After 3 and 6 months participants will fill in questionnaires assessing wellbeing, fatigue, and depression.

These visits will take place during chemotherapy or follow-up visits at the hospital.

After 12 and 18 months patient's vital status will be determined from their medical records.

The burden on the patients will be minimized by shortening the length of the questionnaires and visits as much as possible. Visits could be tiresome for participants.

Contacts

Public

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

diagnosis of stage IIIb/IV lungcancer, being treated in the Jeroen Bosch or St. Elisabeth hospital.

Exclusion criteria

Not speaking sufficient Dutch or English, having a major psychiatric condition at baseline

Study design

Design

Study type: Observational non invasive		
Masking:	Open (masking not used)	
Control:	Uncontrolled	
Primary purpose:	Treatment	

Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	12-03-2007
Enrollment:	100
Туре:	Actual

Ethics review

Approved WMO	
Date:	24-01-2007
Application type:	First submission
Review commission:	METC Brabant (Tilburg)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register CCMO **ID** NL14799.008.06