MYTHS ABOUT PSYCHOLOGICAL SUPPORT

MYTH: I don't need to meet a psycho-oncologist/ psychologist just because I have cancer.

FACT: NOT TRUE. As with all physical health conditions, there is an emotional aspect to adjusting to an illness. Cancer often can have a major impact on one's emotional well-being, and hence meeting a psychologist/psycho-oncologist is often helpful.

Receiving a cancer diagnosis is a distressing and difficult time, that affects the person and family both physically and psychologically. The information received regarding both cancer and its treatment causes major disruptions to daily life. One of the primary roles of a psychologist/psycho-oncologist is to provide professional emotional support that focuses on the distress surrounding cancer and its treatment.

MYTH: I'm always positive and can handle my own emotional problems.

FACT: NOT TRUE. When faced with an unexpected event emotionally and physically, just a positive attitude may not be sufficient to handle emotional distress.

Although having a positive attitude, helps us face challenging situations in general. In overtly distressing times, such as the diagnosis of cancer, the emotional distress is more than can be handled with just a positive attitude to help face the challenges. Seeking help from a trained professional is an additional layer of support that involves understanding and accepting the emotions arising through the cancer treatment that can help you have more control and hence a better overall quality of life.

MYTH: Psychological therapy sessions means 'talk therapy' and I can talk about my problems with anybody.

FACT: NOT TRUE. Although at times psychological therapies are sometimes referred to as 'talking therapies', it actually is a collaborative space to explore your difficulties in a safe and private setting.

Psycho-oncologists use evidence- based interventions in the form of psycho-education (education through principles of psychology), psychological counseling and psychotherapy (specific behavioural interventions based on problem raised) to address the psycho-social concerns of the patient and their families. The interventions are active and engaging, using questions, assessments, and techniques to help patients move towards their goals they have set for themselves.



MYTH: I am a cool and calm person and can handle my emotions well.

FACT: NOT ALWAYS TRUE. When dealing with the diagnosis of cancer and its treatment, this feeling of being a calm person (a state of mind), can change tremendously along with emotional pain and distress.

A diagnosis of cancer can be distressing and emotionally challenging for patients to cope with even if they usually have a calm persona. A person who is perceived to have a calm demeanour does not mean that he/she cannot experience emotional problems at all. Those who know you as a cool and calm person, might also find it hard to accept your state of mind being otherwise. This may make it hard to handle the emotions. To seek help professionally by meeting a psycho- oncologist is to understand and find ways to cope.

MYTH: There is no need for my family to meet the Psycho-oncologist/ psychologist when I have cancer.

FACT: NOT TRUE. Psycho-oncology support is not only for patients but also for caregivers/family.

Evidence suggests that cancer can emotionally affect not only the patient but also their caregivers/family. The process of caregiving can be physically, emotionally, and mentally exhausting. Therefore, psycho- oncological support is encouraged and can benefit families who are going through distressing thoughts and feelings when their loved one is diagnosed with cancer.

MYTH: I have no major concerns and hence don't need to meet a Psycho-oncologist /psychologist.

FACT: NOT TRUE. Psycho-oncological support is recommended for cancer patients dealing with all types and severity of problems be it major or perceived as minor.

Classifying problems whether physical, emotional, social or spiritual for a cancer patient as minor or major may not be appropriate. No problem can be ignored or belittled. A problem that is so called 'minor' or inconsequential for one person can be important and significant for another. Therefore, emotional support is required for any type of problem the patient experiences irrespective of its severity.



MYTH: All cancer patients are depressed.

FACT: NOT TRUE. All cancer patients should not be labelled as depressed.

Research suggests that depression doesn't spring from simply having too much or too little of certain brain chemicals. Rather, there are many possible causes of depression, including faulty mood regulation by the brain, genetic vulnerability, stressful life events, medications, and medical problems. A cancer diagnosis is life-changing, and is a source of considerable psychological and emotional stress. Non-pathological sadness is an acceptable response to a cancer diagnosis.

MYTH: Psychological support in cancer focuses only about thoughts and feelings and does not involve talking about my physical concerns.

FACT: NOT TRUE. The psychological management of a patient with cancer involves a holistic approach which includes discussions relating to physical, spiritual and emotional concerns.

A holistic approach from a psychological perspective in cancer would include discussions relating to the patient/caregiver's concerns in the context of their medical, personal, professional and social situations. Through the exploration of the thoughts, feelings and behaviors of the patient/caregiver, the psycho-oncologist identifies the problem at hand and helps them find effective ways of dealing with their concerns.

MYTH: Getting psychological help during cancer shows I am emotionally weak.

FACT: NOT TRUE. Seeking professional help shows courage and the acceptance that you want yourself to get better.

Availing psychological therapy is, in fact, an indication of emotional maturity, an indication that a person can accept that he or she needs the help or guidance of another and is willing to do what is necessary to take care of himself/herself. It shows a positive attitude towards holistic healing.



MYTH: My emotional issues can be solved in one session/consultation.

FACT: NOT TRUE. Emotional issues need more than one session over a specific period of time depending on the severity of the concerns. The sessions follow a structured approach to help patients/caregivers.

Many concerns may be discussed in the first meeting and patients/caregivers report feeling better to an extent, but this is often temporary. Since we know that acceptance and change is a gradual process we encourage follow-up sessions in order to achieve the goals which are set so as to help patients/caregivers experience long-lasting betterment in emotional outcomes.

MYTH: Only adults have emotional concerns and need help during cancer.

FACT: NOT TRUE. Psychological support can be provided and availed by all age groups.

Irrespective of the age of the patient/caregiver whether adult/child, psychological support is vital and can be tailor-made to suit individual needs.

