Original Article

Efficacy of Short-Term Life-Review Interviews on the Spiritual Well-Being of Terminally Ill Cancer Patients

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Abstract

Context. There is a little information about effective psychotherapies to enhance the spiritual well-being of terminally ill cancer patients.

Objectives. The primary aim of the study was to examine the efficacy of a one-week Short-Term Life Review for the enhancement of spiritual well-being, using a randomized controlled trial. The secondary aim was to assess the effect of this therapy on anxiety and depression, suffering, and elements of a good death.

Methods. The subjects were 68 terminally ill cancer patients randomly allocated to a Short-Term Life-Review interview group or a control group. The patients completed questionnaires pre- and post-treatment, including the meaning of life domain from the Functional Assessment of Chronic Illness Therapy-Spiritual (FACIT-Sp) scale, the Hospital Anxiety and Depression Scale (HADS), a numeric scale for psychological suffering, and items from the Good Death Inventory (Hope, Burden, Life Completion, and Preparation).

Results. The FACIT-Sp, Hope, Life Completion, and Preparation scores in the intervention group showed significantly greater improvement compared with those of the control group (FACIT-Sp, $P < 0.001$; Hope, $P < 0.001$; Life Completion, $P < 0.001$; and Preparation, $P < 0.001$). HADS, Burden, and Suffering scores in the intervention group also had suggested greater alleviation of suffering compared with the control group (HADS, $P < 0.001$; Burden, $P < 0.007$; Suffering, $P < 0.001$).

Conclusion. We conclude that the Short-Term Life Review is effective in improving the spiritual well-being of terminally ill cancer patients, and alleviating psychosocial distress and promoting a good death. J Pain Symptom Manage

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Psychotherapy, Short-Term Life Review, terminally ill cancer patients, spiritual well-being, randomized control trial, good death

Introduction

Palliation of psycho-existential suffering in terminally ill cancer patients is of great importance because it is related to quality of life, good death, depression,[1] desire for a hastened death, hopelessness, and suicidal ideation.[2] It has been reported that 17% of patients have a strong desire for a hastened death, and 16% of patients met criteria for a major depressive episode.[3] Desire for a hastened death was significantly associated with clinical depression and hopelessness. Many studies have explored effective strategies to alleviate psycho-existential suffering based on concepts such as dignity, meaning, and demoralization.[4–7] A recent single-arm preliminary trial in Canada suggested that Dignity Therapy[4,5] is promising for alleviating psycho-existential suffering of terminally ill cancer patients, but no intervention of this type has been confirmed to be effective.

In Japan, a multidisciplinary professional task force has been established to develop a clinical strategy for psycho-existential suffering of terminally ill cancer patients, and this group first proposed a conceptual framework for psycho-existential suffering based on a theoretical model and a "good death" survey.[8] We defined psycho-existential suffering as pain caused by extinction of being and meaning of self through loss of relationships with others, loss of autonomy, or loss of a future. In this model, psycho-existential suffering has the sense of meaning as a core concept, and includes seven subdomains (relationship, control, continuity of self, burden to others, generativity, death anxiety, and hope). We tested the efficacy of reminiscence therapy for alleviation of psycho-existential suffering, initially through exploration of the feasibility and efficacy of four-week formal reminiscence therapy in terminally ill cancer patients.[9] This study demonstrated a positive effect on spiritual well-being,[10] but about 30% of the enrolled patients did not complete the study because of rapid physical deterioration. We then developed a novel psychotherapy, the Short-Term Life Review, comprising two sessions over one week, and explored its feasibility and efficacy using a pre/post study design.[11] The results were promising: the completion rate was 83%, and there was a significant increase in the sense of meaning, as measured by the Functional Assessment of Chronic Illness Therapy-Spiritual (FACIT-Sp) scale.[12]

In the current randomized controlled trial, our goal was to confirm the efficacy of the Short-Term Life Review to enhance the sense of meaning in terminally ill cancer patients. The secondary aim was to investigate the effects of the Short-Term Life Review on anxiety and depression and on elements of a good death (Hope, Burden, Life Completion, and Preparation).

Patients and Methods

Participants

The participants were cancer patients from the palliative care units (PCUs) of two general hospitals in Western Japan. The same kind of care was delivered in these two hospitals, with a multidisciplinary team including a pastoral care worker. The inclusion criteria were as follows: 1) incurable cancer, undergoing treatment in the PCU (the duration in the PCU was between two and four weeks), 2) ability to communicate, and 3) age >20 years old. The exclusion criteria were as follows: 1) severe pain or physical symptoms diagnosed by the primary doctor, 2) cognitive impairment such as dementia or consciousness disturbance, and 3) difficult family problems, such as problems with regard to inheritance of property, conflicts about the patient funeral among family members, and the reconciliation of past troubles between the patients and their