

for the integration of peer support into cancer care prove to be relevant and valuable in practice.

P_32-39 | Dyadic adjustment, dyadic coping and psychological wellbeing in couples facing breast cancer: individual and dyadic outcomes

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Background/rationale or Objectives/purpose: Breast cancer not only involves the patients but it also influences their dyadic relationships and psychological wellbeing. In fact, marital and romantic couples are thought to face breast cancer as a total and dynamic unit. The aim of the present study is to explore the relationship between dyadic adjustment, dyadic coping, and psychological wellbeing in couples facing breast cancer. The literature has already confirmed the importance of dyadic adjustment and dyadic coping for the individual adjustment in healthy couples, but only a few preliminary studies have extended such investigation in the psycho oncological context.

Methodology or Methods: A group of 19 women with a history of breast cancer (I-II stages or survivors) and their male healthy partners participated in the study. The mean age of participants was 26 years. Their average educational level was high school. Their relationships lasted from 3 to 42 years. All participants completed the following self-report questionnaires: Hospital Anxiety and Depression Scale (HADS), Dyadic Adjustment Scale (DAS), and Dyadic Coping Questionnaire (DCQ). Data collection is still ongoing.

Impact on practice or Results: A statistically significant positive correlation between dyadic adjustment and dyadic coping emerged ($p < .01$). Comparing DAS scores of participants with normative data of healthy couples, patients and their partners showed lower levels of dyadic adjustment, in particular in the dyadic satisfaction subscale. Patients' partners showed good levels of dyadic cohesion, consensus, and emotional expression, but low dyadic satisfaction. Patients' caregivers exhibited higher levels of anxiety than the ill partners did.

Discussion or Conclusions: In psycho-oncology, interventions should be focused not only on patients but also on patients' partners, when present, and on the couple as a unit. These interventions could be profitably addressed to increase both partners' skills to cope with breast cancer and, at the same time, to ameliorate their dyadic satisfaction.

P_32-40 | Comparison of alexithymia levels in women with breast cancer: do gender, relationship status, and age influence the expression of feelings and suffering in patients and their caregivers?

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Background/rationale or Objectives/purpose: Alexithymia (i.e., the inability to identify and express emotions) has been associated with chronic pain and medical illness including breast cancer. The purpose of the present study is to investigate alexithymia levels in women with breast cancer, and their caregivers when present, as related to relationship status, age, and gender of respondents.

Methodology or Methods: we administrated the HADS (Hospital Anxiety and Depression Scale), TAS- 20 (Toronto Alexithymia Scale), DAS (Dyadic Adjustment Scale), and Dyadic Coping Questionnaire to a group of women with a history of breast cancer, and to their healthy

“romantic” partners, when present. The cross-section data collection includes women of all ages and all stages of breast cancer.

Impact on practice or Results: in a pilot study, we found that caregivers have higher levels of alexithymia than women with breast cancer. Therefore, we expect to replicate this finding, observing higher levels of alexithymia in male caregivers than ill women, both single and involved in a relationship.

Discussion or Conclusions: psychosocial interventions in psycho-oncology should be focused not only on ill women, but also on couples and, in particular, on their male caregivers; those interventions should aim to increase emotional disclosure and prevent a spectrum of hidden morbidities. Anyway, it could be useful to improve psychological services for women without a relational partner, in the form of individual or group therapy, to give them the opportunity to share their feelings and suffering about this illness.

P_32-41 | Primary brain tumor representation in the posttraumatic growth literature: A systematic review

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Background/rationale or Objectives/purpose: Posttraumatic Growth (PTG) refers to the positive psychological changes following a traumatic event, including a cancer diagnosis. Patients with primary brain tumors (PBTs) may uniquely experience PTG due to the certainty of disease progression and lack of curative treatments. To better understand this vulnerable population's experience, we conducted a thorough examination of the PTG oncology literature.

Methodology or Methods: A systematic literature review was conducted across PubMed, CINAHL, and PsycINFO. Studies were included if they were peer-reviewed, used a quantitative measure of PTG, sampled adult cancer populations, and provided a cancer diagnosis breakdown. Articles were double coded for inclusion.

Impact on practice or Results: We initially screened 7,104 s and 430 articles underwent full-text review; 309 studies met inclusion criteria. Of the 69,963 cancer patients in these studies, 1.27% had a diagnosis of PBT. Studies excluded PBT patients due to focusing on specific cancer populations (e.g., breast cancer), ongoing treatment, or suspected cognitive impairment. Only seven studies included PBT patients; five were in mixed cancer samples. Two studies focused exclusively on PBT but limited their samples to low-grade glioma patients.

Discussion or Conclusions: The study of PTG in patients with PBT is in its nascence, with the existing literature focused on patients with low-grade gliomas. This represents a significant gap and prevents clinicians from assessing risk and providing evidence-based treatment to promote resilience and quality of life in the broad spectrum of neuro-oncology. Future studies examining homogeneous PBT samples and/or high-grade PBT patients, including demographic and disease-related determinants are warranted.

P_32-42 | Relationship between posttraumatic growth and help-seeking behavior in use of psychosocial support services among cancer patients

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This study aimed to examine the relationship between posttraumatic growth (PTG) and help-seeking behavior (HSB). Cancer patients who