Baseline Anxiety Impacts Adjustment to Cancer

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omen who feel chronic anxiety or who suppress anxiety in daily life are more likely to be traumatized by a diagnosis of breast cancer, compared with women who are generally less anxious, reported Yumi Iwamitsu, Ph.D., of Kitasato University, Kanagawa, Japan, and colleagues.

The investigators examined the differences in emotional responses among 21 women who had received a diagnosis of breast cancer and 72 women who had benign tumors. Their mean age was 46 years.

Each of the women completed the Profile of Mood States (POMS), the Cour-

MRI Predicts Breast Cancer Response to Neoadjuvant Tx

SAN ANTONIO — Contrast-enhanced MRI shows promise as a predictive tool for deciding a priori whether neoadjuvant therapy is going to work in patients with locally advanced breast cancer, Oana I. Craciunescu, Ph.D., said at a breast cancer symposium sponsored by the Cancer Therapy and Research Center.

The predictive power of this technique stems from the fact that pretreatment gadolinium-enhanced MRI is capable of



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DR. CRACIUNESCU

extracting information about tumor vascularity, permeability, and cellularity that correlates with response to neoadjuvant chemotherapy and hyperthermia, explained Dr. Craciunescu of Duke University, Durham, N.C.

The novel imaging modality takes 30 minutes after bolus injection of the contrast agent. During that time, tumor gadolinium uptake and washout rates are assessed to generate morphophysiologic maps of the malignancy, that are converted into predicted treatment response scores.

Studying actual neoadjuvant therapy outcomes in 20 patients with locally advanced breast cancer who were in a clinical trial in which they underwent four cycles of neoadjuvant chemotherapy and hyperthermia, followed by surgery, the MRI-based scoring system had 91% sensitivity and 89% specificity for predicting neoadjuvant treatment response. Nine of 11 patients with a score of 2-5 were responders, compared with 1 of 9 patients having a score of 0-1 in the study sponsored by the National Cancer Institute.

—Bruce Jancin

tauld Emotional Control Scale, and the Manifest Anxiety Scale during a first visit to an outpatient clinic for a breast biopsy (Psychosomatics 2005;46:19-24). The women completed the POMS again after a second visit at which they learned the biopsy results.

Both the breast cancer patients and the benign tumor patients were assigned to either low anxiety or high anxiety subgroups based on the Manifest Anxiety Scale scores, and either negative emotion suppression or negative emotion expression groups based on the Courtauld Emotional Control Scale scores. The researchers compared the POMS scores before and after the biopsy results among the eight subgroups.

Among the women with breast cancer, the total mood disturbance scores were significantly higher among those in the high anxiety subgroup than in the low anxiety subgroup. Those scores were higher in the negative emotion suppression group

than in the negative emotion expression group.

Among women with benign tumors, those in the high anxiety subgroup showed higher overall total mood disturbance scores at the first visit, compared with women in the low anxiety subgroup. In addition, the total mood disturbance scores in the negative emotion expression group were not significantly different between the first and second clinic visits, regardless of the diagnosis.

