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THE IMPACT OF RE-TRAUMATISATION ON CANCER PATIENTS WITH A HISTORY OF CHILDHOOD MALTREATMENT: A CRITICAL REVIEW

Childhood maltreatment and cancer are two distinct phenomena that may be experienced as traumatic events. The literature is rife with information on the adverse psychological and emotional effects of childhood maltreatment and cancer as separate phenomena; however, there is limited research on the psychological and emotional impact of cancer in patients with a history of childhood maltreatment. This research sought to investigate how re-traumatisation from a cancer diagnosis can psychologically and emotionally impact patients with a history of childhood maltreatment.

A critical review of fifteen published papers was carried out. These papers simultaneously investigated cancer and childhood maltreatment and were derived from Embase, Ovid MEDLINE, Global Health, and APA PsycInfo databases. Articles were deemed to fit into this review's definition of childhood maltreatment if they investigated either one or a combination of physical/emotional/sexual abuse and/or neglect. The critical review was split into two: the first part, 'Synoptic Project 1,' provides an overview of findings from these studies and ethical considerations, whereas the second part, 'Synoptic Project 2,' focuses on the methodological and analytical techniques used in these studies.

Results showed that the large majority of research conducted in this area is cross-sectional, quantitative, and consists of homogenous samples. Initial research suggests that cancer patients with a history of childhood maltreatment may experience re-traumatisation through re-emerging negative feelings or through recalled memories precipitated by triggers from cancer treatment procedures. Furthermore, research indicates that these individuals have lower levels of well-being, more stress and depression symptoms, reduced perceived support, and increased fatigue compared to cancer patients without a history of childhood maltreatment. For these reasons, this

population is highly vulnerable and ethical research should uphold the principles of beneficence and non-maleficence.

Ultimately, the scientific literature available is insufficient to determine how re-traumatisation psychologically and emotionally impacts cancer patients with a history of childhood maltreatment, although initial research indicates that re-traumatisation has a negative psychological and emotional impact. More scientific, detailed, and exploratory qualitative research is required to understand relevant triggers, psychological and emotional states, and the needs of such patients. Such research is vital for clinicians to provide evidence-based and trauma-informed care to this vulnerable and unique population.