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The Experience of Imagery as a Post-Treatment Intervention in Patients With Breast Cancer: Program, Process, and Patient Recommendations

Lyn Freeman, PhD, Lorenzo Cohen, PhD, Mary Stewart, MD, Rebecca White, MD, Judith Link, RN, J. Lynn Palmer, PhD, Derek Welton, Lisa McBride, BS, and Carl M. Hild, PhD

Purpose/Objectives: To better understand the common themes of women participating in an imagery program designed to improve quality of life (QOL).

Research Approach: Qualitative.

Setting: Classroom setting at Alaska Regional Hospital in Anchorage.

Participants: 10 women with a confirmed diagnosis of breast cancer who had completed conventional care participated in a six-class, eight-week-long imagery program titled *Envision the Rhythms of Life*® (ERL).

Methodologic Approach: Focus group audio recordings and notes were interpreted with the Krueger focus group method and confirmed by an outside evaluator.

Main Research Variables: Breast cancer survivors' descriptions of imagery practice and experience as they created passive, active, and targeted imagery.

Findings: Participants reported the importance of engaging passive and active imagery, letting targeted imagery take on a life of its own, performing homework, understanding the science, practicing, hearing imagery stories, engaging all the senses, trusting imagery, and group interaction. Imagery practice improved mood state.

Conclusions: When delivered by expert imagery trainers in collaboration with oncology nurses, ERL can improve breast cancer survivors' QOL. The present study is one of few reports that evaluated survivors' imagery experiences from a clinical trial and produced significant QOL improvements.

Interpretation: The present study provides oncology nurses understanding of the psychological risks faced by breast cancer survivors after completion of primary care and explains the critical need for post-treatment programs for survivors dealing with post-traumatic stress disorder, depression, anxiety, or high levels of stress.

In 2006, a report on the quality of life (QOL) of cancer survivors revealed a population of more than 10 million survivors in the United States. Women with a history of breast cancer were the largest group of survivors, comprising 22% of the population. The survivors remain largely understudied and lost to follow-up (Hewitt, Greenfield, & Stovall, 2006).

Three trends emerged from Hewitt et al.'s (2006) report: Cancer can become a chronic condition that must be managed for a lifetime; although life is preserved, many survivors suffer

Key Points . . .

- ▶ After completing primary care, many cancer survivors suffer late- and long-term effects of their cancer treatments, which negatively affect psychological, social, vocational, and spiritual well-being as well as quality of life (QOL).
- ▶ Psychological dysfunction and low QOL can affect physical health, including immune function.
- ▶ Clinically tested imagery programs can significantly improve QOL and psychological well-being.

Lyn Freeman, PhD, is the president of Mind Matters Research in Anchorage, AK, and an executive faculty member at Saybrook Graduate School in San Francisco, CA; Lorenzo Cohen, PhD, is the director of the integrative medicine program and chief of the section of integrative medicine at the University of Texas M.D. Anderson Cancer Center in Houston; Mary Stewart, MD, is a practicing oncologist and the owner of Alaska Oncology and Hematology, LLC, in Anchorage; Rebecca White, MD, is a family physician and the owner of Arctic Skye Family Medicine in Palmer, AK; Judith Link, RN, is a program director in the cancer center at Alaska Regional Hospital in Anchorage; J. Lynn Palmer, PhD, is a biostatistician in the Department of Symptom Control and Palliative Care at M.D. Anderson Cancer Center; Derek Welton is the chief technical officer and Lisa McBride, BS, is a research professional, both at Mind Matters Research; and Carl M. Hild, PhD, is an associate professor and director of the Health Service Administration Program at Alaska Pacific University in Anchorage. This research was supported by a grant from the National Cancer Institute (1R43CA117597-01). Freeman is the owner and Cohen is a consultant of Mind Matters Research; Stewart and Link were compensated for their participation with money from the grant. Mention of specific products and opinions related to those products do not indicate or imply endorsement by the Oncology Nursing Forum or the Oncology Nursing Society. (Submitted October 2007. Accepted for publication January 31, 2008.)

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