

The Experiences of Young Adults With Hodgkin Lymphoma Transitioning to Survivorship: A Grounded Theory Study

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Matheson, Boulton, Lavender, and Watson contributed to the conceptualization and design and provided the analysis. Matheson completed the data collection, and Collins and Mitchell-Floyd assisted with recruitment. All authors contributed to the manuscript preparation.

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Purpose/Objectives: To explore the experiences of young adults with Hodgkin lymphoma during the first year following the end of initial treatment.

Research Approach: A qualitative grounded theory study.

Setting: Interviews with patients recruited from three cancer centers in England.

Participants: 10 Hodgkin lymphoma survivors (four men and six women aged 21–39 years) recruited as part of a larger study of 28 young adult cancer survivors.

Methodologic Approach: Semistructured interviews were conducted about two months after treatment completion, and follow-up interviews were conducted seven months later. The authors' grounded theory of positive psychosocial adjustment to cancer provided the conceptual framework.

Findings: Positive reframing, informal peer support, acceptance, and normalization helped young adults dismantle the threats of Hodgkin lymphoma during the course of treatment. However, they described losing a sense of security following treatment completion. Greater age-specific information to enable better preparation for the future was desired regarding body image, fertility, sexual relationships, work, and socializing.

Conclusions: Informal support mechanisms, like peer support and patient navigator interventions, may be useful ways to further support young adults after treatment completion.

Intepretation: Positive psychosocial adjustment to cancer survivorship in young adults is facilitated by having informal peer support; being able to positively reframe, accept, and normalize their experience; and being prepared for the future.

Young adult cancer survivors have unique experiences, needs, and challenges dependent on their age and diagnosis (Hall et al., 2012; Zebrack, 2009; Zebrack & Isaacson, 2012). Cancer can disrupt normal life stages, such as finding a partner, establishing independence, finishing education, starting a family, and gaining employment (Grinyer, 2009; Zebrack, 2011). Young adult cancer survivors may also have specific concerns and needs regarding appearance and body image, identity development, and long-term future health (Bellizzi et al., 2012; Kelly & Gibson, 2008; Zebrack, 2011; Zebrack & Isaacson, 2012). Greater levels of psychological distress have been shown in young adult survivors compared to older survivors (Costanzo et al., 2007; Costanzo, Ryff, & Singer, 2009; Kwak et al., 2013; Parker, Baile, de Moor, & Cohen, 2003); therefore, young adults require specific interventions from the oncology nurse (Adams et al., 2011; Hall et al., 2012; Zebrack, 2009; Zebrack & Isaacson, 2012).

The transition from initial treatment completion—commonly a course of 4–6 monthly cycles of cytotoxic chemotherapy treatment—to follow-up care can be