

Empowering Cancer Patients: Mindfulness and Breathing Strategies for Enhanced Well-being

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Abstract

This paper explores the efficacy of mindfulnessbased interventions (MBIs) and breathing techniques as alternative modalities for improving the wellbeing of cancer patients. A comprehensive review of literature was conducted in which the clinically significant findings from various clinical trials and observational studies were reported. Herein, the results indicate that MBIs, including mindfulnessbased stress reduction (MBSR) and mindfulnessbased cognitive therapy (MBCT), demonstrate promising outcomes in reducing psychological distress, anxiety, and depression among cancer patients. Similarly, breathing techniques such as pranayama and deep diaphragmatic breathing have shown to alleviate symptoms of fatigue and improve sleep and quality of life. Studies also highlight the potential use of these interventions in enhancing emotional well-being, stress management, and overall quality of life for cancer patients. While the existing evidence downplays the importance of integrating MBIs and breathing techniques into standard cancer care protocols, further research is warranted to establish their long-term efficacy and safety across diverse cancer populations. Moreover, the need for objective data standardized across clinical trials to present clinically significant outcomes remains. By addressing these research gaps and incorporating evidence-based integrative approaches, such as MBIs and breathing techniques, into clinical practice, healthcare providers can empower cancer patients to actively participate in their healing journey and improve their overall quality of life.

Keywords: mindfulness-based interventions, breathing techniques, cancer patients, quality of life, integrative medicine

Introduction

- Cancer diagnosis brings significant challenges, including adverse effects from treatments like chemotherapy, and psychological distress such as depression and anxiety.
- This paper explores alternative modalities, specifically mindfulness-based interventions (MBIs) and breathing techniques, to improve the quality of life for cancer patients.

Mindfulness-Based Interventions

Mindfulness-Based Stress Reduction

- Sitting meditation
- Body scan
- Yoga
- Mindful Walking

Mindfulness-Based Cognitive Therapy

- Daily mindfulness practices
- Mindfulness of breath
- Cognitive behavioral techniques
- Group discussions



Breathing Techniques

- Pranayama
- Diaphragmatic breathing
- Papworth method
- Pursed lips breathing

Methodology

- Utilized PubMed and Embase databases for literature review up to September 2023, focusing on clinical studies involving cancer patients and MBIs or breathing techniques.
- Inclusion criteria included peer-reviewed clinical studies on humans reporting performance or safety outcomes.

Results

Table 1. Difference in Change Scores and Standardized Effect Sizes (95% CIs) for Primary and Secondary Outcome Variables (Bower et al., 2021)

Outcome Variable	Postintervention		
	Difference in Change Scores	Р	Standardized Effect Size
Primary outcome			
Depressive symptoms (CES-D)			
MAPs v WLC	-4.7 (-7.5, -1.9)	.001	-0.47 (-0.75, -0.19)
SE v WLC	-4.0 (-6.9, -1.1)	.007	-0.40 (-0.69, -0.11)
Secondary outcomes			
Fatigue (FSI)			
MAPs v WLC	-0.9 (-1.4, -0.4)	< .001	-0.55 (-0.85, -0.25)
SE v WLC	-0.2 (-0.7, 0.3)	.426	-0.13 (-0.44, 0.19)
Insomnia (ISI)			
MAPs v WLC	-2.1 (-3.5, -0.6)	.006	-0.33 (-0.57, -0.09)
SE v WLC	-0.8 (-2.3, 0.7)	.297	-0.13 (-0.37, 0.11)
Vasomotor symptoms			
MAPs v WLC	-0.2 (-0.5, 0.0)	.102	-0.19 (-0.41, 0.04)
SE v WLC	-0.2 (-0.5, 0.1)	.225	-0.14 (-0.38, 0.09)

MAP: Mindful Awareness Practices, SE: Survivorship Education

Table 2. Mean (A) cortisol and (B) IL-6 levels before and after delivery of the MBSR(BC) program on Weeks 1 and 6. (Lengacher, 2019)



MBSR(BC): Mindfulness-based stress reduction for breast cancer

Discussions

- The findings support the integration of MBIs and breathing techniques into cancer care to empower patients and enhance their quality of life.
- While current evidence is promising, further research is necessary to establish long-term efficacy and safety, and to standardize these interventions across diverse cancer populations.

Limitations

- Generalizability: The majority of studies focused on breast cancer patients, which may limit the applicability of findings to other cancer types.
- Study Design: Many studies reviewed were observational with small sample sizes, potentially affecting the strength of the evidence.
- Stage of Cancer: Lack of categorization by cancer stage in the literature reviewed could introduce bias if most patients were in early stages.
- Long-Term Efficacy: The long-term efficacy and safety of these interventions are not yet established, emphasizing the need for larger, randomized controlled trials.
- Variability in Interventions: There is considerable variability in how mindfulness and breathing interventions are implemented, which may affect outcomes.
- Self-Reporting Bias: Many studies rely on selfreported measures of well-being, which could introduce subjective bias.

Conclusions

Mindfulness practices and breathing exercises represent accessible, nonpharmacological interventions that can empower patients through their cancer journey, fostering improved well-being.

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