

ARTICLES

Depression in Men With Prostate Cancer

Gerald Bennett, PhD, APRN, FAAN, and Terry A. Badger, PhD, APRN, BC, FAAN

Purpose/Objectives: To summarize the current empirical knowledge base on depression in men with prostate cancer to inform psychosocial supportive care interventions for this population and chart directions for future research.

Data Sources: Reports in English of quantitative studies that included measures of depression or mood in samples of men with prostate cancer published from 1988–2004.

Data Synthesis: Nurse researchers are playing a key role in establishing the scientific knowledge base upon which a better understanding of the relative importance of depression in men with prostate cancer will emerge. This review indicates that (a) predictable risk factors exist for depression among men with prostate cancer, (b) different prostate cancer treatments do not tend to be associated with differential outcomes in depression or mood, and (c) overall, men with prostate cancer report fewer depressive symptoms than women with breast cancer.

Conclusions: The small body of research addressing depression in men with prostate cancer is methodologically inadequate to estimate the overall prevalence of depression among men with prostate cancer and determine the clinical significance of psychoeducational interventions targeting depression or mood in this population.

Implications for Nursing: Nurses can use current knowledge to identify men with prostate cancer who are most at risk for depression. Evidence supporting the benefit of psychoeducational interventions for depression in other cancer populations (e.g., women with breast cancer) may be applicable to men with prostate cancer.

Key Points . . .

- ▶ The number of studies focused on depression in men with prostate cancer is small in comparison to similar studies conducted with a focus on women with breast cancer.
- ▶ Men with prostate cancer most at risk for depressive symptoms include those with advanced disease, prominent cancer symptoms and side effects of treatment, and a history of clinical depression.
- ▶ Shortcomings in the empirical knowledge concerning depression in men with prostate cancer are being addressed by a marked increase in research beginning in the mid-1990s.

functioning. As a result, in addition to mortality concerns, men with prostate cancer are at risk for psychological distress (Kunkel, Bakker, Myers, Oyesanmi, & Gomella, 2000). The prevalence of psychological distress in this population has been reported as high as 31% (Zabora, Brintzenhofesoc, Curbow, Hooker, & Piantadosi, 2001). The clinical significance of psychological distress, particularly depression, experienced by men with prostate cancer has yet to be addressed adequately in the research literature. Few studies have empirically examined the prevalence of depression in men with prostate cancer. Similarly, few experimental studies have tested the effectiveness of interventions targeting depression or mood as outcomes. Although the literature is sparse, a need exists to organize the available research to chart the direction for future investigations. The purpose of this article is to provide a comprehensive summary of the existing empirical knowledge base on depression in men with prostate cancer. Implications for future research will be presented based on an analysis of the strengths and weaknesses of the existing literature.

Gerald Bennett, PhD, APRN, FAAN, is an associate professor and chair in the Department of Health Environments and Systems in the School of Nursing at the Medical College of Georgia in Augusta. Terry A. Badger, PhD, APRN, BC, FAAN, is a professor and interim director in the Division of Nursing Systems in the College of Nursing at the University of Arizona in Tucson. (Submitted May 2004. Accepted for publication August 3, 2004.)

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Prostate cancer is the most common potentially life-threatening cancer among men in the United States, with African American men having the highest prostate cancer rates in the world (Stanford et al., 1999; U.S. Cancer Statistics Working Group, 2002). Prostate cancer ranks second to lung cancer as the most common cause of cancer death among U.S. men across all racial and ethnic populations (American Cancer Society, 2005; Howe et al., 2001). Although incidence rates have been declining since 1993, the number of men and their significant others affected by prostate cancer and its diagnosis and treatment is increasing. This trend is the result of the combined impact of widespread adoption of prostate-specific antigen screening, increased survival rates, and the overall growth and aging of the U.S. population (Edwards et al., 2002). An estimated 232,090 new prostate cancer cases and 30,350 deaths are expected in 2005 (American Cancer Society).

Prostate cancer symptoms and side effects of treatment may include pain, fatigue, and impairment in urinary and sexual