# Depression Burden, Self-Help Interventions, and Side Effect Experience in Women Receiving Treatment for Breast Cancer

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**Purpose/Objectives:** To describe effects of a set of Self-Help Intervention Project (SHIP) interventions with self-reported depression burden on the side effect experience of women receiving treatment for breast cancer.

**Design:** Repeated measures, experimental design.

**Setting:** Outpatient sites at a regional cancer center, private practices, and health maintenance organizations.

**Sample:** 169 women who completed data at all three data-collection points were used to answer the research questions.

**Methods:** Following random assignment, individuals in the treatment group participated in five different, but complementary, self-help interventions for six weeks. The control group received the usual care. Variables were measured at baseline after radiation, chemotherapy, or hormone therapies were started to allow for the side effects to emerge at six to eight weeks after treatment and three months following time 2.

**Main Variables:** Depression burden, fatigue burden, pain burden, nausea burden, difficulty concentrating burden, anxiety burden, number of side effects, severity of side effects, and participation in the interventions.

**Findings:** Self-reported depression burden was found to significantly influence severity of side effects, number of side effects, and the burdens of fatigue, difficulty concentrating, and anxiety. Depression burden did not significantly influence the side effect burdens of nausea or pain. Depression burden interacted with the self-help interventions over time for the side effect of fatigue, but the intervention effect on pain burden and nausea burden was not influenced by depression burden over time. No significant intervention effects were found for the burden of difficulty concentrating or anxiety, the number of side effects, or perceived severity of side effects. The interventions significantly reduced the fatigue, pain, and nausea burden in women with breast cancer.

**Conclusions:** The interventions were particularly helpful, relative to their fatigue experience, for women reporting a high level of depression burden. Findings also contribute to conceptual clarification of essential aspects of the side effect experience and provide a basis for measure and intervention refinement.

**Implications for Nursing Practice:** Every woman who is undergoing cancer treatment should be assessed for depression and depression burden. Self-help interventions are effective and convenient treatments that reduce side effects and promote quality of life in women with breast cancer.

## Key Points . . .

- Depression and depression burden should be part of the assessment protocol of every woman who is undergoing cancer treatment.
- Depression burden exacerbates the side effect experience.
- Women with breast cancer benefit from and should be provided oncology support interventions to strengthen uncertainty management and enhance enabling skills.

In 2001, about 192,200 women will be diagnosed with breast cancer (Greenlee, Hill-Harmon, Murray, & Thun, 2001), and 1 in 8 women will develop breast cancer during her lifetime. A significant number of these women will report burdensome side effects associated with their cancer experience that significantly will affect cancer recovery and quality of life (QOL) (Longman, Braden, & Mishel, 1996). Symptom distress is a key variable in predicting or explaining health outcomes in patients with cancer, and managing these burdensome side effects is critical in clinical practice (McCorkle, 1987). Yet, understanding about how to intervene with an array of side effects and document intervention outcomes remains poor (Simonton & Sherman, 1998). This study contributes to the continuing conceptual clarification of the essential aspects of the side effect experience that was remedied by a community-based oncology support program. It also provides a start for the development of reliable, valid, and sensitive outcome measures indexing specific aspects of the side effect experience and establishes a basis for further intervention

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