The psychosocial impact of predictive genetic testing has attracted attention in recent years. The focus of this column is to present topics of interest from a variety of journals to Oncology Nursing Forum readers. The topic of this issue is psychosocial dimensions of oncology care.

Psychosocial Impact of Predictive Genetic Testing: Present and Future Challenges

In commemoration of the 100th anniversary of the hypothesis reported by Warthin (1913) that identified an inherited component of colorectal and gynecologic cancer, Bleiker, Esplen, Meiser, Petersen, and Patenaude (2013) wrote a clinical review of the psychosocial implications of genetic testing for Lynch syndrome (LS) and the potential impact on clinical outcomes. LS is recognized as the most common hereditary colorectal syndrome. It was first reported in 1968 by Lynch and Krush, and it currently accounts for 1%–3% of all cases of colorectal cancer. Before Lynch and Krush’s (1968) report, an earlier description by Krush, Lynch, and Magnuson (1965) described an increased level of fear within families that had multiple members diagnosed with cancer.

The article by Bleiker et al. (2013) is a review of psycho-oncogenetics, which is the clinical blend of psychology, oncology, and genetics. The review addresses the psychosocial implications of genetic mapping in the high-risk population of people with LS and the implications of genetic testing in general. Studies report the prevalence of distress (e.g., anxiety, depression) ranging from 6%–30% in individuals undergoing genetic counseling for colorectal cancer (Bleiker et al., 2007). Reasons for declining genetic counseling include concerns about health insurance, cost of counseling, adverse emotional impact, low anticipated benefit, and time commitment. The psychosocial impact of genetic testing on self-concept (i.e., commitment. The psychosocial impact and the profound impact on quality of life as well as ethical, social, and emotional well-being of patients and their families.

Bleiker, E.M., Meiser, B., Petersen, H.V., & Patenaude, A.F. (2013). The comprehensive review by Romito, Goldzweig, Cormio, Hagedoorn, and Andersen (2013) focused on caregiving by informal caregivers (i.e., family members and close friends) for adult patients with cancer and survivors in the United States and Europe. The literature review was derived from the PubMed and Web of Knowledge databases. The authors determined that no universal definition exists for what constitutes a caregiver. The dimensions of caregiving include psychological support, meal preparation, and living with a patient with cancer. All of those tasks have contributed to the varied definitions of caregiving. The American Cancer Society’s National Quality of Life Survey for Caregivers defined a caregiver as a family-like individual, chosen by the patient, as the one individual providing consistent help (Kim, Spillers, & Hall, 2012).