

The Relationship Between Colorectal Cancer Survivors' Positive Psychology, Symptom Characteristics, and Prior Trauma During Acute Cancer Survivorship

Sameena F. Sheikh-Wu, PhD, BA, BSN, RN-BC, Debbie Anglade, PhD, RN, MSN, CPHQ, CCM, Karina A. Gattamorta, PhD, Canhua Xiao, PhD, RN, FAAN, and Charles A. Downs, PhD, ACNP-BC, FAAN

OBJECTIVES: To examine colorectal cancer survivors' positive psychology and symptom characteristics, and to assess for potential impact of prior trauma on these relationships during acute cancer survivorship.

SAMPLE & SETTING: A cross-sectional study of 117 colorectal cancer survivors was conducted at a National Cancer Institute–designated cancer center.

METHODS & VARIABLES: Participants completed a demographic questionnaire, and the Carver Benefit Finding Scale and Posttraumatic Growth Inventory assessed positive psychology. Descriptive statistics and multiple linear regression analyses were performed.

RESULTS: 49 symptoms were reported and varied based on prior trauma. Significance was found between positive psychology and symptom frequency ($p < 0.001$); symptoms reported almost daily and daily were inversely related to positive psychology.

IMPLICATIONS FOR NURSING: Nurses should prioritize symptoms; less frequent symptoms improve positive psychology. Early identification of positive changes may promote survivors' self-awareness and management skills to mitigate adverse symptoms.

KEYWORDS benefit finding; colorectal cancer; health-related outcomes; post-traumatic growth
ONF, 50(1), 115–127.

DOI 10.1188/23.ONF.115-127

Colorectal cancer (CRC), a cancer of the digestive tract, colon, or rectum, is the fourth most common cancer (about 1.9 million cases per year) and the third leading cause of cancer-related deaths globally (American Cancer Society, 2021; National Cancer Institute, 2021; Siegel et al., 2019). Data show that CRC cases are increasing, particularly among individuals aged 20–50 years (American Cancer Society, 2020). However, advances in detection and treatment have prolonged survival, and survivors are living well beyond 20 years postdiagnosis. Mortality rates have subsequently decreased by 2.3% since 2012 (Howlader et al., 2019; Siegel et al., 2019). Factors that improve adverse outcomes (e.g., symptoms) have become increasingly more important throughout the cancer survivorship continuum, which is the length of time from a cancer diagnosis until the end of life (Mullan, 1985; Sheikh-Wu et al., 2021, 2022). Studies show that cancer survivors report beneficial and adverse experiences associated with a cancer diagnosis and subsequent treatments. For example, survivors report positive changes associated with receiving a cancer diagnosis, such as increased quality of life and enhanced life satisfaction (Carver & Antoni, 2004; Wang et al., 2015; Wen et al., 2017). In addition to survivors' positive changes, survivors also report adverse symptoms, physical or psychological subjective signs that indicate an abnormal condition within the human body, typically caused by an injury or disease, and measured by occurrence, frequency, and severity (Gapstur, 2007; Sheikh-Wu et al., 2020, 2021; Sreedhar, 2021; Stark et al., 2012).