Hematopoietic Stem Cell Transplantation

Stress, psychoneurologic symptoms, and coping strategies in adolescents and young adults

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Strategies to assist emerging adults (aged 18–28 years) and the adolescent and young adult (AYA) population overall in coping with cancer-related stressors and psychoneurologic symptoms have been insufficient to improve the quality of cancer care (Peckham, Block, Buchanan, & Pommier, 2017; Robb et al., 2014). Psychoneurologic symptoms commonly reported by AYAs following hematopoietic stem cell transplantation (HSCT) include anxiety, depression, fatigue, and pain. The prevalence of these symptoms has spurred researchers to recommend that patients be screened for these symptoms prior to HSCT to inform personalized coping strategies (Kreitler & Kreitler, 2012; Tecchio et al., 2013).

Complementary and alternative medicine (CAM) appeals to AYAs (Kreitler & Kreitler, 2012), and the results of prior research examining various CAM strategies (e.g., creating music videos, writing creatively) with AYA patients with cancer are encouraging (Peckham et al., 2017; Robb et al., 2014). Writing about illness experiences may be a means to improve stress, coping, and psychoneurologic symptoms among AYAs diagnosed with cancer (Boniel-Nissim & Barak, 2013). One example is an illness blog authored by a young adult woman undergoing HSCT during treatment for acute myelogenous leukemia that was published online by the New York Times (http://well.blogs.nytimes.com/author/suleika-jaouad).

The purpose of this article is to analyze how the blogger described stressors, psychoneurologic symptoms, and coping strategies during reverse isolation following HSCT and to discuss how illness blogging may inform future research and practice.

Methods

This project used a longitudinal design and Internet ethnography methods (Keim-Malpass, Steeves, & Kennedy, 2014) and was informed by McCain, Gray, Walter, and Robins’ (2005) psychoneuroimmunology-based framework. This framework describes how illness-related stressors affect the nervous and immune systems and contribute to the development of psychoneurologic symptoms. The local institutional review board reviewed the project and determined that it was not research; therefore, approval was not required. As a courtesy, the public blogger was informed of the project by email. Twelve blog posts, published from March 29, 2012, to October 15, 2015, that mentioned HSCT were examined (Jaouad, 2015). Directed content analysis was used to sort phrases by McCain et al.’s (2015) framework components (stress, psychoneurologic response to stress, coping strategy).