

Standard of Care for Psychological Assessment of Patients Undergoing Allogeneic Hematopoietic Stem Cell Transplantation

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BACKGROUND: Comprehensive care prior to allogeneic hematopoietic stem cell transplantation (alloHSCT) can improve patient outcomes, yet psychological assessment prior to transplantation has been overlooked as a standard of care.

OBJECTIVES: This review summarizes the evidence on psychological assessment for patients undergoing alloHSCT and explores the impact of psychological distress and/or psychological disorders on clinical outcomes and overall survival.

METHODS: A literature search was conducted using PubMed®, CINAHL®, Embase®, and PsycINFO® for studies focused on psychological screening of patients in the alloHSCT population.

FINDINGS: alloHSCT is associated with patient psychological distress and disorders, which can result in negative outcomes such as poorer quality of life and overall survival. Future studies implementing a validated instrument for psychological assessment may allow for early identification of vulnerable patients undergoing alloHSCT and interventions, which may improve overall outcomes.

KEYWORDS

alloHSCT; psychological assessment; psychological distress; quality of life

DIGITAL OBJECT IDENTIFIER

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BECAUSE THE NUMBER OF PATIENTS WHO UNDERGO allogeneic hematopoietic stem cell transplantation (alloHSCT) increases annually (Health Resources and Services Administration, 2021), psychological assessment is a valuable component in the standard of care (Dy et al., 2017). *Psychological assessment* is defined as the process of evaluating an individual's mental health and behavioral functioning for the purpose of diagnosing or treating a problem, such as psychological distress or psychological disorders (American Psychological Association, 2018b). *Psychological distress* is defined as a set of painful mental and physical symptoms, which can indicate the beginning of a clinical psychological condition (American Psychological Association, 2018c). *Psychological disorders* are defined as cognitive and emotional disturbances, or behavioral abnormalities that impair the functioning of an individual (American Psychological Association, 2018a). Consideration of psychological assessment as the standard of care for all patients can help to diagnose and treat psychological distress or disorders. For patients living with cancer, maintaining psychological assessment as a standard-of-care assessment can help to improve overall care (Pirl et al., 2020).

For patients with hematologic malignancies, alloHSCT is an invasive and traumatic yet lifesaving treatment option. The process of initiating alloHSCT is often an acute life-changing event. Because of the patient's dire health status, providers will immediately proceed with alloHSCT treatment, starting the patient on induction chemotherapy and searching for a donor (Leukemia and Lymphoma Society, n.d.). For many patients, the only option for survival is undergoing alloHSCT because, left untreated, the life expectancy for patients with hematologic malignancies is about 17 weeks (Amonoo et al., 2019; Röhlig et al., 2020), and the mortality rate is one in four patients even after undergoing treatment (Penack et al., 2020). Because alloHSCT has been shown to be an effective treatment for hematologic malignancies (Bittencourt & Ciurea, 2020), the rate of alloHSCTs among patients with cancer is expected to continue to increase over time (Health Resources and Services Administration, 2021). Therefore, oncology nurses can advance the standards of care for patients undergoing alloHSCT by improving components of the alloHSCT care plan, which includes consistent patient psychological assessment.

The process of conducting an alloHSCT requires chemotherapy and radiation therapy to ablate the existing bone marrow of the patient, with the