

Effective Transitional Therapy for Adolescent and Young Adult Patients With Cancer: An Integrative Literature Review

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Background: The adolescent and young adult (AYA) cancer community has demonstrated a need for psychosocial help transitioning from acute cancer care to survivorship while navigating appropriate developmental challenges.

Objectives: The purpose of this integrative literature review is to examine the transition of AYAs from life as patients with cancer to life as cancer survivors and to evaluate the most effective, therapeutic ways to make this transition.

Methods: This integrative literature review focused on articles published from 2008–2015 using PubMed, CINAHL®, and PsycINFO. Key search terms were *cancer*, [adaptation, psychological], *adolesc**, and *young adult*. Outcomes were evaluated using the Adaptation Model of Nursing.

Findings: Twenty-two studies met the inclusion criteria, but only four empirically examined interventions. Eighteen studies demonstrated AYAs' unmet needs and suggested important therapeutic components. The four empirically examined interventions were dynamic group therapy, online cognitive-behavioral therapy, an online cancer forum, and an educational cancer retreat. Eighteen therapeutic themes were identified as integral to a complete and healthy transition. Five of these themes seemed to be of particular importance: education on cancer, coping, sexual identity, maintaining a sense of normalcy, and AYA support. The therapeutic themes demonstrate the highly individualized nature of transitional therapy and suggest that the type of therapy is less significant than the therapeutic components.

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Adolescent and young adult (AYA) cancer is a new field that is growing rapidly yet still underdeveloped. Many authors have called attention to the knowledge deficit surrounding this age group, one of them highlighting the five-year survival rates for different age groups diagnosed with acute lymphoblastic leukemia (ALL) (Couzin, 2007). The five-year survival rate for children and adults has quadrupled since 1970, rising to 80%. However, the survival rate for AYAs is 50%, the same in 2007 as it was in 1970 (Couzin, 2007). Couzin (2007) attributes this stagnancy to lack of knowledge and research. This dearth of information may lead healthcare providers to treat AYA patients inappropriately for their age group, relying

on evidence-based pharmacologic and nonpharmacologic treatment that has been successful in pediatric or older adult patients but is unproven in AYAs.

AYA patients are diagnosed with cancer at a socially crucial age. While they should be struggling with identity versus role confusion or intimacy versus isolation, per Erickson's stages of development (Poole, 2013), they are instead facing their own mortality. One research study conducted a group counseling session for eight people diagnosed with cancer aged 22–29 years who were either in chemotherapy or remission (Thompson, Palmer, & Dyson, 2009). Among other frustrations, the AYAs discussed the difficulty of returning to normal life after no evidence of a