

# Loneliness and the importance of social and emotional support for older patients with cancer



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## Background

**KLIMOP study:** observational cohort study in Belgium/The Netherlands with older patients with cancer (OCP) (≥70 years) and two control groups: middle-aged patients with cancer (MCP) (50 – 69 years), older patients without cancer (OP) (≥70 years).

### Research objectives:

1. Examine the evolution of social and emotional loneliness up until 3 years after diagnosis in OCP, MCP and OP.
2. Explore if social and emotional support are key factors in the illness trajectory of patients with and without cancer.

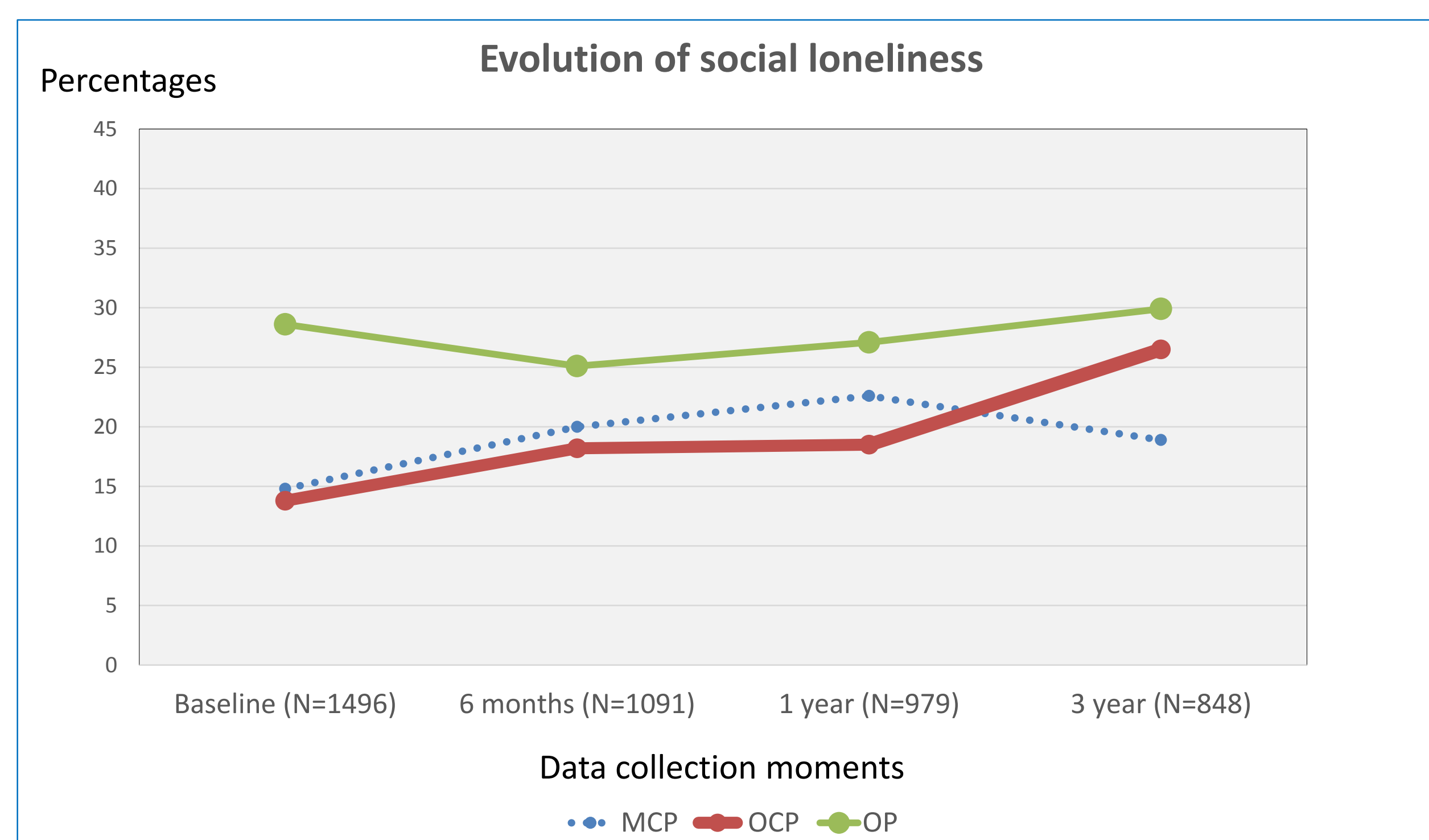
## Methods

**Data collection research objective 1:** questionnaires with the validated Loneliness scale of De Jong Gierveld.

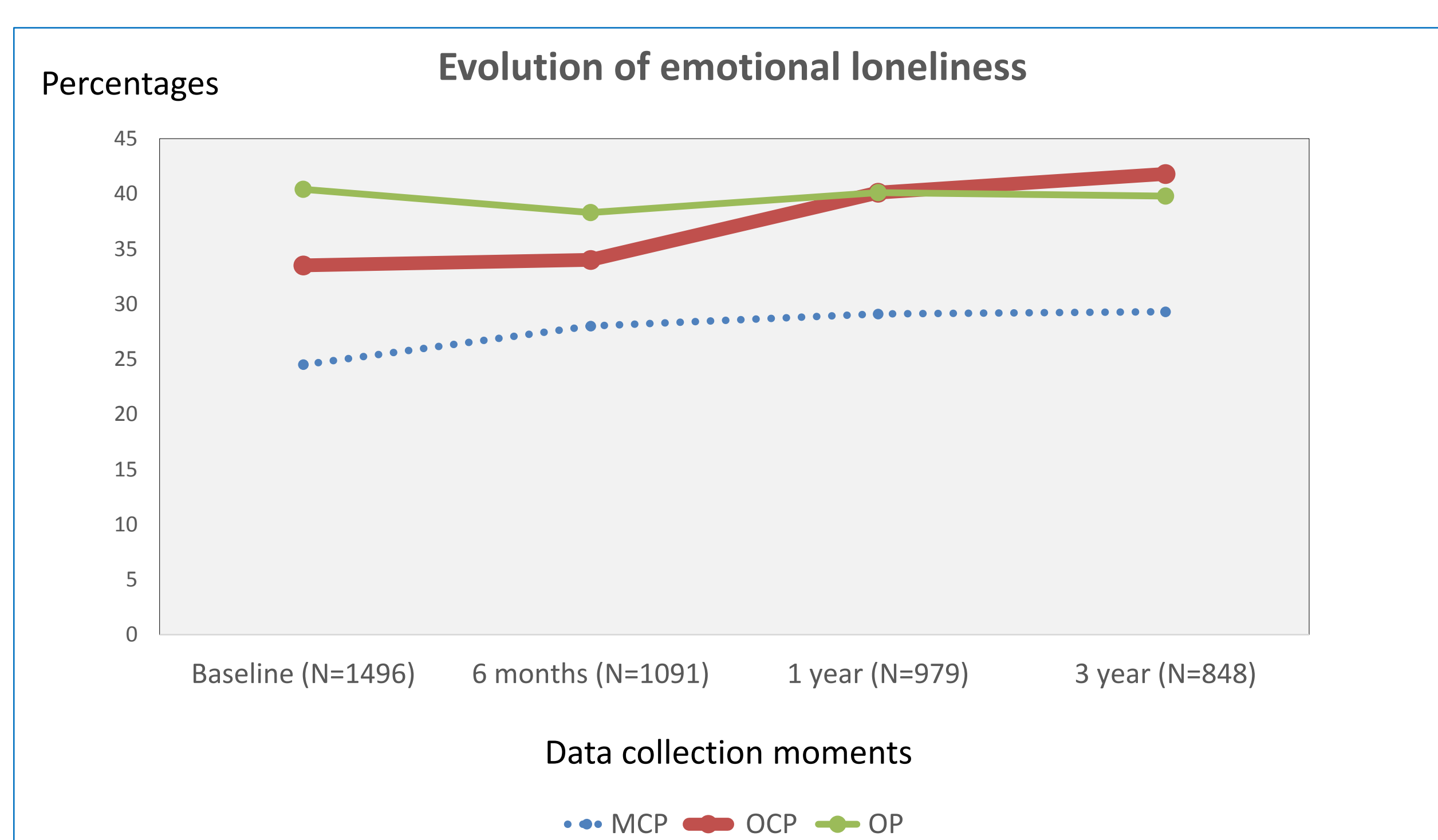
11-item questionnaire with subscales for social and emotional loneliness. Sumscores range from 0 to 5 for social loneliness and from 0 to 6 for emotional loneliness. We used a cut-off of ≥2 for both subscales.

**Data collection research objective 2:** 24 in-depth interviews; 10 with OCP, 8 with MCP and 6 with OP.

## Results



\* Definition social loneliness: a subjectively experienced lack of meaningful relationships with a wider circle of people such as acquaintances, neighbors, colleagues etc.



\* Definition emotional loneliness: a subjectively experienced lack of an emotionally close bond and / or an intimate relationship with a partner or friend.

- Support from the immediate environment is a constant source of strength. It ensures that one can cope with the new situation and offers comfort if patients feel overwhelmed.
- Patients experience feelings of amazement and gratitude due to the experienced social support. It makes them feel less lonely.
- Support that is unexpected for example coming from people outside of the close social circle is very powerful in meaning, also for patients without cancer.
- It is precisely those unexpected small things and meaningful gestures from others that give patients a lot of strength.

"I continue to experience so much friendship, that is unbelievable. After 4 years I still have friends who call me and say, come with us, even if it is only for a few hours. (...) We made a program with dance performances, 1 every month. They come and pick me up and bring me back home. That's unimaginable hey, so many lovely people [Patient laughs] and you would never experience that anyway, I think if you are healthy."

### BUT

- When patients experience lack or loss of emotional support from a partner or a close friend, this has a major impact on their wellbeing.
- It can hamper their recovery and then patients are in need of other sources of strength to deal with their illness and/ or difficult situations.

"But those are things, they put you down. And then I had to think of everything that happened before and then you think: can he not sympathize with me?. [...] Yes, I missed that, and it also brought up feelings of anger within me towards him. I did not deserve this".

## Conclusion

- Loneliness is frequent in older patients with and without cancer. For middle-aged patients with cancer this seems less of an issue.
- For older patients with cancer, social and emotional loneliness increase over time. Support is usually very present at the acute period of diagnosis and treatment. After some months this support wanes.
- Social and emotional support have a key positive effect on the wellbeing of patients with cancer throughout their entire illness trajectory and boosts their recovery.
- GPs and other health care providers can map out the patient's social network and, where necessary, strengthen it. "Inloophuizen" can play an important and positive role for older patients with cancer.

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**Reference:** De Jong-Gierveld J, van Tilburg TG. Manual of the Loneliness Scale, Department of Social Research Methodology: Vrije Universiteit Amsterdam, 1999. ISBN:90-9012523-X.

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