

Mindfulness-based supportive therapy on reducing suffering in patients with advanced cancer: randomised controlled trial

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ABSTRACT

Objectives Suffering is common among patients with advanced cancer. The practice of mindfulness during patient care can potentially reduce suffering. We aimed to examine the efficacy of mindfulness-based supportive therapy (MBST) on reducing suffering in patients with advanced cancer.

Methods We conducted a parallel-group, single-blinded, randomised controlled trial at the University of Malaya Medical Centre, Malaysia. Seventy-three patients with advanced cancer with an overall suffering score $\geq 4/10$ based on the Suffering Pictogram were recruited and randomly assigned into either the MBST group (n=34) or the control group (n=39).

Results There was a statistically significant reduction in the overall suffering score in the MBST group compared with the control group (U=432.5, median₁=-2.0, median₂=-1.0, z=-2.645, p=0.008). There was also significant improvement in the total Hospital Anxiety and Depression Scale score (U=483.5, median₁=-4.0, median₂=-3.0, z=-1.994, p=0.046), and the total Functional Assessment of Chronic Illness Therapy-Spiritual Well-Being score (U=252.0, median₁=+14.5, median₂=+5.0, z=-4.549, p=0.000) in the MBST group compared with the control group.

Conclusions The results provided evidence that the practice of MBST during patient care could promote positive psychosocial outcomes.

INTRODUCTION

Suffering has many definitions. Cassell described suffering as a state of severe stress associated with a threat, actual or perceived, to the intactness of a person.^{1 2} He recognised the need to see

Key messages

What is already known on this topic?

- ▶ Mindfulness can reduce pain, stress, anxiety and depression.
- ▶ Brief mindfulness exercises have been shown to reduce suffering in palliative care.

What this study adds?

- ▶ Mindfulness-based supportive therapy (MBST) reduced suffering in advanced cancer.
- ▶ It also improved quality of life.

How this study might affect research, practice or policy?

- ▶ The practice of mindfulness during patient care is beneficial.
- ▶ The positive effect of multiple sessions of MBST remains to be explored.

the suffering not as a physical problem with the body, rather a matter with the wholeness of a person. The 'total pain' experienced by dying people as outlined by Saunders entailed a complex interplay of physical, psychological, social and spiritual elements.³ Cherny *et al* explicated suffering as an aversive experience characterised by the perception of personal distress generated by adverse factors undermining quality of life (QOL).⁴ He emphasised the inter-relatedness of suffering between patient, family and healthcare workers as the triangle of suffering.⁴

Suffering is an unpleasant, multidimensional, all-encompassing, dynamic individual experience characterised by perceived isolation, helplessness, hopelessness and meaninglessness in the



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