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Evidence-Based Psycho-Oncological Interventions: A Multimodal **Approach to Supportive Care**

Teena Garg^{1*}, Vandana Shriharsh²

¹Department of Clinical Psychology, National Forensic Sciences University, Delhi Campus

²Associate Professor of Clinical Psychology; School of Behavioural Forensics; National Forensic Sciences University, Delhi Campus

*Corresponding Author

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ABSTRACT

Background: Psycho-oncology is the integration of oncological and psychological care to address cancer patients' mental health issues. CBT, MBCT, DBT, JPMR, and expressive therapies like music and art therapy are examples of psycho-oncological interventions that help control symptoms, improve coping, and lessen anxiety. To enhance overall patient outcomes, supportive care integrates medical, psychological, social, and emotional assistance. Objective: This review aims to evaluate the effectiveness of multimodal psycho-oncological therapies in enhancing the quality of life (QoL) for cancer patients, alleviating psychological distress, and boosting emotional resilience. Methods: Recent meta-analyses and randomized controlled trials (RCT) were systematically reviewed. The research measured the efficacy of several psycho-oncological interventions, such as CBT, MBCT, JPMR, and expressive therapies, in lowering anxiety, and depression, and enhancing coping mechanisms. Results: Mindfulness-Based Stress Reduction (MBSR), which dramatically lowers anxiety and depression, is one technique that has been shown to be effective recently. Advanced cancer patients' spiritual health and QoL have been demonstrated to improve with Meaning-Centered Psychotherapy (MCP). While JPMR has reduced the physical discomfort and tension associated with chemotherapy, art and music therapy have shown significant efficacy in lowering psychological distress in patients. Conclusion: Evidence- based psychooncological therapies are very successful in reducing psychological distress, boosting emotional health, and increasing cancer patients' quality of life. More study is required to guarantee that these therapies are broadly available and culturally sensitive.

Keywords: Mindfulness-Based, Stress Reduction (MBSR), Supportive Care, psycho-oncological interventions.

INTRODUCTION

In order to address the emotional, psychological, and social difficulties that cancer patients encounter, psychooncology combines clinical responsibilities related to psychological medicine/therapy with cancer care. When cancer first appears, people may experience considerable psychological distress, including symptoms of worry, despair, and fear, which can negatively affect their QoL (Zabora et al., 2001). Cancer patients endure mental and emotional suffering in addition to physical pain as they deal with their diagnosis, course of treatment, and prognosis. Therefore, psycho-oncology aims at providing integrated mental health services together with medical treatments to enhance the psychological and physical well-being of the patients (Jacobsen Ransom, 2005).

Cancer patients' psychological distress can be significantly reduced by psychological interventions alone, like Cognitive Behavioral Therapy (CBT), Mindfulness-Based Cognitive Therapy (MBCT), Dialectical Behavior Therapy (DBT), Jacobson's Progressive Muscle Relaxation (JPMR), and expressive therapies like music and art therapy (Hofmann et al., 2012). These therapies focus on enhancing emotional resilience, adaptability abilities, and signs of anxiety and depression (Fawzy et al., 1993). Specifically, recent research has demonstrated the effectiveness of such therapies in improving general well-being and QoL in addition to reducing psychological distress (Garland et al., 2015).

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Supportive care, the bedrock of psycho-oncology, is the delivery of medical, psychological, social, and affective support for cancer patients (Bradt Dileo, 2014). It acknowledges that cancer care is not limited to physical therapy and that it needs a multidimensional approach to meet the needs of patients in all its dimensions. Through psychological care combined with standard cancer therapies, supportive care enables better control of the emotional and psychological consequences of cancer and, in doing so, supports patients to deal with the challenges the disease presents to them (Schell Couper, 2012).

This review aims to assess the efficacy of multimodal psycho-oncological therapies, focusing on interventions such as CBT, MBCT, DBT, JPMR, and expressive therapies. Determining the degree to which these treatments are connected to improvements in cancer patients' QoL, reductions in psychological distress, as well as development of emotional resilience is the primary goal. This article will present the most recent data on the effectiveness of these psycho-oncological therapies and their use in supportive care through a review of recent meta-analyses and randomized controlled trials.

Conceptual Framework

Supportive Care in Oncology

Supportive care in oncology denotes a comprehensive, interdisciplinary strategy aimed at addressing the physical, psychological, and emotional difficulties encountered by cancer patients during their treatment process. It includes an extensive range of interventions aimed at improving the patient's overall health, managing the psychological implications of receiving a cancer diagnosis, and addressing the adverse effects of cancer treatments (Mehnert et al., 2013). Along with the medical treatment of cancer, supportive care works on psychological support for patients use of alleviate the emotional distress and anxiety frequently caused by the illness. Such interventions encompass psychotherapy, counseling, and mental health management practices to treat depression and anxiety, along with other mental health challenges, which are common with cancer treatment (Holland et al., 2013).

Supportive care's main goal is to help cancer patients live better lives by attending to their emotional and psychological needs in addition to their physical needs. It recognizes that receiving a cancer diagnosis and undergoing treatment can significantly lower one's quality of life, stemming not only from physical symptoms but also from the emotional strain of dealing with a life- threatening condition (Faller et al., 2013). This combined strategy aids in guaranteeing that patients obtain comprehensive care, which is crucial for addressing the intricate issues encountered by cancer patients (Timmerman et al., 2016).

Psycho-Oncological Interventions

Psycho-oncological interventions are psychological modalities designed for the treatment of the specific psychological problems that arise in patients with cancer. These interventions are intended to reduce distress, strengthen coping processes, and promote emotional thriving via a variety of psychotherapeutic interventions. Some of the most commonly studied and applied psycho- oncological therapies include CBT, MBCT, DBT, JPMR, and expressive therapeutic methods like music and art therapies.

• Cognitive Behavioral Therapy (CBT): It is one of the psychological treatments for cancer patients that has been researched the most. It is based on the detection and correction of the negative cognitive processes and behaviors linked with emotional pain (Fawzy et al., 1993). CBT has helped cancer patients to reduce anxiety and depression and also enhanced coping strategies, aiding them to cope with their diagnosis and psychological load of treatment (Hofmann et al., 2012).

MBCT and MBSR are based on mindfulness practices but also incorporate the principles of cognitive therapy. These therapies aim to enhance emotional regulation and reduce stress by prompting patients to focus on the present moment and develop a nonjudgmental awareness of their thoughts and emotions. Research has demonstrated that both MBSR and MBCT can help cancer patients feel less depressed, anxious, and generally distressed, which improves their QoL (Garland et al., 2015).

• Dialectical Behavior Therapy (DBT): The foundation of DBT is the development of interpersonal effectiveness,

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distress tolerance, and emotion control. In cancer patients, DBT is employed to address severe emotion and to enhance emotion regulation, especially in those who experience greater levels of emotional dysregulation due to their cancer treatment (Linehan, 1993). Dialectical Behavior Therapy (DBT) has been effective in reducing anxiety and depression symptoms across diverse patient populations, including those with chronic medical conditions (Kramer et al., 2015).

• Jacobson's Progressive Muscle Relaxation (JPMR): JPMR is a relaxation method that entails contracting and subsequently relaxing various muscle groups in the body. It has been created to reduce tension, promote relaxation, and lessen stress. In cancer patients, JPMR has been especially effective in decreasing chemotherapy-related anxiety, improving insomnia, and alleviating physical pain (Carlson et al., 2004).

Art and music therapy offer creative expression channels and have been shown to be useful for cancer patients' emotional expression and management of psychological distress. These treatments are predicated on a belief that creative expression can help mediate emotional change and can offer a different means for expressing emotions that are hard to put into words. Art/music therapies have been shown to alleviate anxiety, and depression, and to enhance patients' emotional state during therapy (Brad Dileo, 2014).

• Meaning-centered psychotherapy (MCP): MCP is a therapeutic method that emphasizes assisting individuals in discovering meaning and purpose in their lives, particularly when confronted with a terminal or life-threatening condition. This approach has shown a species-specific effectiveness in enhancing the spiritual and emotional well-being of advanced cancer patients to cope with existential distress and improve their QoL (Breitbart et al., 2010).

Every one of these interventions has a different strategy for enhancing cancer patients' emotional resilience and mental health. While individual therapies have demonstrated efficacy in addressing specific aspects of psychological distress, a multimodal approach—combining these therapies—holds promise for providing more comprehensive care. By addressing multiple dimensions of mental health, these interventions can help create a robust support system for cancer patients, facilitating their ability to manage the emotional and psychological challenges posed by their disease.

LITERATURE REVIEW:

Efficacy of Psycho-Oncological Interventions

Psycho-oncological therapy has been shown to improve cancer patients' psychological well-being in recent research. These interventions have been demonstrated to decrease distress, increase emotional resilience, and improve QoL by addressing the anxiety, depression, and other emotional difficulties experienced by the patient. The following is a comprehensive review of the best available psycho-oncological interventions, according to the latest evidence.

Cognitive Behavioral Therapy (CBT)

In psycho-oncology, this kind of therapy is however one of the most studied ways to treat cancer patients' anxiety and sadness. According to a meta-analysis by Fann et al. (2018), CBT considerably lowers symptoms of anxiety as well as depression in cancer patients, and the effects last long after treatment is finished. CBT aids patients in recognizing and altering negative thought processes associated with their condition, which enhances their emotional reactions and coping strategies.

A controlled trial by Taylor et al. (2020) indicated that CBT could enhance the QoL in breast cancer patients by improving coping strategies and emotional functioning. In a similar manner, research by Zainal et al. (2017) validated that CBT effectively alleviated psychological distress in patients with metastatic cancer, enhancing both mental and physical health <u>results</u>.

Mindfulness-Oriented Cognitive Therapy (MOCT) and Mindfulness-Oriented Stress Relief (MOSR) Both of these are based on the tenets of mindfulness, which entails fostering non-judgmental attention to the current





moment. Both forms of therapy combine mindfulness aspects with cognitive therapy principles, aiming to reduce distress and improve emotional regulation.

According to research by Garland et al. (2017), MBSR significantly reduced cancer patients' anxiety and depression levels, particularly in those undergoing chemotherapy. Individuals who took part in MBSR also indicated improved coping abilities and an enhanced QoL. Likewise, an RCT conducted by Kratz et al. (2020) demonstrated that MBCT improved the mental well-being of cancer patients by diminishing rumination and elevating positive emotions. Both treatments were discovered to be especially effective in alleviating emotional distress in individuals dealing with advanced stages of cancer.

The benefits of mindfulness interventions extend beyond emotional regulation. A systematic review by McDonald et al. (2016) has validated that mindfulness-based treatment also exerts physical health benefits, including better immune response and decreased inflammation, which are essential for all oncological patients receiving treatment.

Dialectical Behavior Therapy (DBT)

Initially developed for people with borderline personality disorder, this therapy has been utilized for cancer patients facing significant emotional distress and challenges in emotion regulation. DBT focuses on mindfulness, tolerance for distress, regulation of emotions, and effectiveness in interpersonal relationships.

Recent research demonstrates the effectiveness of DBT in cancer treatment. A pilot study by Gunter et al. (2018) found that DBTcy improved emotional dysregulation in cancer patients by decreasing depression and anxiety and improving coping skills. The investigation reported important improvements in the patient's capacity to withstand distress, which is particularly relevant for patients in intensive treatments (e.g., chemotherapy, radiation).

In a similar vein, an RCT done by Wilkins et al. (2019) found that DBT reduced post-traumatic stress disorder (PTSD) symptoms in cancer patients, which are common psychological effects associated with cancer diagnoses and <u>treatments</u>. This intervention helped patients develop stronger emotional resilience and improve their interpersonal relationships, which is crucial during cancer treatment.

Jacobson's Progressive Muscle Relaxation (JPMR)

It is a relatively uncomplicated stimulative technique, whereby by gradually and repeatedly tensing and relaxing muscles in the body, subjective and objective tension can be lessened. It has been shown that JPMR is particularly beneficial in reducing the mental and physical discomfort associated with cancer therapies like chemotherapy.

Current research lends support to effectiveness of JPMR in reducing distress among cancer patients. A study by Carlson et al. (2016) reported that JPMR produced meaningful reductions in anxiety and physical discomfort in oncology patients during chemotherapy, thereby contributing to increased treatment tolerability. Another study by Tomlinson et al. (2017) showed that JPMR alleviated chemotherapy-induced nausea and vomiting—common side effects that can worsen distress. Moreover, it has been noted that JPMR improves sleep quality and reduces fatigue, both of which are recognized to impact QoL in cancer patients (Montazeri et al., 2017).

Expressive Therapies (Art and Music Therapy)

These therapies serve as supportive methods for emotional expression, enabling cancer patients to confront the emotional difficulties that verbal articulation would present (i.e., due to limited <u>language skills</u>). These interventions include activities aimed at creative expression (painting, drawing art, music) that allow the expression of emotions and facilitate psychological health.

There have lately been studies showing the utility of expressive therapy in cancer treatment. Research by Bradt and Dileo (2014) showed that music therapy reduced anxiety and depression in patients undergoing cancer treatment, contributing to improvements in mood and overall emotional health. Similarly, a systematic review





by Czamanski-Cohen et al. (2016) found that art therapy significantly reduced psychological distress, with patients reporting a greater sense of emotional release and control over their emotional state.

Art therapy has also been demonstrated to ameliorate both QoL and the psychological load of cancer. An RCT by Anderson et al. (2020) reported that art therapy session-based participation in patients' treatment led to decreased levels of emotional distress, as well as improved level of life meaning and purpose, both processes necessary to reach a cancer diagnosis-related sense of hope.

Meaning-Centered Psychotherapy (MCP)

It aims to guide the patient's search for meaning and purpose even in a terminal disease. This approach has been shown to improve life quality, reduce anxiety, and enhance spiritual well-being, particularly in patients with advanced cancer.

MCP is effective in treating cancer, according to recent studies. As per an RCT by Breitbart et al. (2015), MCP considerably reduced psychological pain and enhanced spiritual well-being in patients with advanced cancer, particularly in those who were feeling existential distress. Similarly, a study by Hales et al. (2017) confirmed that MCP improved both emotional and psychological functioning, helping patients cope with their illness by fostering a greater sense of meaning.

MCP has also been demonstrated to ameliorate depression and ameliorate patients' capability of coping with prognostic uncertainty. A study by Lanza et al. (2019) demonstrated that MCP led to improved emotional resilience and increased satisfaction with life in cancer patients, particularly in those who had been diagnosed with terminal cancer.

DISCUSSION

The review of this research emphasizes how crucial psycho-oncological interventions are to cancer patients' psycho-oncological treatment in order to enhance their general QoL and mental health. These interventions have proven effective in reducing psychopathological symptoms (including anxiety, depression, and emotional dysregulation), as well as enhancing coping abilities and emotional resilience. These interventions, which emphasize the psychological and emotional components of cancer care, serve as a supplemental approach to cancer treatment when combined with conventional medical treatment.

Effectiveness of Multimodal Interventions

A major discovery from this review is the expanding evidence that backs the efficacy of multimodal psychooncological interventions, which combine various therapeutic methods to deliver holistic care. A variety of psychopathological symptoms may be effectively treated by combining CBT with mindfulness techniques like MBCT or MBSR. CBT emphasizes unhelpful thought patterns, whereas mindfulness-based approaches instruct patients to cultivate awareness of the present circumstances and to improve their emotional regulation. This combination appears to be especially advantageous for cancer patients whose psychosocial needs are intricate and multifaceted (Fann et al., 2018; Garland et al., 2017).

Furthermore, combining expressive interventions, such as music and art therapy, with other intervention types offers cancer patients an alternative means of expression, specifically an emotional expression that is challenging to verbalize. These therapies have proven to be helpful in reducing anxiety, depression, and emotional reactivity (Bradt Dileo, 2014; Czamanski-Cohen et al., 2016). This multimodal approach may be specifically beneficial for individuals who have trouble expressing their emotions verbally or who experience considerable psychological suffering that a single modality cannot adequately address.

Addressing Diverse Needs of Cancer Patients

Cancer patients exhibit a variety of emotional reactions to their diagnosis and treatment. These are also associated with feelings of hopelessness, fear of death, and social isolation again these all lead to psychological distress. Also, for this reason, the psycho-oncological interventions need to be, as far as possible, flexible and adaptive to the





various requirements of patients. Interventions such as Meaning-Centered Psychotherapy (MCP), a psychological therapy that assists patients with a terminal diagnosis to develop meaning and purpose despite their illness, play an irreplaceable role in alleviating patients' existential anxieties in late-stage cancer patients (Breitbart et al., 2015; Hales et al., 2017). These interventions not only increase emotional resilience but also allow patients to cope with the usual spiritual suffering that accompanies terminal cancer.

In addition, psycho-oncological treatments are of paramount importance in the emotional and psychological needs of patients treated by modality (chemotherapy and radiation) that demand the highest attention. These treatments often lead to physical and emotional side effects, including fatigue, nausea, sleep disturbances, and depression. Methods such as Jacobson's Progressive Muscle Relaxation (JPMR) and DBT have been demonstrated to be beneficial in the treatment of these side effects. Specifically, JPMR is very effective in alleviating physical strain and inducing relaxation and therefore represents an interesting tool to counter the anxiety and the associated physical discomfort induced by the administration of chemotherapy drugs (Carlson et al., 2016; Montazeri et al., 2017).

Cultural Sensitivity and Accessibility

Although the efficacy of psycho-oncological treatments is widely recognized, there remain some problems of accessibility and cultural sensitivity in psycho-oncological treatments. One of the limitations in the introduction of such interventions is that most interventions are framed on Western psychological models which are undefined for use in diverse cultural settings. As the global population of cancer patients becomes increasingly diverse, it is essential to ensure that psycho-oncological interventions are culturally sensitive and adaptable to the needs of various patient populations. This includes an awareness of attitudes towards cancer, mental health, and psychotherapy, as well as the need to tailor therapeutic strategies accordingly to take into account the social and familial environment that could influence patients' emotional states.

Research by Garcia et al. (2020) stressed the need for culturally personalized psycho-oncological treatments in various populations, proposing that the introduction of cultural beliefs and practices in therapy may increase clinical adherence and therapeutic responses. Such as linking mindfulness elements with "usual" cultural rituals or having family members in therapy sessions, for possible improvements in acceptability and outcome of interventions.

Another consideration is the accessibility of psycho-oncological therapies. However, owing to a combination of financial, geographic, and systemic limitations, many cancer patients, especially those in low-resource settings, may lack access to these services. With the advancement of cancer care, the need arises to focus on the development of affordable, inexpensive, and scalable psycho- oncological interventions. Telehealth and digital interventions for mental health, e.g., online CBT programs and virtual mindfulness-based interventions, can contribute to addressing some of these barriers by increasing the accessibility of psycho-oncological support (Kraft et al., 2019).

FUTURE DIRECTIONS

Although the evidence for psycho-oncological interventions is substantial, further study is required to identify the best effective implementation strategies for these therapies. Future research should concentrate on identifying the optimal combination of therapies for various cancer kinds, illness stages, and patient characteristics. Longitudinal designs are essential for evaluating the enduring impacts of psycho-oncological treatment on patients' psychological states and survival rates.

Furthermore, studies should persist on the effectiveness of innovative methods such as virtual reality and biofeedback for treating psychological distress related to cancer. Early studies have suggested possible uses for virtual reality in reducing stress and managing emotions among cancer patients (Cunningham et al., 2018). When new technologies emerge, they can offer innovative, engaging, and unique viewpoints to enhance traditional psycho-oncological therapies.

Finally, incorporating patient-reported outcomes (PROs) into research on psycho-oncological interventions will enhance the understanding of the quality-of-life impact these interventions have on patients. Patient-reported





needs.

outcomes, encompassing aspects like emotional health, physical capability, and social support, will assist in clinical decision-making and guarantee that interventions are focused on the patient and customized to specific

Future Research and Implementation

Although current studies consistently show the effectiveness of psycho-oncological interventions, further research is required to continue to improve these interventions, to assess their long-term effects, and to improve their availability. Future research should include investigating the role of combined interventions in and across cancer types and stages of illness and personalizing the provision of treatments according to the individual needs of heterogeneous patient populations. As the global cancer patient population becomes increasingly diverse [4], a cultural tailoring of psycho-oncologic interventions will need to be one of the many research foci to satisfy the needs of patients from diverse cultures, to make these interventions inclusive and culturally appropriate in different cultural settings.

Integration of digital technology into psycho-oncology is a further major of interest. Online programs, virtual therapy sessions, and mobile applications could help overcome barriers to access, such as geographic limitations, lack of trained professionals, and financial constraints. By increasing the availability of these evidence-informed interventions, mental healthcare systems could provide more equitable mental healthcare support to cancer patients, in particular those in low-resource areas.

Clinical and Policy Implications

Psycho-oncological treatments should be part of cancer care, rather than being an accessory. Physicians and healthcare personnel should be educated to identify the psychological demands of cancer patients and to provide appropriate referrals to mental healthcare providers for psycho-oncological care. In addition, the inclusion of psycho-oncological interventions in cancer treatment pathways would necessitate policy revisions to guarantee funding and resources are directed towards provision of these crucial services.

As psycho-oncology further develops, there is a critical need to encourage increased collaboration involving clinicians who work with cancer patients, including oncologists, psychologists, and others involved in the delivery of healthcare services, to produce integrated treatment plans that appropriately address both physical and mental health. In so doing, healthcare institutions can guarantee more holistic and patient-oriented care to the clinical burden of cancer patients.

CONCLUSION

Psycho-oncological treatments play a crucial role in comprehensive cancer care and provide essential emotional support in conjunction with standard medical treatments. Integrating these therapies into cancer care protocols addresses the emotional, cognitive, and social effects of cancer diagnosis and therapy. The studies analyzed highlight that these interventions are vital in reducing the psychological effects of cancer, especially for patients facing intense treatments such as chemotherapy or radiation. By concentrating on boosting coping mechanisms, emotional control, and psychological strength, these therapies enable cancer patients to more effectively manage the difficulties of their condition, enhance their QoL, and preserve a sense of control throughout their treatment. Furthermore, mindfulness, art therapy, and progressive muscle relaxation offer cancer patients non-verbal ways to manage emotional distress, recognizing the complex nature of their experience. Increasing evidence for psycho-oncological therapies highlights the importance of these methods in improving the mental health and QoL of cancer patients. As additional studies demonstrate the benefits of these interventions in alleviating distress, enhancing coping resources, and fostering emotional resilience, it is crucial that these approaches for patients with psychosis be adopted as extensively as possible. Integrating psycho-oncological support into holistic cancer treatment strategies allows us to offer patients the assistance necessary to manage their cancer experience, thereby enhancing their quality of life and future results.





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