

How to support quality of life of children with cancer and their parents?

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Introduction

Procedure-related emotional distress, fatigue, and anxious and depressive symptoms are frequent in children with cancer [1-4]. Their parents also suffer from emotional distress [5]. It is known that child's and parents' emotional distress are linked [6], which underlines the importance to work with the whole family in paediatric psycho-oncology. Several psychosocial interventions had positive results on the well-being of children with cancer and their parents [7,8]. These therapeutic groups for children and for parents are generally led in parallel, to allow parents to help and support their child in the therapeutic process [9]. Some of these are also based on hypnosis and showed positive results on procedure-related pain and emotional distress [9,10].

Use of hypnosis in oncology

Last years, studies assessed the efficacy of hypnosis to cope with several cancer-related symptoms in adults. Hypnosis can be divided in three main components: absorption (the ability to be totally involved in an imaginary experience); dissociation (the mental separation with the environment); and suggestibility (the ability to accept and follow the therapist's suggestions or instructions) [11]. Indeed, during the hypnotic procedure, a therapist suggests to a patient some changes in their sensations, perceptions, thoughts or behaviours, which allow the person to retrieve some control over their life and to use their personal resources to modify dysfunctional behaviours or situations [12]. In therapeutic groups, this technique is generally associated with other approaches, such as cognitive-behavioural therapy of self-care training, and in these cases, it is often proposed to adults with cancer, with positive effects on pain, emotional distress and fatigue [13-15]. Few studies concerned children with cancer and their parents.

A need for multicentre study implementation

Our team in Liège-Belgium developed, based on scientific literature, previous studies, and clinical practice, a group intervention combining hypnosis and self-care learning. First, it was proposed to adults with cancer, with positive results on quality of life [12,14]. Then, an adapted version of this combined intervention was proposed to children with cancer and their parents, given the difficulties faced by the whole family. Two groups were created and led in parallel: one for the children and one for their parents. The thematic and exercises were similar in both groups but were adapted to the age of the children. As the pilot study led to encouraging results in terms of adherence and participants' satisfaction [16], a quasi-experimental protocol has been implemented since 2018 in Liège, aiming at improving emotional distress, fatigue

and adaptation of children with cancer and their parents. However, some difficulties have been encountered during this process. As paediatric cancers are fortunately rarer than in adults, this leads to small heterogeneous samples of participants in terms of age, types of illness and treatment, making difficult to obtain reliable data. Plus, their parents are not necessarily available for all the sessions as well, as they have a lot to deal with too. Thus, researchers have to develop multicentre studies and share their strengths, to have accurate results and improve hypnosis-based interventions in paediatric oncology. This must be encouraged by the benefits reported by our participants, saying that intervention combining self-care and hypnosis allowed to 'feel more relaxed', 'be more assertive', 'help (their) children to be calmer' and 'should be proposed to more children with cancer and their parents'.

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