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A Group Education and Skills Intervention Aimed at Improving Cognitive Functioning in People Treated for Cancer: A Pilot Study

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Background This project aimed to evaluate whether a group psychological intervention could improve cognitive performance in people who have completed treatments for cancer. It was hypothesised that group cognitive rehabilitation would improve objective cognitive performance, subjective cognitive function and quality of life. **Methods** 6 participants who had previously completed treatments for adult onset cancer took part in a group cognitive behavioural intervention in February 2009 conducted by a clinical psychologist and a psychologist-in-training. The “Re-Cog” intervention, developed for this study, involved four 2-hour group sessions and between session homework. A participant manual and clinician manual were developed. Sessions involved education, skills training and skills practice on the topics of “Aging, health, cancer and cognitive function”, “Memory”, “Attention”, and “Fatigue, emotions and cognition”. Participants completed neuropsychological assessments and self-report measures of subjective cognitive function, quality of life, and emotional distress at pre-treatment and post-treatment. **Results** Results will be presented for pre- and post scores on neurocognitive assessment (the Repeatable Battery for Assessment of Neuropsychological Status and Trailmaking Test), self-reported cognition (Multiple Abilities Self-Report Questionnaire), quality of life (European Organisation for Research and Treatment of Cancer Core Quality of Life Questionnaire), distress (Kessler-10), illness perceptions (Illness Perceptions Questionnaire – Revised), and patient satisfaction. **Conclusions** Results will show for the first time whether a brief group intervention can improve cancer survivors’ subjective or objective cognitive performance. If successful, the pilot study will be extended to a larger trial. **Research Implications** This project will assist with finding out the extent to which cognitive difficulties experienced by a proportion of cancer survivors are remediable in a manualised group treatment format. **Clinical Implications** If successful, the program is designed in a format that would be easy to disseminate. It is manualised, relatively brief, designed for delivery in a group, and intended for use with cancer survivors who have mixed tumour types. **Acknowledgement of Funding** Funding for this project was provided by Griffith University Research Grant GURG-36603.