An Integrative Review of Self-Management Interventions for Treatment Sequelae in Adult Survivors

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PROBLEM IDENTIFICATION: Self-management interventions support cancer survivors in addressing the consequences of treatment. With post-treatment survivors living longer, it is critical to know how research responds to their changing needs.

LITERATURE SEARCH: A comprehensive search of the CINAHL®, PsycINFO®, and PubMed® databases was performed. Articles were included if the self-management intervention was conducted on cancer-free adult survivors after completing primary treatment.

DATA EVALUATION: Each study was evaluated using the Critical Appraisal Skills Programme checklist.

SYNTHESIS: 38 articles were included. The majority of the interventions were designed for short-term survivors, with limited interventions found to support the self-management of long-term cancer survivors. When implementing self-management support, there is a need to use theoretical frameworks that can respond to the changing needs of cancer survivors over time.

IMPLICATIONS FOR PRACTICE: Future research should provide support for long-term survivors. Oncology nurses can use the results of this review to identify gaps in the self-management education provided to cancer survivors.

KEYWORDS integrative review; self-management; intervention; treatment sequelae; cancer survivor *ONF, 48*(1), 94–111.DOI 10.1188/21.ONF.94-111



orldwide, the incidence of cancer is increasing (Bray et al., 2018). Although cancer mortality is increasing in many parts of the world, ad-

vancements in the prevention and treatment of cancer have also led to a dramatic increase in the number of people living with a history of cancer (de Moor et al., 2013). In the United States, an estimated 22.1 million people will be cancer survivors by 2030 (Miller et al., 2019). Cancer treatments improve survival, but they also can cause multiple side effects and consequences, including physical and psychological sequelae, many of which may not appear until years after treatment (Stein et al., 2008). Physical and psychological late and long-term sequelae—including chronic fatigue (Jones et al., 2016), cognitive dysfunction, anxiety, and depression (Gegechkori et al., 2017) may exist for years after the completion of treatment.

For optimal management of late and longterm effects, cancer survivors need to integrate self-management behaviors into their lives (Foster & Fenlon, 2011). Post-treatment self-management can help survivors to address the long-term sequelae of treatment, as well as help them to adjust to life with cancer (McCorkle et al., 2011). Self-management refers to patients' daily management of their chronic condition (Anekwe & Rahkovsky, 2018). Recommended self-management activities for individuals depend on the trajectory of their disease (Ryan & Sawin, 2009), but they generally involve three forms of activity: medical, emotional, and role management (Lorig & Holman, 2003). Medical management involves managing the medical components of a chronic disease, such as taking medications and adhering to the medication. Emotional management is related to psychosocial health and can include managing symptoms and emotions, such