

Cancer Survivors Reporting Loneliness Experience Higher Mortality Risk

American Cancer Society researchers stress the need to screen for loneliness and provide support to those survivors in need

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A new study led by researchers at [the American Cancer Society](#) (ACS) showed people surviving cancer who reported feeling more lonely experienced a higher mortality risk compared to survivors reporting low or no loneliness. Researchers observed the highest mortality risk among the group reporting the highest levels of loneliness, even after adjusting for sociodemographic characteristics. The findings are published today in the Journal of the National Comprehensive Cancer Network (JNCCN).

“Loneliness, the feeling of being isolated, is a prevalent concern among cancer survivors as a cancer diagnosis and its subsequent treatment can result in long-term adverse health effects, which can negatively affect survivors’ social relationships and contribute to loneliness” said [Jingxuan Zhao](#), senior associate scientist, health services research at the American Cancer Society and lead author of the study. “There are more than 18 million cancer survivors in the U.S. and that number is expected to increase to 22 million by 2030. We need to address this critical issue now.”

Researchers identified a cohort of cancer survivors aged 50 years and older from the nationally representative panel surveys of the 2008-2018 Health and Retirement Study. Follow-up for vital status was through 2020. Loneliness was measured using an abbreviated version of the UCLA Loneliness Scale (Version 3) which included items such as lacking companionship and feeling isolated from others. A score was assigned according to answers for each question where 1 was for the least, 2 for moderate, and 3 for the loneliest response option. Items were summed to create total loneliness scores for each individual, which were categorized into four levels: 11-12 (low/no loneliness), 13-15 (mild loneliness), 16-19 (moderate loneliness), and 20-33 (severe loneliness) based on the sample distribution and results from spline analyses.

This study identified a total of 3,447 cancer survivors with 5,808 person-years of observation, with 1402 (24.3%), 1445 (24.5%), 1418 (23.6%), and 1543 (27.6%) reporting low/no, mild, moderate, and severe loneliness, respectively. Compared to survivors reporting low/no loneliness, survivors reporting greater loneliness had higher mortality risk, with the highest adjusted hazard ratios (AHR) among the loneliest group (AHR:1.67, 95%CI:1.25-2.23, p-trend=0.004), following a dose-response association.

“What’s needed is the implementation of programs to screen for loneliness among cancer survivors and to provide social support to those in need,” added Zhao. “This action can prompt interventions such as mental health counseling, community support, social network involvement and the integration of these programs in cancer treatment and cancer survivorship care. This study is especially timely given the recent Advisory on the Healing Effects of Social Connection and Community by the U.S. Surgeon General, which highlighted the adverse effects of loneliness for individuals and also for public health.”

“Investing in patient navigation services is critical to helping ensure a better treatment experience and better health outcomes including helping patients with social and emotional needs,” said [Lisa A. Lacasse](#), president of the American Cancer Society Cancer Action Network (ACS CAN), ACS’s advocacy affiliate. “No one should have to take on cancer alone and having a patient navigator helps ensure no one has to by providing necessary support throughout a complex and confusing diagnosis.”

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