

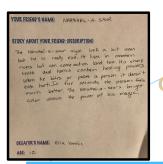


### **Background**

- Children with cancer experience distress and decreased quality of life (QOL).
- Creative arts therapy (CAT) uses art, music, and movement in a therapeutic manner that may improve QOL in children with cancer.
- In adults with cancer, CAT has jimproved QOL.
- Our pilot work in pediatric oncology showed trends of improved QOL with CAT.

# **Objectives and Methods**

- Purpose: to examine the relationship between QOL and CAT in children with cancer
- Hypothesis: positive dose-response relationship
- Design: quasi-experimental repeated measures study
- Sample: oncology patients ages 2-18 yo and their parent proxy
- Instruments: PedsQL 3.0 Cancer Module
- Intervention: dose of CAT (# of sessions)



Solid Tumor

Non-Rinary

Unchecked

Checked

American Indian or

Black or

Continuous

Table 1. Demographics

No visits Low visits High visits (0), (1-3), (4+), Count(%) Count(%) Count(%)

8 (33.3%) 14 (40.0%) 11 (30.6%)

1 (2 9%)

1 (2.9%)

3 (8.6%)

3 (8.6%)

24 (100%) 32 (91.4%) 33 (91.7%

21 (87.5%) 31 (88.6%) 30 (83.3%)

3 (12.5%) 4 (11.4%) 6 (16.7%) 6 (25.0%) 8 (22.9%) 8 (23.5%)

18 (75.0%) 27 (77.1%) 26 (76.5%)

7 (29 2%) 8 (22 9%) 7 (19 4%)

10 (41.7%) 16 (45.7%) 12 (33.3%) 14 (58.3%) 19 (54.3%) 24 (66.7%)

0.0713 0.3621

8 (22 9%) 9 (25 0%)

16 (45.7%) 15 (42.9%)

34 (97.1%) 36 (100%)

32 (91.4%) 36 (100%)

9 (37 5%)

2 (8.3%)

9.46 ± 4.93 7.40 ± 4.42 7.25 ± 3.56 1.70 ± 0.47 1.81 ± 0.40 1.85 ± 0.36 0.6262

0.3385

0.4387

0.8689

# Research in Progress: The "Narwhal-A-Saur" of Data

Quality of Life Outcomes with Creative Arts Therapy in Children with Cancer

Jennifer L. Raybin, MSN, RN, CPNP; Marilyn Krajicek, EdD, RN, FAAN; Catherine Jankowski, PhD, FACSM

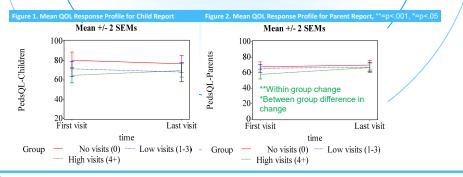


Photos and artwork by parent and participant permission.

#### **Results**

- Ninety-five children with cancer (average age 6 yo, SD (4,12)) and their parent proxy were enrolled:
  - 22 participants received no CAT
  - 36 received 1-3 sessions of CAT
  - 35 received > 4 sessions of CAT
- Solid, liquid, and brain tumors were equally divided between the groups (p < .05)</li>
- No difference between the groups on age, sex, race (p < .05)</li>
- Analysis continues to evaluate for a dose response relationship

		Table 2	2. Baseline	QOL			
			High				
	No visits	Low	visits				
	(0),	visits (1-	(4+),		p for	P for	
Baseline	Mean ±	3), Mean	Mean ±	p for Low	High vs.	High vs.	
PedsQL	SD	± SD	SD	vs. No	No	Low	- /
Child	74.13 ±	68.66 ±	64.82 ±	0.3656	0.0994	0.4843	1
Report	15.75	15.11	19.32				/
Parent	65.18 ±	64.57 ±	57.77 ±	0.8918	0.0949	0.0966	ľ
Report	15.75	16.25	17.61				



## **Limitations and Ongoing Work**

- Length of follow-up is a potential confounding factor
- Plan to truncate the data (e.g. by 6 months follow-up)
- Adjust statistically for length of followup
- Next steps: Enter exact dates for each CAT session in order to analyze the dose received compared to the time point of the questionnaire

# **Preliminary Conclusions**

- Cannot confirm a dose response relationship, but analysis is ongoing.
- Parent report of child QOL suggests dose response.
- Child self-report of QOL does not suggest dose response.
- No CAT was not significantly different than intervention groups, perhaps due to lack of power and selection bias.

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