516 | Breast Cancer Survivors' Perspectives on Social Support for Physical Activity in Peer-Matched Partnerships

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Background/rationale or Objectives/purpose: Physical activity (PA) can mitigate physical and psychosocial challenges that women may experience following a breast cancer diagnosis. However, PA levels among women living beyond a cancer diagnosis remain low. Optimizing social support provided in a peer-matched setting may increase PA. Unfortunately, factors that create an ideal peer-match are not well understood. The purpose of this study was to identify and explore social support factors for PA engagement among newly formed peers of women living beyond a cancer diagnosis.

Methodology or Methods: In an ecological momentary assessment study, women were matched with a peer and provided with a Fitbit activity tracker. Social support was measured using 21-daily surveys and a follow-up survey. Descriptive statistics were calculated. A content analysis was used to analyze open-ended survey data were based on (i) social support types (informational, tangible, esteem, and emotional support); and (ii) women's post-study reports of match quality.

Impact on practice or Results: On most days, women (Mean age=42.4±7.6 years; 89.2% stage I-III breast cancer) connected (58.1%) and exercised (77.1%). Three quality participant profiles were generated: good (63%), neutral (20%), or poor (17%) match. Women in a good match were more likely to report receiving support across support themes. The most frequently documented support received was esteem support (i.e., checking in with partner, discussing goals, exercise encouragement, general support).

Discussion or Conclusions: Findings describe the social support partner characteristics important to women for facilitating PA. This study provides valuable insight that can inform the development of partner-based PA interventions for women living beyond a cancer diagnosis.

525 | Exploring associations between insomnia, mood disturbance, and subjective cognitive impairment among cancer survivors

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Background/rationale or Objectives/purpose: Cancer survivors struggle with perceived cognitive impairment (PCI) and insomnia post-treatment. This study explored the degree to which insomnia severity and mood disturbance are associated with PCI.

Methodology or Methods: Cancer survivors with cognitive complaints and insomnia completed the Hospital Anxiety and Depression Scale (HADS), Insomnia Severity Index (ISI), and the Functional Assessment of Cancer Therapy - Cognitive Function (FACT-Cog). Correlations assessed relationships between insomnia severity, mood disturbances, and FACT-Cog subscales: perceived cognitive abilities (Cog-PCA), perceived cognitive impairments (Cog-PCI), and impact on quality of life (Cog-QoL). A hierarchical regression was used to identify variance in FACT-Cog scores accounted for by insomnia severity after adjusting for age, education, depression, and anxiety.

Impact on practice or Results: Participants (N = 79; 71% women) were an average of 58 years old with a mean of 16 years education. Worse PCA was associated with greater insomnia severity (r = -.29, p = .014.), but not with depression (r = -0.096, p = .42) and anxiety (r = -0.055, p = .64). PCI was not associated with insomnia, depression, or anxiety. QoL was associated with greater depression (r = -.29, p= .013) and anxiety (r = -.30, p= .050), but not insomnia. Age and education explained 0.85% of the variance in PCA (p = .74), while mood disturbance accounted for an extra 1.31% (p = .63). Insomnia accounted for an additional 9% of the variance in PCA (p = .011).

Discussion or Conclusions: Insomnia contributes to worsened perceptions of cognitive abilities, after adjusting for age, education, and mood disturbance. Improving sleep may alter this perception.

549 | An examination of depression, anxiety, and fear of recurrence among cancer survivors who participated in a virtual, cognitive behavioural therapy (CBT)-based telephone coaching program

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Background/rationale or Objectives/purpose: Depression, anxiety, and fear of recurrence (FOR) are prevalent among cancer survivors, and it is recommended that they have access to supportive services and resources to address psychosocial needs during follow-up care. This study examined the impact of a virtual, cognitive behavioural therapy (CBT)-based telephone coaching program (BounceBack®) on depression, anxiety and FOR.

Methodology or Methods: Through the After Cancer Treatment Transition (ACTT) clinic at Women's College Hospital (Toronto, Canada), eligible participants were identified, consented, and referred to the BounceBack® program. Program participation involved completion of self-selected online workbooks and support from trained telephone coaches. Measures of depression (PHQ-9), anxiety (GAD-7), and FOR (fear of cancer recurrence inventory, FCRI) were collected at pre-intervention (baseline) and post-intervention (6-mon and 12-mon time points). Paired t-tests compared mean scores for each symptom between study time points. Participant experiences and perceptions were collected through a survey.

Impact on practice or Results: Measures of depression and anxiety significantly improved among participants from pre-intervention to post-intervention. Scores for PHQ-9 and GAD-7 decreased from moderate to mild levels. Measure of FOR also significantly improved; while FCRI subscale scores significantly improved for 5 of the 7 factors that characterize FOR (triggers, severity, psychological distress, functional impairment, insight). Participants rated the intervention a mean score of 7 (out of 10), indicating a moderate level of satisfaction and usefulness.

Discussion or Conclusions: This study suggested that a virtual CBT-based telephone coaching program can be an effective approach to improving depression, anxiety, and fear of cancer recurrence in cancer survivors.