Pilot Study: Art Therapy Can Reduce Cancer-Related Pain & Anxiety

By Heather Lindsey

Art therapy may reduce a broad spectrum of symptoms related to pain and anxiety in cancer patients, according to a pilot study published in the Journal of Pain and Symptom Management (2006;31:162-169).

Lead author Nancy Nainis, MA, ATR, an art therapist at Northwestern Memorial Hospital in Chicago, said that more research is needed, but the results should encourage oncologists who are interested in this type of complementary therapy “to empower patients to find outlets of self-expression.”

Ms. Nainis and her colleagues studied 50 patients from the hospital’s oncology unit over a four-month period. Most had leukemia (29%) or lymphoma (33%), and the rest had a variety of other cancers including breast, gastrointestinal, and gynecologic.

Types of Art Therapy

Each art therapy session, conducted with registered art therapists, was individualized, with patients offered a choice of subject matter and media, including (in order of the patients’ preference) drawing with pencils or charcoal, stain glass painting, jewelry making with beads, painting with watercolors, clay molding, decorating a wooden frame, making masks, decorating a rain stick, creating a collage, looking at a book of pictures, coloring in a coloring book.

Nancy Nainis, MA, ATR (shown preparing art materials to use with patients): “My hope is that this study will open the door to many more studies on how best to use the healing aspects of art.”

Possible Mechanisms at Work

Art therapy may have a positive impact on patient’s well-being for a number of reasons, Dr. Bruera said.

“One could say that the anecdotal experience is that art therapy can help patients mostly in the emotional area.” Emotional distress such as anxiety and depression have an impact on the way patients express physical distress symptoms such as pain, tiredness, and lack of appetite, and if art therapy makes patients feel a little less anxious and depressed it may have an effect on lowering overall distress.

Patients use various therapeutic interventions for assistance with coping and for symptom control, always according to their preferences, commented Barrie Cassileth, PhD, Chief of the Integrative Medicine Service at Memorial Sloan-Kettering Cancer Center.

“Patients may be drawn to dance therapy, massage, yoga, music, art, or other therapies, and typically will find comfort in this favored activity. When patients self-select a complementary modality, it would be surprising were they not to feel better.”

The act of selecting a complementary therapy and electing to participate in it provides some control during a circumstance where control is extremely difficult for patients to achieve, she added.

Some literature indicates that the creative art-making process may have a neurological impact, Ms. Nainis said. There are hypotheses about the biological reasons that art therapy may affect well-being, but for now there are no clear data.

Still, Dr. Bruera said, whether art therapy works through a specific physiological effect or is simply a distraction probably does not matter too much if the effect is an improvement in the way patients feel.

Difficult to Study

While art therapy may have its benefits, it is difficult to study, since it cannot be standardized in the same way that other nonpharmacologic therapies can, Dr. Paice explained.

“We also need to get double-blind studies with control groups if we want to have credibility in the scientific community,” Ms. Nainis said. “My hope is that this study will open the door to many more studies on how best to use the healing aspects of art.”