

Effects of a Brief Cognitive Behavioral Treatment vs Attention Control for Body Image-Related Distress Among Head and Neck Cancer Survivors: A Multi-Site RCT

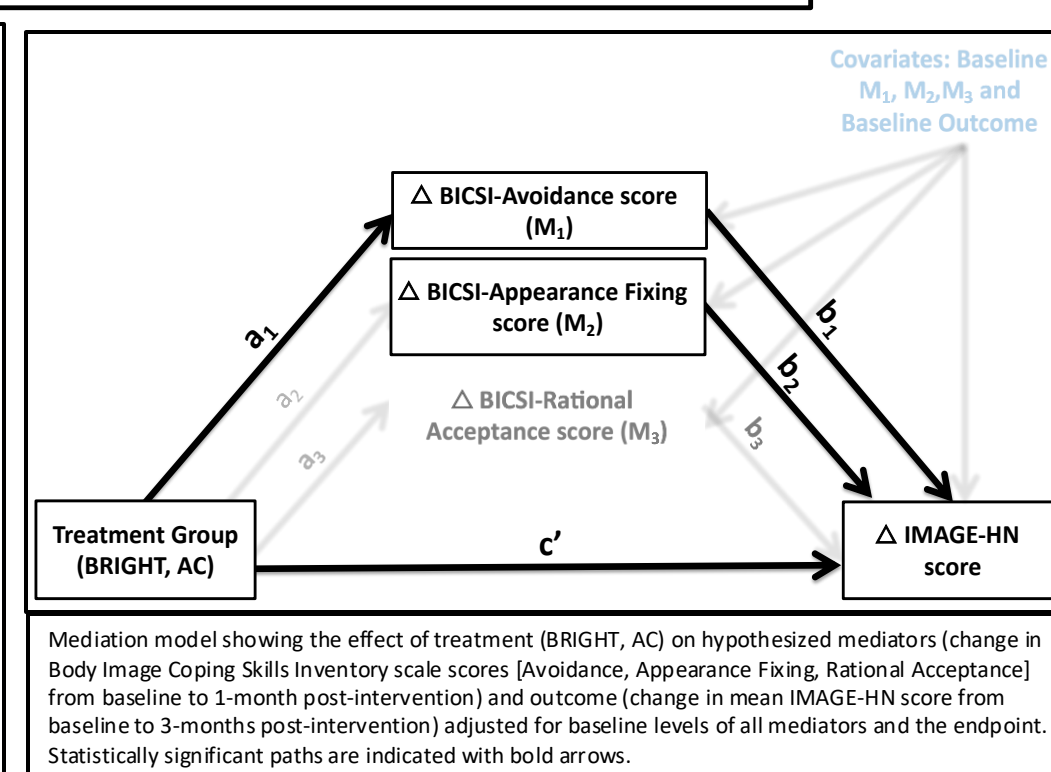
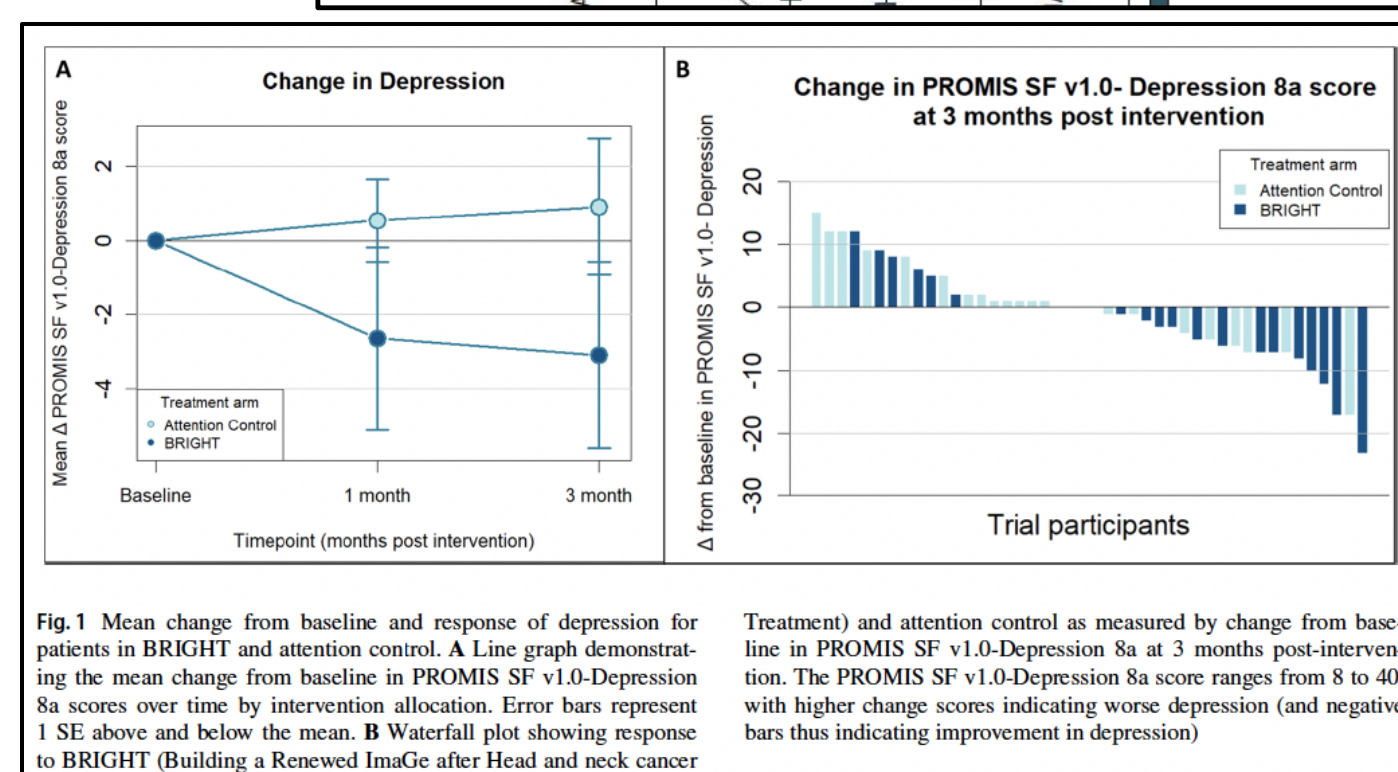
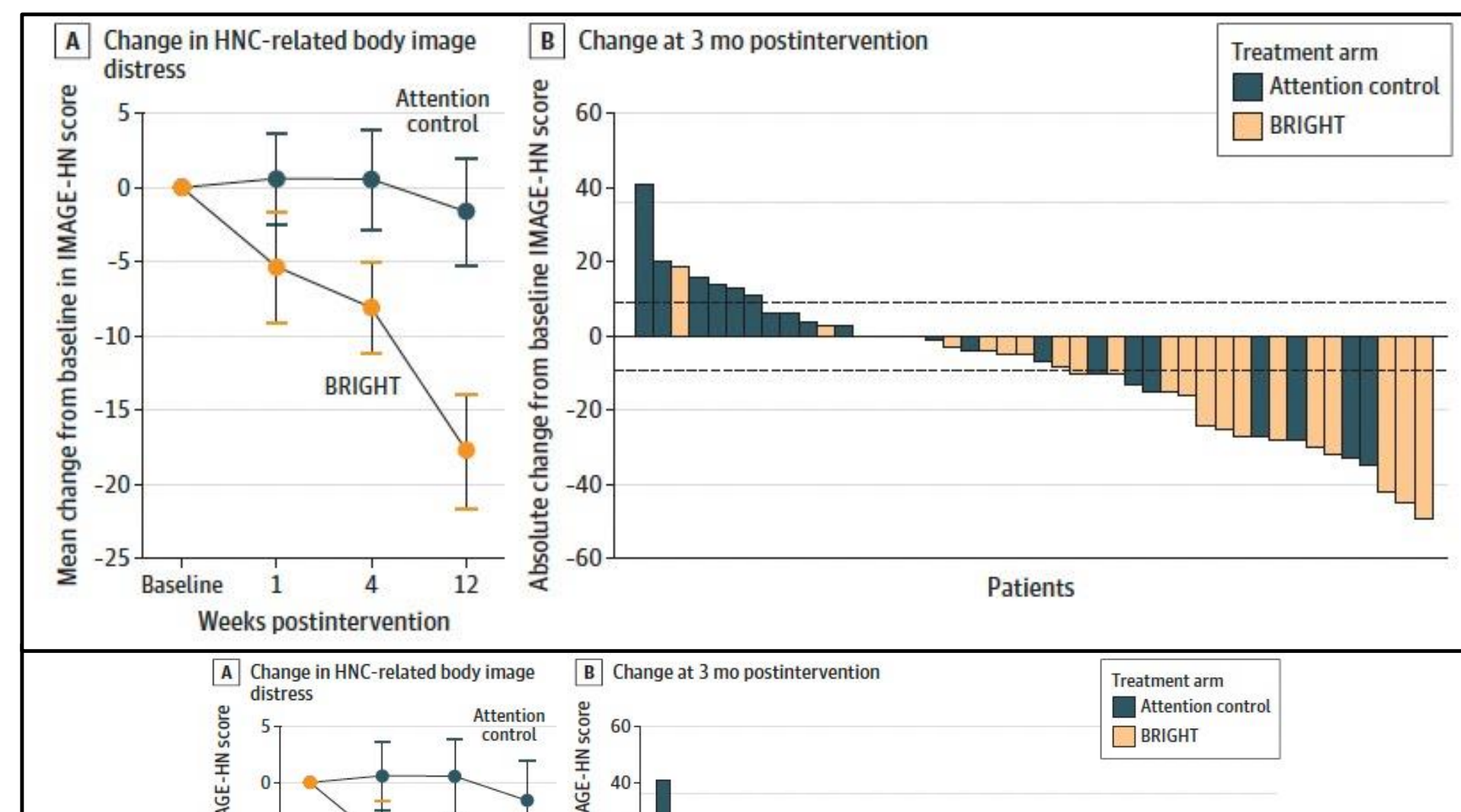
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Significance

- 1 in 4 head and neck cancer (HNC) survivors suffers from clinically significant body image distress (BID), with subsequent psychosocial morbidity and decreased QOL.¹
- Evidence-based interventions to manage BID among HNC survivors are lacking.²
- CBT is a promising approach to manage HNC-related BID.³
- Mechanisms underlying CBT for BID are poorly characterized
- We developed BRIGHT as a brief tailored CBT that targets maladaptive body image coping among HNC survivors.^{4,5,6}

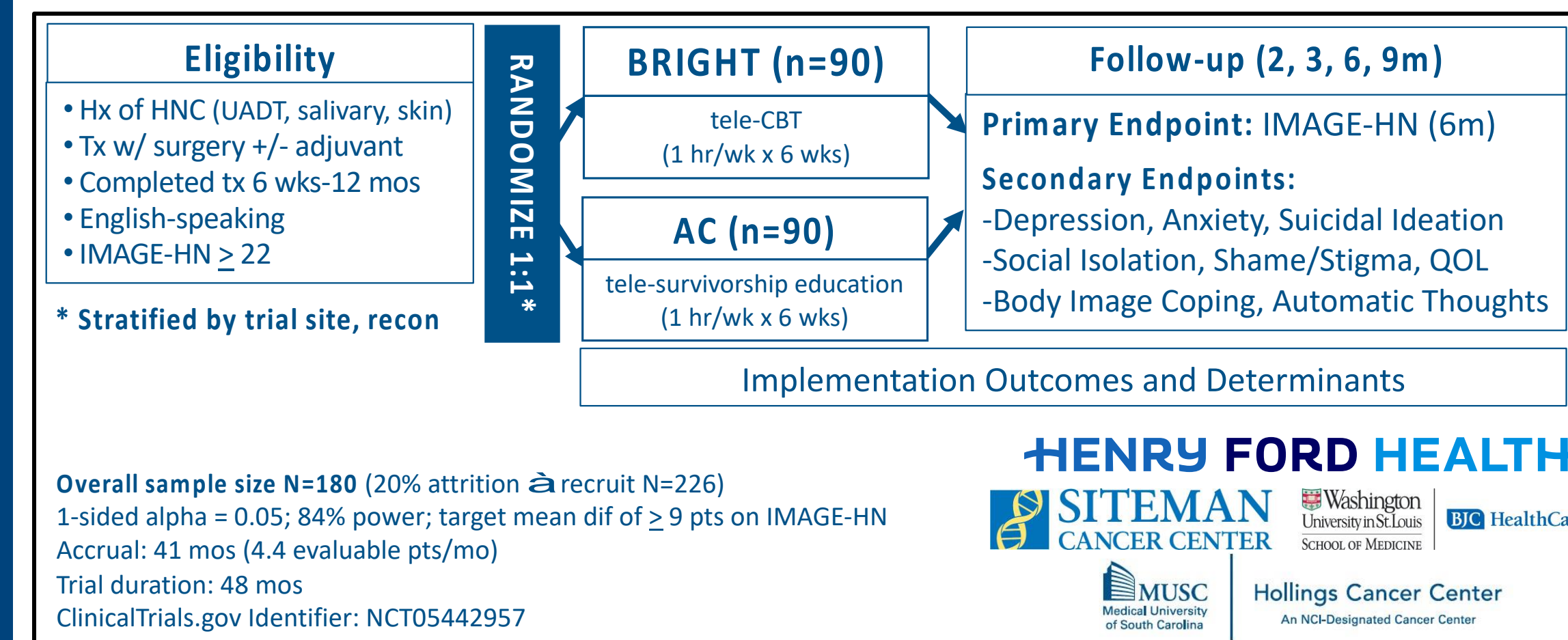


Study findings may support BRIGHT as a new standard of clinical care leading to improved psychosocial morbidity and QOL for HNC survivors; optimize the effectiveness of CBT for BID; and enhance the implementation of psychosocial interventions for cancer survivors in diverse care settings.



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Approach



- BRIGHT = manualized, theory-based CBT consisting of 6 weekly 60-minute sessions delivered 1:1 by a psychologist via video telemedicine
- Attention Control (AC) = dose + delivery matched survivorship video education

Future Directions

- Hybrid effectiveness-implementation trials to evaluate BRIGHT in diverse settings
- Self-guided digital platform to enhance scalability and reach

- Current ly 4 patients enrolled at HFH, X across all sites

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