Psychotropic Medications in Oncology

Erin Biringen¹, Emily Cox-Martin⁴, Sierra Niemiec³, Cheyret Wood³, W Thomas Purcell², Elissa Kolva²

¹University of Colorado School of Medicine, ²University of Colorado Cancer Center, ³Colorado School of Public Health, ⁴VA Puget Sound Health System

Abstract

Context: Psychological distress is common in patients with cancer, and oncology providers are often tasked with utilizing psychotropic medications to treat such symptoms.

Objective: The aim of this study is to characterize how oncology providers prescribe psychotropic medications and to assess their comfort level with prescribing these medications.

Methods: A cross-sectional survey was sent to oncology medical doctors, nurse practitioners, and physician assistants who prescribe psychotropic medications to patients with cancer at a large academic medical center in the Mountain West. The survey included questions regarding provider subspecialty, degree, comfort with prescribing psychotropic medications, and factors that influenced and limited their prescribing.

Results: Oncology providers (n = 65) reported equal proportions of comfort and discomfort with prescribing psychotropic medications. The medication class with the most prescribers was benzodiazepines, with 89.2% (n = 58) of respondents prescribing those medications. The least prescribed category was mood stabilizers, with 4.6% (n = 3) prescribing this category. Prescribers identified that the most significant barriers to their comfort included difficulty connecting patients to follow-up care with mental health professionals and inadequate mental health education for providers. Providers responded that continuing mental health education and increasing patient access to mental health resources would increase their prescribing comfort.

Conclusion: Prescribers may benefit from focused mental health education during their formal training years as well as continued education throughout their oncology careers. A clinical care pathway for prescribing psychotropic medications and resources to connect patients to long-term mental health care may also increase prescribing comfort.