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**ABSTRACT**

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**A Biobehavioral Intervention for Young Adults with Testicular Cancer**

Cancer diagnosis, especially one that threatens sexuality and reproductive health, can be distressing in the formative period of young adulthood. Young adulthood, or “emerging adulthood”, is a critical developmental phase in which young people are negotiating greater independence and autonomy in social, professional, and physical domains. Emerging adults identify unique psychosocial experiences including feeling “in between” the struggles of adolescence and the responsibilities of adulthood. It is a period marked by exploration, mobility, self-focus, and an optimistic outlook on goal attainment. Chronic illness experienced as “off time” in the lifespan can interrupt goal pursuits and threaten educational, career, relational, and other valued life directions. Re-entry to post-cancer life can be particularly difficult for a portion of young adults following cancer treatment and recovery. However, few effective interventions exist to assist young survivors in re-negotiating life goals and managing cancer-related emotions. In fact, there are no empirically-supported interventions to date that attend to these mechanisms for young adult survivors.

Responsive to the need for translational research and the mission of the ICTS, the goals of this study are to examine the preliminary effects of a developed biobehavioral intervention (Goal-Focused Emotion-Regulation Therapy or “GET”) relative to time-matched traditional supportive therapy. This will be achieved by accomplishing the following aims: 1) To determine preliminary effects of GET for young adult men with testicular cancer on distress relative to supportive therapy; To determine preliminary effects of GET for young adult men with testicular cancer on emotion-regulation and goal attainment skills relative to supportive therapy; and 3) To determine preliminary effects of GET for young adult men with testicular cancer on proinflammatory immune markers, Salivary cortisol, and diurnal alpha amylase rhythm relative to supportive therapy.

This will be accomplished through the conduct of a pilot randomized controlled trial of 60 patients recruited from UC Irvine Chao Family Comprehensive Cancer Center (CFCCC), Children’s Hospital of Orange County (CHOC), and Memorial Sloan Kettering Cancer Center (MSKCC). Participants will complete assessments of (1) psychological distress as the primary outcome variable, as well as (2) goal adjustment skills, (3) emotion regulation and coping, and (4) sense of life purpose as potential processes of change. Likewise, physiological processes will be measured including (1) circulating inflammatory markers, (2) salivary diurnal cortisol, and (3) salivary diurnal alpha amylase. The design of this study and of the GET intervention is predicated on a series of basic behavioral research trials published by the PI.

Incremental translational research is necessary to form the basis of evidence-based practice in behavioral oncology. This project answers the call for more translational research to better serve cancer survivors. It is among the first behavioral interventions to be tested in this population, and has potential to further the understanding of how behavioral and psychological factors can influence biological processes. . Results from this pilot study will be used to seek NIH funding for a larger randomized efficacy trial.