

The Psychology of Rapid Change: Adaptation, Anticipatory Grief and Uncertainty in Pancreatic Cancer

Presented by:
Dr Sarah Noakes
Macmillan Counselling Psychologist in Palliative Care

Date: 22/10/2026

Learning Outcomes

- Understand the psychological impact of rapid change in pancreatic cancer
- Recognise anticipatory grief beyond end-of-life settings
- Understand the role of uncertainty in distress and adjustment
- Consider implications for clinical practice



When you think about pancreatic cancer, what do you think is the greatest psychological challenge patients face?

Adaptation Under Pressure

Why pancreatic cancer is psychologically distinctive?

- Diagnostic uncertainty
- Sudden life disruption
- High symptom burden
- Compressed timelines
- Prognostic uncertainty
- Impact on family systems

What happens when psychological adaptation cannot keep pace with medical events

People may experience:

- Shock
- Overwhelm
- Confusion
- Distress
- Difficulties processing information
- A loss of psychological footing

This is David, 64

Three weeks ago, David attended his GP because of abdominal discomfort and weight loss. Within two weeks he had undergone investigations and received a diagnosis of pancreatic cancer.

At the consultation where treatment options are discussed he appears calm and says he is "fine."

However:

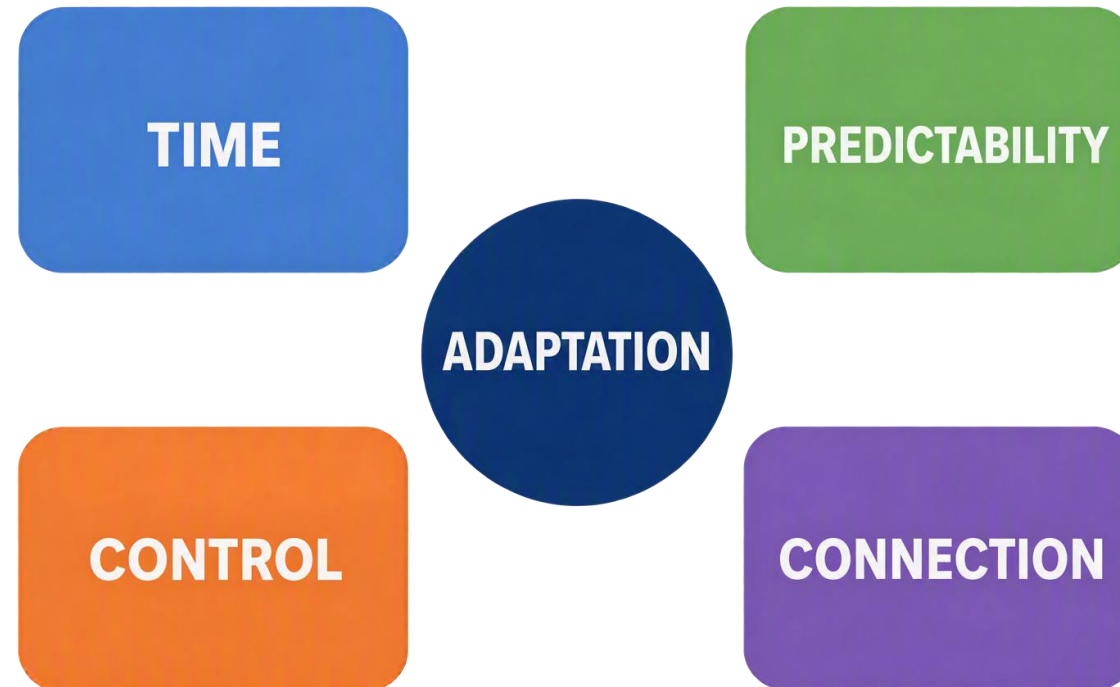
- He struggles to recall information from appointments.
- His spouse reports he seems detached and distracted.
- He has not told several close friends about the diagnosis.
- He repeatedly asks questions that have already been answered.
- He tells staff, "I don't think it's really sunk in yet"

**What might be
happening
psychologically for
David?**



Distress is not always a sign of poor coping. It may reflect normal adaptation to extraordinary change.

Adaptation: What helps people adjust to major life change?



Time: The Opportunity to Psychologically Catch Up

People need time to:

- Understand what is happening
- Process the emotional impact
- Reconstruct a sense of the future
- Adjust to changing roles and relationships
- Integrate illness into their sense of self

"I know what's happening, but I haven't quite caught up with it yet."

Predictability: Making Sense of What Comes Next

People often want to know:

- What will happen next?
- Will treatment work?
- How quickly might things change?
- What should I prepare for?
- How much time do I have?

When answers are uncertain, people may feel unable to fully orient themselves to the future.

Control: Retaining Choice and Agency

People may not be able to choose:

- Their diagnosis
- The course of their illness
- The outcome of treatment

But they may still be able to choose:

- How they spend their time
- Who they share information with
- What matters most to them
- How they make decisions

Control is not about changing the situation. It is about maintaining agency within it.

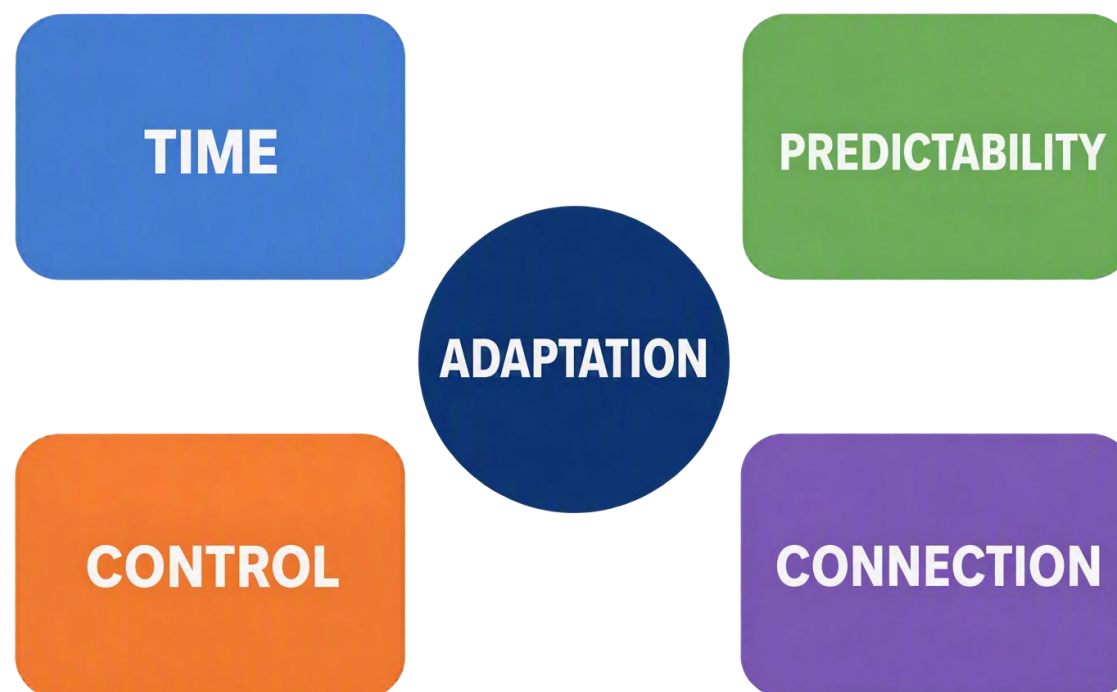
Connection: Adapting Alongside Others

Connection can help people to:

- Feel seen and understood
- Make sense of difficult experiences
- Maintain hope and meaning
- Navigate practical and emotional challenges
- Cope with change over time

We adapt not only as individuals, but within relationships.

Audience Poll: Which of these is most threatened for people affected by pancreatic cancer?



Anticipatory Grief: Mourning Losses Before They Have Gone

More than Preparing for Death

Anticipatory grief is the emotional response to losses that are occurring now, as well as losses that may occur in the future. People may grieve:

- Health
- Independence
- Identity
- Roles and relationships
- Future plans
- Assumptions about life

Anticipatory grief is not limited to end-of-life.

Thoughts from the Audience

What losses do you hear patients grieving most often?

People often grieve multiple losses simultaneously

- Future plans
- Independence
- Work and purpose
- Family roles
- Physical abilities
- Confidence in the body
- Certainty about the future

The Loss of the Assumed Future

- Most people hold assumptions about:
- Growing older
- Family milestones
- Holidays and celebrations
- Retirement
- Personal goals and ambitions

A diagnosis may challenge these assumptions suddenly.

People may grieve futures that have not yet been lost but no longer feel guaranteed.

The Paradox of Anticipatory Grief

People can experience:

- ✓ Hope and sadness
- ✓ Acceptance and fear
- ✓ Gratitude and anger
- ✓ Planning and avoidance

Case Example: Margaret, 58



Margaret recently completed treatment planning and repeatedly talks about her daughter's wedding next year.

She becomes tearful when discussing dresses, photographs and future family events.

She says: "I don't know if I'll be there."

What losses might Margaret be grieving?

Uncertainty: Living Without Answers

Uncertainty: A Central Psychological Challenge

People often ask:

- What will happen next?
- Will treatment work?
- How quickly will things change?
- Will I be there for important milestones?
- How much time do I have?

Many of the questions that matter most have no definitive answers.

Why Uncertainty Matters

Uncertainty can make it difficult to:

- Plan
- Prepare
- Prioritise
- Make decisions
- Feel settled

The future becomes harder to organise psychologically.

The Search for Certainty

When uncertainty becomes difficult to tolerate, people may:

- Seek repeated reassurance
- Ask the same questions multiple times
- Search for additional information
- Focus intensely on appointments and scans
- Delay decisions until they feel "certain"

Quiz Time: The Search for Certainty

A patient repeatedly asks: *"But how long do I actually have?"*

What might they be seeking?

Living Alongside Uncertainty

Psychological adjustment may involve learning to:

- Make decisions without certainty
- Continue valued activities despite uncertainty
- Hold hope and realism together
- Focus attention on what matters now

The goal is not always (rarely) certainty. Sometimes it is learning how to live well without it.

Implications for Clinical Practice

Supporting people through rapid change, grief and uncertainty

Asking Yourself a Different Question

Rather than asking:

✗ "Why isn't this patient coping?"

Consider asking:

✓ "What is making adaptation difficult?"

Possible areas to explore:

- Time
- Predictability
- Control
- Connection

Distress may reflect disrupted adaptation rather than psychopathology.

Creating Space for Adaptation

Healthcare professionals cannot always change the situation but can help create space for adaptation.

We can:

- Slow conversations down
- Break information into manageable chunks
- Revisit important discussions
- Check understanding over time (layering conversations)
- Normalise the need to process gradually

Working with Anticipatory Grief

Helpful responses include:

- Naming losses directly
- Validating grief before loss occurs
- Exploring what matters most
- Recognising multiple concurrent losses
- Allowing space for mixed emotions

Try to remember people may be grieving

- Futures
- Identities
- Roles
- Relationships
- Assumptions...

...as much as physical decline.

Working with Uncertainty

Helpful responses include:

- Acknowledge uncertainty openly
- Avoid false reassurance (even when the urge to make people feel better is strong)
- Clarify what is known and unknown
- Support decision-making despite uncertainty
- Help people focus on what is important now

For example...

Instead of:

"Try not to worry about that."

Try:

"That sounds like a difficult uncertainty to carry."

The Balance We Are Trying to Achieve

Hope

- ✓ Meaning
- ✓ Goals
- ✓ Important moments
- ✓ Treatment possibilities

Reality

- ✓ Losses
- ✓ Prognosis
- ✓ Difficult decisions
- ✓ Uncertainty

Good psychological care makes space for both.

Remember David?

Rapid diagnosis

Treatment decisions

Difficulty retaining information

Appears detached





What does David need?

① The Slido app must be installed on every computer you're presenting from

slido

Key Take Home Messages

1. The speed of change matters.
2. Psychological adaptation often lags behind medical events.
3. Anticipatory grief extends beyond end-of-life concerns.
4. Uncertainty is a major source of distress.
5. Our role is often to support adaptation rather than eliminate distress.

Moment of Reflection

What is one thing you will take away into your practice after today's webinar?

Thank you.

References

- Coelho, A., & Barbosa, A. (2017). Family anticipatory grief: An integrative literature review. *American Journal of Hospice and Palliative Medicine*, 34(8), 774-785.
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98(2), 310-357.
- Janoff-Bulman, R. (1992). *Shattered assumptions: Towards a new psychology of trauma*. Free Press.
- Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping*. Springer Publishing Company.
- Mishel, M. H. (1988). Uncertainty in illness. *Image: The Journal of Nursing Scholarship*, 20(4), 225-232.
- Mishel, M. H. (1990). Reconceptualization of the uncertainty in illness theory. *Image: Journal of Nursing Scholarship*, 22(4), 256-262.
- Stroebe, M., & Schut, H. (1999). The dual process model of coping with bereavement: Rationale and description. *Death Studies*, 23(3), 197-224.