Experiences, Coping and Holistic Needs Assessment in UK Breast Cancer Survivors

BY LYDIA BRIGGS

# Background: Breast Cancer

Breast cancer affects 1 in 8 women worldwide, with there currently being 691,000 individuals living with or beyond the disease in the UK (Cancer Research UK, 2014), and 1.7 million cases were diagnosed globally in 2012 alone (IARC, 2012).

Breast cancer represents 25% of all cancer diagnosed worldwide (IARC, 2012).

Survival rates are on the increase, with 86% currently living five years beyond their diagnosis in the UK (Cancer Research UK, 2014).



# Background: Unmet Needs

What are the implications of this rising population?

According to Macmillan Cancer Support, the average person living with or beyond cancer reports five 'unmet needs' (Rowe, Young and Rowlands, 2014). Research indicates that there are a myriad of physical, psychological and social concerns which can affect people's lives long after their treatment (NCSI, 2013).





# Background: Common Concerns



#### PHYSICAL

Pain
Exhaustion
Lymphoedema
Hot flushes
Aches and Pains
Reduced mobility
Loss of sensation
Skin changes



#### EMOTIONAL

Depression
 Anxiety
 Isolation
 Abandonment
 Loss of confidence
 Mood changes
 Anger
 Hopelessness



SOCIAL

Family issues
Housing issues
Financial issues
Returning to work
Relationship strain
Worry about children
Poor social support



# Background: The Recovery Package

The cancer strategy for England and collaborative work of the National Cancer Survivorship Initiative have recognised the importance of encouraging selfmanagement and a better quality of life for those living with and beyond cancer (Independent Cancer Taskforce, 2015; NCSI, 2013), which led to the creation of 'The Recovery Package'; a series of interventions which should be offered to every individual diagnosed with cancer (NCSI, 2013):

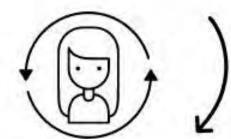
Holistic Needs Assessment and Care Planning, Treatment Summaries, Cancer Care Review and Health and Wellbeing Event  The care plan is shared with the patient and other care providers Macmillan's Electronic Holistic Needs Assessment (eHNA)



Holistic Needs Assessment & Care Planning

#### Identifies\_

 physical, emotional, social, practical and spiritual concerns



#### Actions.

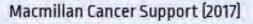
 are put into place with the patient to address the concerns such as signposting and referrals



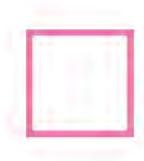
 A corresponding care plan is created by the healthcare professional to discuss these

E	_	_	_		Т
ь	_	_	_		L
Ŀ	_	_	_	-	L
ь	_	_			L
E					L

 Allows the patient to rate these from 0-10 based on severity



# The Study: Aims



The study aimed to understand the experiences of having and coping with breast cancer

A further aim was to discuss and gain an understanding of participants' experiences of completing Macmillan's eHNA as part of their routine aftercare.

## Recruitment

15 UK Breast Cancer Survivors aged 46 to 81 with a diagnosis of non-metastatic invasive breast cancer who had been treated surgically were recruited for the study. These were recruited through an NHS clinic and full NHS ethical approval was granted for the study.

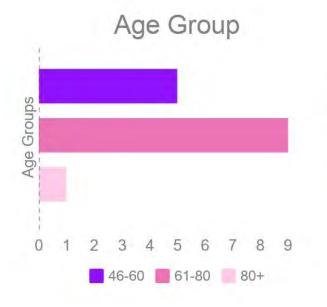
Letters of invitation were sent by the usual care provider

# Data Collection

Semi-structured interviews were undertaken ranging in length from 25 minutes to 1 hour 10 minutes.

Participants were offered the option to be interviewed either at home or in the hospital (54% home, 46% hospital). Data Analysis

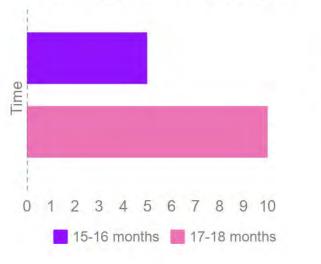
Interviews were transcribed manually and coded through NVivo 11. The principles of thematic analysis were utilised to generate 4 themes and 11 subthemes.

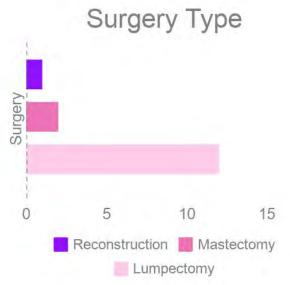


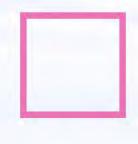


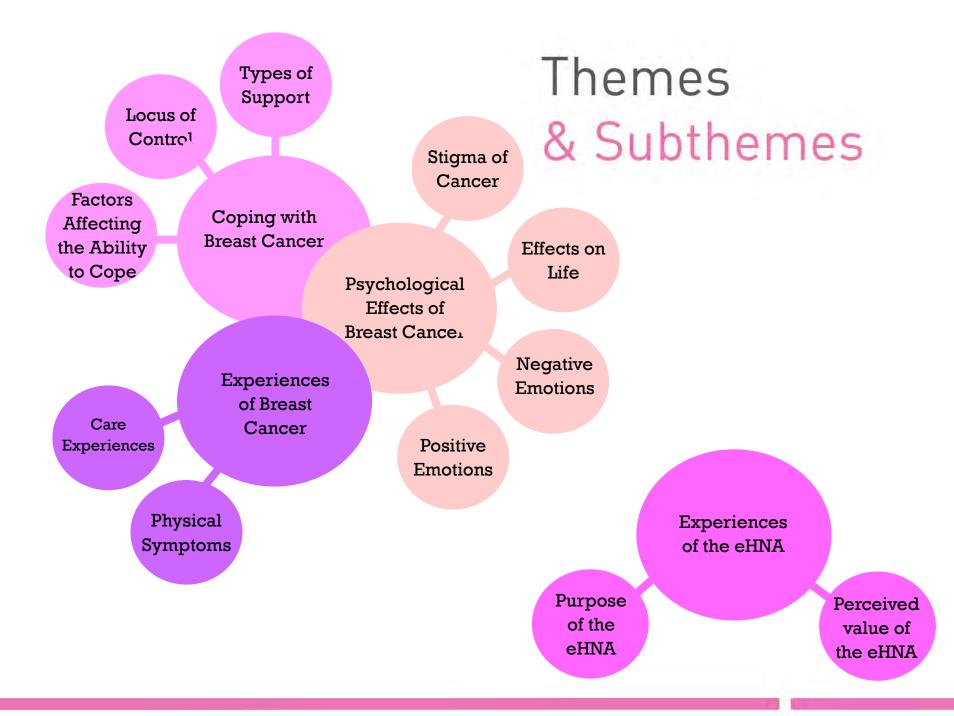
### Participant Demographics

**Time Since Treatment** 









#### Locus of Control

"It's the guilt yeah, because you just think well I'm lucky, there are people who are gonna be there who aren't, let them have the time" (Participant 6)

"Sometimes I think did I sort of cheat something... is something gonna come along?" (Participant 11)

### Theme 1: Coping with Breast Cancer

# Factors affecting the ability to cope

"I remember thinking how am I gonna get through all of this, and then I thought well it's a bit like how do you eat an elephant... a bit at a time." (Participant 3)



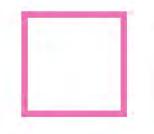
"I really didn't want to talk about it... I really didn't... I think I probably kept it fairly well contained." (Participant 2)

### Theme 1: Coping with Breast Cancer

#### Types of Support

"Everything I wanted to know was there and I know that nurse I could ask anytime, I could ring her, that special nurse I had." (Participant 12) "You're not ever gonna see them again... and you can confide, because you know that they will completely perhaps understand what you're saying cause you're going through it, whereas friends and relatives that haven't been through that perhaps don't understand your emotions and your thinking." (Participant 16)





### Theme 2: Experiences of Breast Cancer



### Care Experiences

"I just wanted somebody to look at me as a person and listen to me." (Participant 14) "Somebody just to sit down with you and just explain and just be nice about it, they're just so cold." (Participant 10)

### Physical Symptoms

Hot Flushes Breast Pain Sleep Disturbances Exhaustion General Aches and Pains

### Theme 3: Psychological Effects of Breast Cancer

#### Stigma of Cancer

"I think you notice more, how many people are dying with cancer, everything seems to be people dying with cancer." (Participant 3)

"I don't know whether it's because he was frightened of the word cancer as well." (Participant 14)



### Theme 3: Psychological Effects of Breast Cancer

#### Effects on Life

"Well I think having breast cancer changes your outlook on life, totally... or I suppose any sort of cancer." (Participant 5) "I think you realise that so many years you've been saying, oh I can't wait for the kids to grow up, can't wait to retire, can't wait for this, can't wait for that... and you have to enjoy every minute that you get because... you don't know when that's gonna stop." (Participant 6)

"I mean apart from going to bed early... I wouldn't... I wouldn't say much had changed." (Participant 2)

### Theme 3: Psychological Effects of Breast Cancer

#### **Negative Emotions**

#### **Positive Emotions**

"It feels like you've gone through a war and you're left with the battle scars, and you're just stood in that field and you're the only one alive, and you're stood there, and you feel like isolated and lonely, you don't know where to go." (Participant 7)

"I wasn't struggling or anything, I'm always quite a positive person and I look forward rather than back." (Participant 4) "Yeah, I think it's just a matter of telling yourself to get through it somehow whatever way you can." (Participant 1)

### Theme 4: Experiences of the eHNA

### Purpose of the eHNA

"It was never portrayed to me to be a tool to help me." (Participant 4) "I thought it was for research... I didn't think it was for me particularly." (Participant 12)



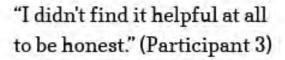


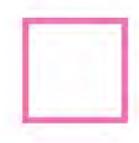
### Theme 4: Experiences of the eHNA

### Perceived value of the eHNA

"So I suppose maybe it just felt like an add on... it's just something you need to do... so whether or how meaningful it was I don't know." (Participant 11)

"In my case I thought it was a waste of time." (Participant 13)







#### Continued...

"Because I think you just think, well I'm just being silly... haven't got any worries, haven't have I, I'm alive." (Participant 6) "Because I think psychologically... you know and then maybe a part of you also is almost like... well if I put all of this, then... will they call me back in?" (Participant 11)

"I think it's... you can cope... with sadness and loneliness, but you can't cope with pain if there's something there, I think that's why I put the pain down, because I knew it was there." (Participant 14)



### Conclusions

Issues faced by women treated for breast cancer last long after treatment.

Significant individual differences exist.

A more tailored and personalised approach to care is required.

There is also a need for greater communication and further research around implementation of the eHNA.

### Implications For Future Research

### Next Steps...



Future research should focus on how the eHNA can be used to provide a more tailored approach to support each individual living with and beyond breast cancer. This should include a focus on:

Barriers to raising psychological concerns

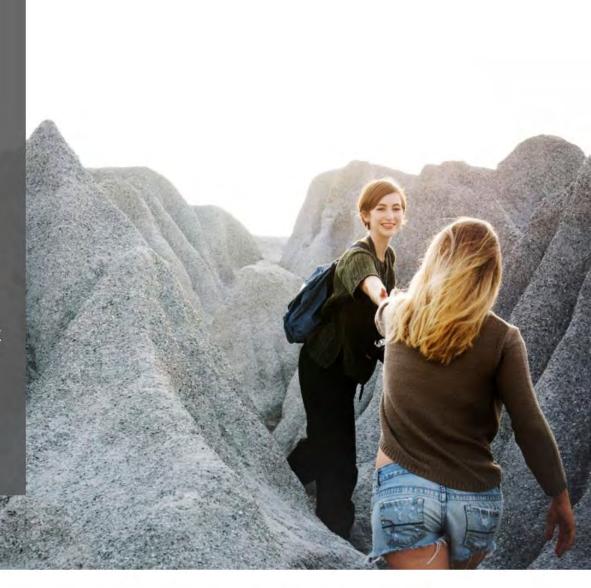
How the eHNA is implemented

Variations in care when delivering the eHNA

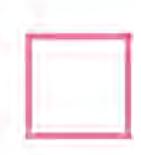
Staff perspectives

# ] Thank ] You

Email: lydia.briggs@nottingham.ac.uk Twitter: @lydiabriggs91



### Reference List



Cancer Research UK [2014] Breast Cancer Statistics [online]. Available at: http://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/breastcancer#heading-Three [Accessed 5th January 2018].

Independent Cancer Taskforce (2015) Achieving World-Class Cancer Outcomes: A Strategy for England 2015-2020. Available at: https://www.cancerresearchuk.org/sites/default/files/achieving\_world-class\_cancer\_outcomes\_-\_a\_strategy\_for\_england\_2015-2020.pdf (Accessed 21st March 2018).

International Agency for Research on Cancer (IARC) (2012) Section of Cancer Surveillance [online]. Available at: http://globocan.iarc.fr/Pages/fact\_sheets\_population.aspx [Accessed 6th April 2018].

Macmillan Cancer Support [2017] The Recovery Package. Available at: http://www.macmillan.org.uk/about-us/healthprofessionals/programmes-and-services/recovery-package#297633[Accessed 6th April 2018].

Rowe, J., Young, N. and Rowlands, S. (2014) The Recovery Package. London: Macmillan Cancer Support. National Cancer Survivorship Initiative (NCSI) (2013) Living with and beyond cancer: Taking action to improve outcomes. London: NCSI.