

Discussing future expectations with incurable breast cancer patients: Quality of communication from a patient perspective.

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The aim of this project is to determine optimal communication strategies for prognostic disclosure in the palliative phase of breast cancer from a patient perspective. Study 1: To explore breast cancer survivors', healthy women's and oncologists'...

Ethische beoordeling	Positief advies
Status	Werving gestart
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON22103

Bron

NTR

Aandoening

(breast) cancer
palliative care
communication
analogue patients

Ondersteuning

Primaire sponsor: NIVEL

Overige ondersteuning: SPINOZA-award Prof. dr. J. M. Bensing

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Study 1:

Qualitative data: Opinions concerning the disclosure of a palliative prognosis and the role of hope and explicitness herein.

Study 2:

Experiment: Anxiety- and uncertainty reduction.

Toelichting onderzoek

Achtergrond van het onderzoek

Good communication is essential in health care, especially in sensitive areas such as the transition from curative to palliative cancer care. While all patients want to be aware of their disease's terminal nature, how explicit oncologist should be in their prognostic information is still unknown. In addition, the need for hope persists for all cancer patients, at the same time as the need for honest information. But what comprises hope is still unknown and an empirical base for its beneficial effect is lacking. The aim of this project is to determine optimal communication strategies for prognostic disclosure in the palliative phase of breast cancer from a patient perspective. In a first study, breast cancer survivors', healthy women's and oncologists' opinions on which topics they consider important when discussing a palliative prognostic disclosure and how oncologists can trade the fine lines between providing general as opposed to explicit information and realistic as opposed to hopeful information when discussing these topics are explored. With the data of this first study, 4 written scripts and role-played video-vignettes of a prognostic disclosure are created in which the level of explicitness of information and expressed hope are systematically varied. Breast cancer survivors and healthy women watch these video-vignettes and their perceptions of the communication are assessed. A sub sample of the subjects will participate in focus groups to provide qualitative information about their opinions concerning the varied communication elements.

Doel van het onderzoek

The aim of this project is to determine optimal communication strategies for prognostic disclosure in the palliative phase of breast cancer from a patient perspective.

Study 1: To explore breast cancer survivors', healthy women's and oncologists' opinions on which topics they consider important when discussing a palliative prognostic disclosure and how oncologists can trade the fine lines between providing general as opposed to explicit information and realistic as opposed to hopeful information when discussing these topics.

Study 2: To determine the main and interaction effects of the levels of explicitness of

information and expressed hope when providing prognostic disclosure in palliative breast cancer, using a systematic controlled study design (participants watch created video-vignettes in which the level of explicitness and hope are systematically varied).

Onderzoeksopzet

Study 1:

Qualitative data during the focus groups.

Study 2:

1. At T(0) (one time, before watching video): Anxiety: STAI-trait and STAI-state.

2. At T(1)-T(4) (4 times, after watching every video):

A. Satisfaction: PSQ and self created 0-10 VAS scale;

B. Anxiety reduction: STAI-state and self-created 0-10 VAS scale;

C. Uncertainty reduction: Self created 0-10 VAS scale;

D. Self efficacy: Self created 0-10 VAS scale;

3. At T(5): During focusgroup qualitative data.

Onderzoeksproduct en/of interventie

Study 1:

Focus groups (for breast cancer survivors and healthy subjects) and semi-structured interviews (for oncologists).

Study 2:

Self created, standardized videos in which the level of explicitness of information and expressed hope are systematically varied will be shown to healthy subjects and breast cancer survivors to assess the elements' impact on their perceptions. A subsample of the subjects will participate in focus groups to provide qualitative information about their opinions concerning the varied communication elements.

Contactpersonen

Publiek

Postbus 1568
Liesbeth Vliet, van
Otterstraat 118-124
Utrecht 3500 BN
The Netherlands
+31 (0)30 2729632

Wetenschappelijk

Postbus 1568
Liesbeth Vliet, van
Otterstraat 118-124
Utrecht 3500 BN
The Netherlands
+31 (0)30 2729632

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Breast cancer survivors:
 - A. Women between 18-65;
 - B. Minimally 5 years disease-free;
 - C. Speak fluent Dutch.
2. Healthy women:
 - A. Women between 18 and 65;
 2. Speak fluent Dutch.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Breast cancer survivors: Less than 5 years disease free;
2. Healthy women: Women who are cancer survivors.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Niet-gerandomiseerd
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving gestart
(Verwachte) startdatum:	01-05-2010
Aantal proefpersonen:	280
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies	
Datum:	31-03-2010
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL2143
NTR-old	NTR2267
Ander register	METC / ABR : 10-022 / 29968 ;
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Resultaten

Samenvatting resultaten

N/A