Meeting cancer patients’ needs of rehabilitation – a patient survey

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Background

- The intention of high quality of care to all cancer patients in all phases underlines the need for knowledge about prevalences and patients groups most in need.

- Socio-demographic and type specific differences may be established already during the beginning of the cancer trajectory.

- Knowledge of unmet needs of rehabilitation during the very early phase of cancer is scarce.
Study aim

▪ To analyse cancer patients’ perceived unmet needs of rehabilitation close to time of diagnosis
  ▪ frequencies of unmet needs
  ▪ association of unmet needs and
    - socio-demographic characteristics
    - clinical characteristics
Material and methods

- National patient questionnaire survey
  - The experience of Cancer Patients during Diagnosis and Treatment, The Danish Cancer Society, 2011

- All adults diagnosed with cancer for the first time from 1 May to 31 August 2010
  - Identified by use of national administrative registers

- Questionnaires mailed 2 to 5 months following date of diagnosis

- 4346 adult, incident, mixed-site cancer patients (64.7%)
Background variables

- From the patient questionnaire:
  - Cancer treatment
  - Educational level
  - Cohabitant status
  - Children (living at home/not living at home)

- From administrative registers:
  - Sex
  - Birth year
  - Cancer type
## Frequency of unmet needs

<table>
<thead>
<tr>
<th>Item</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Talking to other patients in the same situation</td>
<td>3808</td>
<td>24.1</td>
</tr>
<tr>
<td>Conversation with a psychologist</td>
<td>3771</td>
<td>21.4</td>
</tr>
<tr>
<td>Physical rehabilitation</td>
<td>1702</td>
<td>18.8</td>
</tr>
<tr>
<td>Practical help</td>
<td>3852</td>
<td>17.3</td>
</tr>
<tr>
<td>Counseling related to work life/education</td>
<td>3785</td>
<td>14.8</td>
</tr>
</tbody>
</table>
Socio-demographic characteristics* I

- **Sex:**
  - Men had higher odds of unmet needs than women
    - Counseling with a psychologist
    - Practical help
    - Talking to other patients in the same situation

- **Age:**
  - Unmet needs decreased with age
    - Counseling with a psychologist
    - Counseling related to work/education
    - Talking to other patients in the same situation

*adjusted for age, gender, cancer type, education, and cohabitant status
Socio-demographic characteristics* II

- **Cohabitant status:**
  - Couples living together decreased the odds of unmet needs
    - Except for physical rehabilitation

- **Children:**
  - Children living at home increased the odds of unmet needs
    - Counseling with a psychologist

- **Education:**
  - Unmet needs increased with low educational level
    - Counseling with a psychologist
    - Practical help
    - Talking to other patients in the same situation

*adjusted for age, gender, cancer type, education, and cohabitant status
Clinical characteristics*

- **Cancer type** (compared with breast cancer)
  - The majority of other cancer types increased the odds of unmet needs
    - Counseling with a psychologist
    - Practical help
    - Talking to other patients in the same situation

- **Treatment**
  - Chemotherapy increased the odds of unmet needs
    - Physical rehabilitation
    - Talking to other patients in the same situation

*adjusted for age, gender, cancer type, education, and cohabitant status
Strenghts and weaknesses

- Large-scaled national study
- Sampling method based on validated registers
- Unmet needs questions validated and tested
- High response rate
  - Slightly overrepresentation
    - Females
    - Age < 80 yrs.
    - Married
Main results

- Unmet needs of rehabilitation are frequent during early cancer trajectory

- Socio-demographic and clinical inequalities exist

- Male gender, low educational level, couples not living together, and treatment with chemotherapy are indicators of unmet needs
Conclusion and perspectives

- Health care professionals and social workers need to increase their awareness of the complexity of rehabilitation needs especially in regard to subgroups of cancer patients.

- Interventions tailored vulnerable groups during early cancer treatment may help counterbalancing social and clinical inequalities in the long run.
Thank you for your attention

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