

Title:

Identifying Support Needs of Patients with Esophageal Carcinomas Prior to Surgical Intervention: An Exploratory Study

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Session Title:

Rising Stars of Research and Scholarship Invited Student Posters

Keywords:

Esophageal carcinomas, Esophagectomy and Support Needs

References:

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Abstract Summary:

To date, esophageal cancer studies primarily evaluate patients' physical consequences and quality of life after diagnosis and treatment. Very few studies have investigated emotional distress among this group. What exactly are the unmet support needs of these patients? This is a proposal for an exploratory study using focus-groups.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
<p>The learner should be able to identify knowledge gaps regarding the needs of patients diagnosed with and treated for esophageal carcinomas</p>	<p>During treatment, one third of all cancer patients suffer from some type of psychiatric disorder (Singer, Das-Munshi, & Brahler, 2010) Studies have shown patient distress from the time of cancer diagnosis to elevated anxiety remaining up to four years (Hellstadius et. al., 2014) About half of patients report emotional problems following surgery and persisting even at five years post-treatment (Hellstadius et. al., 2014) Adjusting to a new physical self and acceptance of social challenges has psychological impact (McCorry et. al., 2009; Bouras et. al., 2016) Esophageal cancer in particular has poor prognosis, even after multiple treatment modalities including concurrent chemotherapy and radiation, and later, extensive surgery with the possibility of additional adjuvant therapy. Experiencing any postoperative symptoms other than dysphagia show an increased risk of associated anxiety and depression (Bouras et. al., 2016) Even new onset psychiatric morbidity following esophagectomy appears higher when compared to the general population and is</p>

	associated with poorer postoperative survival (Hellstadius et. al., 2015)
The learner should be able to identify the rationales for exploring unmet needs of patients with and treated for esophageal carcinomas	To date, esophageal cancer studies primarily evaluate patients' physical consequences of the disease and treatment Very few studies have investigated emotional distress, specifically anxiety, among surgically treated esophageal cancer patients (Wikman, Smedfors, & Lagergren, 2013) No relevant studies evaluating anxiety on esophageal cancer patients were conducted in the United States of America Benefits of support group programs including patient and caregiver satisfaction, increased socialization, and improved mood among cancer patients have been well documented (McCorry et. al., 2009) Identifying the types of programs patients desire may prove to be beneficial, particularly for groups that generally have less support and carry both physical and psychosocial implications health care professionals may not be able to address Although evidence demonstrates even short and simple supportive care interventions promote psychological rehabilitation, to date there is no standard procedure for support in cancer patients (Zhang et. al., 2013) Patients must cope with the stress of a cancer diagnosis, chemotherapy, radiation, and a high-risk surgery, yet preoperative psychological support has not been accepted as standard of care as it has for other diseases

Abstract Text:

With any diagnosis of cancer comes emotional distress and increased risk of anxiety and depression. During treatment, one third of all cancer patients suffer from some type of psychiatric disorder (Singer, Das-Munshi, & Brahler, 2010). Limited studies have shown patient distress from the time of cancer diagnosis to elevated anxiety remaining up to four years (Hellstadius et. al., 2014). Predictably, fatal cancers report even higher associations with anxiety and depression (Hellstadius et. al., 2015). Esophageal cancer in particular has poor prognosis, even after multiple treatment modalities including concurrent chemotherapy and radiation, and later, extensive surgery with the possibility of additional adjuvant therapy. About half of patients report emotional problems following surgery and persisting even at five years post-treatment (Hellstadius et. al., 2014). Adjusting to a new physical self and acceptance of social challenges such as being unable to work, withdrawing from the company of family and friends, and going out in public has psychological impact (McCorry et. al., 2009; Bouras et. al., 2016). Additionally, those experiencing any postoperative symptoms other than dysphagia show an increased risk of associated anxiety and depression (Bouras et. al., 2016). Even new onset psychiatric morbidity following

esophagectomy appears higher when compared to the general population and is associated with poorer postoperative survival (Hellstadius et. al., 2015).

To date, studies esophageal cancer patients primarily evaluate physical consequences of the disease and treatment. Very few studies have investigated emotional distress, specifically anxiety, among surgically treated esophageal cancer patients (Wikman, Smedfods, & Lagergren, 2013). Patients report decreased anxiety when participating in support groups in qualitative studies, however support programs are often underutilized without clear understanding of the reasons. The purpose of this study is to assess the implications of participation in a preoperative focus group for patients with esophageal carcinomas scheduled to undergo esophagectomy for esophageal cancer to identify unmet support needs. Should this qualitative study identify these needs, practitioners are able to optimize current pre- and postoperative algorithms to enhance patient-centered care.