

Help is on the phone: Reducing pain and depression of cancer

July 13 2010

Pain and depression associated with cancer - symptoms often unrecognized and undertreated - can be significantly reduced through centralized telephone-based care management coupled with automated symptom monitoring, according to researchers from the Regenstrief Institute and Indiana University School of Medicine.

The Indiana Cancer [Pain](#) and Depression (INCPAD) study combined automated calls with follow-up calls from the nurse care manager to reduce pain and depression in [cancer patients](#). Calls were made to individuals with all types of cancers seen by rural and urban community-based oncology physicians.

The improved outcomes of the patients who received the telephone-based care management and the feasibility of this approach is reported in the July 14, 2010, issue of the [Journal of American Medical Association](#) (JAMA).

"Because oncologists are busy with testing, chemotherapy and other treatments, they often have too little time left for quality of life issues, like pain and depression. We felt one solution might be a partnership between a telephone-based symptom management team and community-based oncology practices. We found that an economical, centralized approach is feasible to conduct and significantly improved symptoms of both depression and pain in patients in any phase of cancer from newly diagnosed to long term to recurrent to cancer free," said Kurt Kroenke, M.D., the study's principal investigator. Dr. Kroenke is a Regenstrief

Institute investigator and an IU School of Medicine professor of medicine.

An INCPAD nurse manager reviewed the data collected from the automated symptom monitoring phone calls that, for example, instructed the patients to rate their [depression](#) and pain on scales of 1 to 10. This data allowed the nurse's phone contacts to be more efficient by targeting areas needing attention. Although most study participants, whose average age was 59, elected automated surveillance calls, they also were offered an option to participate online in this aspect of the study.

"Technology, in the form of automated calls repeated until an adequate treatment response occurred, allowed us to gather data on symptom severity at a time convenient for the patient, making the process very patient-centered. It also allowed the nurse manager to work at a higher level to improve the quality of life of these cancer patients. And it gave these patients, many of whom lived in underserved rural areas, one stop assistance they probably wouldn't have had access to unless they went to a major cancer center," said Dr. Kroenke, who is a research scientist with the Center for Implementing Evidence-Based Practice at the Richard Roudebush VA Medical Center and an Indiana University Melvin and Bren Simon [Cancer](#) Center member.

Provided by Indiana University School of Medicine

Citation: Help is on the phone: Reducing pain and depression of cancer (2010, July 13) retrieved 23 April 2024 from <https://medicalxpress.com/news/2010-07-pain-depression-cancer.html>

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