

Presenting cancer treatment options in small doses yields smarter choices

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Women who choose among different breast cancer treatment options make smarter choices when getting the information and making decisions in small doses rather than all at once, as is customary, a University of Michigan study found.

It's long been known that people who aren't good with numbers have a harder time understanding the risk information they need to make good [medical decisions](#), says Brian Zikmund-Fisher, assistant professor at the U-M School of Public Health and a research assistant professor at the U-M Health System.

Zikmund-Fisher and co-authors Peter Ubel and Andrea Angott of Duke University tested whether asking women to make a series of simpler choices rather than one complex decision would help them understand when aggressive post-surgery therapies, such as [chemotherapy](#), actually yield larger benefits.

The researchers found that the group of women in the study who weren't good with numbers became confused when faced with as few as four treatment options at once, and chose chemotherapy regardless of whether their benefit would be 1 percent or 5 percent.

A different group of women in the study received the same treatment options divided into two separate decisions. They first decided whether to take hormonal therapy, and if they said yes, they then decided whether or not to add chemotherapy. More of the women who made

decisions incrementally chose the chemotherapy only if it gave them a large benefit.

"It's obvious that you should be more interested in chemotherapy if you're going to get a 5 percent benefit versus only a 1 percent benefit," Zikmund-Fisher said. "That wasn't always true for people who got all of the risk information at once. But, when we let women make their hormonal therapy choices separately from chemotherapy choices, more people wanted the treatment if it was a 5 percent benefit."

Zikmund-Fisher says the findings send a clear message about physician-patient communication.

"What that tells me is that it doesn't take very much information to be too much, especially with patients who have trouble with numbers," he said. "When we try to provide patients with full and complete information, we often end up overwhelming them."

Even women who are good with numbers benefit from having information presented piece-by-piece because they can better understand how much benefit comes from each treatment option, Zikmund-Fisher says.

He says that parceling out information to make decision-making simpler doesn't necessarily mean more work for doctors or longer visits.

"I believe that having patients make decisions one at a time might make doctors' visits shorter rather than longer," Zikmund-Fisher said. "When you make things simpler, you don't have to explain it again and again."

More information:

www.springerlink.com/content/hv58265176148886

Provided by University of Michigan

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