

Shared decision making improves patient satisfaction during radiation therapy

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Taking an active role in their radiation treatment decisions leaves cancer patients feeling more satisfied with their care, and may even relieve psychological distress around the experience, researchers from the Perelman School of Medicine at the University of Pennsylvania report in the journal *Cancer*.

In a study of 305 [patients](#) undergoing radiation treatment, Neha Vapiwala, MD, an associate professor in the department in Radiation Oncology at Penn Medicine, and colleagues at Penn's Abramson Cancer Center found an association between [patient satisfaction](#) and patient-perceived control and shared decision making (SDM)—the process that allows patients and providers to make health care decisions together, taking into account scientific evidence as well as the patient's values and preferences.

Patients who experienced SDM or perceived control of treatments were more satisfied with their care than those who did not experience SDM or perceived control—a difference of almost 17 percent and 26 percent, respectively. What's more, increased anxiety, depression and fatigue were reported in patients who desired control over treatments but did not feel like they had it.

"Most importantly, our findings emphasize the value of patient-physician relationships and communication specifically in radiation oncology, something that hasn't been shown before," said Dr. Vapiwala. "No matter where [cancer patients](#) are in the treatment process, there is always

an opportunity to improve patient satisfaction—something hospitals and physicians have consciously and increasingly been making a priority."

Past studies of SDM in patients undergoing chemotherapy, as well as treatments for other medical conditions such as hypertension and diabetes, have shown an association with improved satisfaction and quality of life. Taking notice, the Institute of Medicine recently recognized its importance, and the Affordable Care Act even devotes an entire section to establishing a program for SDM. However, no group has evaluated its impact on patients going through radiation.

Often, [radiation oncology](#) is seen as a treatment avenue that is ultimately left to the physician to dictate. But there are tailored options, decisions, and discussions that can apply to individual patients, even if they all have similar diagnoses. There are different radiation regimens, dosages, risks and benefits as well as pain control management issues that should be part of the ongoing conversation.

Among the participants in the study, 31 percent of patients experienced shared decision making, 32 percent perceived control in decisions, and 76 percent reported feeling very satisfied with their [radiation treatment](#) course overall. There was a significant association noted between patient satisfaction with his/her radiation treatments and patient-perceived experience of shared [decision making](#) (84.4 percent vs. 71.4 percent) or perceived control over one's treatment (89.7 percent vs. 69.2 percent).

Patients who specifically desired control over their treatment decisions, but did not perceive this control, experienced significantly more anxiety (44 percent vs. 20 percent), depression (44 percent vs. 15 percent), and fatigue (68 percent vs. 39.2 percent), compared with patients who did not perceive a sense of [control](#) in their [treatment decisions](#).

One of the strengths of the study is its diverse group of patients. Ages

ranged from 18 to 87 years old; people had varying ethnic and racial backgrounds; and patients had various cancers at all stages, as long as they were well enough to participate in the study.

The next step in the research is to determine both physician and patient barriers to SDM and to determine methods to break down these barriers.

"As providers, it doesn't matter what [treatment](#) you are offering, or how complicated it is, or how busy you may be," said Dr. Vapiwala. "It's worth taking the time to talk to patients about even minor decisions in which they can provide some input. It's not only critical in today's health care setting where both information and misinformation are rampant, but will very likely lead to the patient feeling positively about the encounter."

More information: [onlinelibrary.wiley.com/doi/10.../cncr.28665/abstract](https://onlinelibrary.wiley.com/doi/10.1002/cncr.28665/abstract)

Provided by University of Pennsylvania School of Medicine

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