

# A new tool helps remove the emotion around choosing the right approach for prostate cancer

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Over 90 percent of prostate cancers are detected at a curable stage, with men more likely to die of other diseases than from this cancer. Although patients with localized, low-risk prostate cancer have treatment options: active surveillance, also called watchful waiting, in which the cancer is monitored periodically to detect any changes, or active treatment with surgery and radiation. This choice is challenging, because medical science cannot reliably identify those men who are at risk for developing aggressive disease and may benefit from active treatment. Nonetheless, most men diagnosed with localized, low-risk prostate cancer choose active treatment.

A new pilot study evaluating an online decision-support tool called the Decision Counseling Program, which was developed by Thomas Jefferson University researchers, shows that men who used the tool were more likely to choose active surveillance, and were less likely to feel conflicted about that decision than they were before using the tool. The results were published online July 15th in the *Journal of Cancer Education*.

"The Decision Counseling Program is used by a trained nurse educator to help patients understand their options, figure out what things would make them favor one option over the other, and clarify the option they prefer," says first author Ronald Myers, Ph.D., Professor of Medical Oncology and researcher at the Sidney Kimmel Cancer Center at

Jefferson. "The Decision Counseling Program also produces a one-page summary that the patient and his physician can use to make a shared decision that makes the most sense."

The Decision Counseling Program is a new type of patient decision aid. Historically, decision aids have been comprised of educational handouts, booklets, or videos all intended to deliver information to patients. Although some research suggests just providing information through decision aids can increase rates of active surveillance, a large review of the literature showed mixed results.

The Decision Counseling Program developed by Dr. Myers and colleagues differs from previous decision aids in that a nurse educator uses the program not only to provide information about options, but also to identify and weigh the importance of things that matter to the patient (e.g., worry about [treatment](#) side effects, concern about developing aggressive cancer). Moreover, the program clarifies the patient's preferred option and sets the stage for the patient and physician to make a well-informed choice.

"The power in the approach is that it gives the patient time to consider the options, put personal thoughts and concerns on the table, and have a voice in the [decision making](#) process," says corresponding author Amy Leader Dr.P.H., M.P.H., Assistant Professor of Medical Oncology and researcher at the Sidney Kimmel Cancer Center at Jefferson.

The researchers recruited 30 [prostate cancer](#) patients who had localized, [low-risk prostate cancer](#) and who were candidates for active surveillance. After participating in the Decision Counseling Program, patients had a higher level of knowledge about their treatment options, reported feeling less conflicted about the treatment decision, and had more favorable perceptions of active surveillance than they did at the outset of the study. Ultimately, 25 of the 30 participants, or 83 percent, decided to initiate

[active surveillance](#), a rate much higher than that typically observed in clinical practice.

The Decision Counseling Program, applied here for prostate cancer treatment decision making, is a generic approach that can be applied to other areas of medicine, where options are available, decisions are difficult, and the stakes of decision making are high. "Another example of where this tool may be useful is in helping patients decide whether to participate in clinical trials. It's work we've already started," says Dr. Myers.

**More information:** Ronald E. Myers et al. Decision Support and Shared Decision Making About Active Surveillance Versus Active Treatment Among Men Diagnosed with Low-Risk Prostate Cancer: a Pilot Study, *Journal of Cancer Education* (2016). [DOI: 10.1007/s13187-016-1073-7](#)

Provided by Thomas Jefferson University

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