Survey reveals sarcoma cancer patients welcome remote 'telemedicine' consultations
2 July 2021

Patients being treated for sarcoma, a rare type of cancer, report positive attitudes to 'telemedicine'—remote consultations with doctors—according to a new survey.

During the COVID-19 pandemic the use of telemedicine consultations has greatly increased in an effort to stop the spread of the virus and help protect vulnerable patients from infection.

Researchers from the University of Strathclyde and the Scottish Sarcoma Network set out to understand sarcoma patients’ attitudes to telemedicine and its impact on them through an anonymous online survey over the summer of 2020.

Every year in Scotland approximately 350 people are diagnosed with sarcoma—a group of rare cancers affecting connective tissues—and treated in one of the five specialist care centres across the country.

Patient satisfaction

The results of the survey, published in the journal JCO Global Oncology, showed that patient satisfaction with telemedicine was high and comparable to traditional face-to-face appointments.

A majority of patients (57%) indicated a preference for majority telemedicine appointments. Commonly cited factors for this decision included: reduced time travelling to hospital, reduced cost to travel to hospital, reduced time waiting in hospital and it being more convenient.

One survey comment from a 58-year-old male patient read: “I am waiting for your call while in the comfort of my home. I get my tablets sent home. I feel comfortable, happy and know that the team looking after me will get me seen in person if I need to.”

Patients who preferred mostly face-to-face appointments cited they would find it more reassuring, while patients currently being treated or who had completed treatment in the last six months were more likely to indicate a preference for mostly or entirely face-to-face appointments.

Age, gender and level of education was not shown to affect patient preference. Over half of patients who had received a telemedicine appointment had met the person who performed their consultation previously.

However, there was a strong preference for receiving bad news face-to-face rather than remotely.

Regular practice

For clinicians and care providers the workload of telemedicine was largely equivalent to face-to-face consultations and two-thirds said telemedicine should be integrated into regular practice.

Dr. Ioanna Nixon, a Head and Neck and Sarcoma Oncologist at the Beatson West of Scotland Cancer Centre, Clinical Lead for the Scottish Sarcoma Network, Visiting Professor at Strathclyde and senior author of the paper, said: "During the pandemic a number of rapid changes had to be implemented to ensure safe delivery of cancer services. Telemedicine is one of them and as clinicians it is important to understand how our patients experience this change.

"Sarcomas are very rare and diverse cancers and our research aims to understand how telemedicine
can be used best in this rare cancer. Undoubtedly, there is no one-size-fits-all approach and our research will hopefully help to re-shape and reform services around what matters to our patients, putting their needs at the heart of the service.”

Ph.D. student Holly McCabe, in the Department of Management Science, who analysed the surveys, said: “Our survey showed that telemedicine in sarcoma care is favourable both from clinician and patient perspectives.

"The utilisation of telemedicine for patients with rare cancers such as sarcomas is an innovative approach to the delivery of care, especially considering the time and financial pressures on patients who often live a distance away from specialist centres.

Future work will assess what models for patient-professional consultations in sarcoma care are being employed, from diagnosis through to follow-up. They state that there is an, "important window of opportunity to explore patient and professional perceptions and preferences for these approaches, which will provide vital information to inform the longer-term reconfiguration of sarcoma clinics. We may therefore build on insights and innovations generated during COVID-19, creating a legacy of innovation moving forward."

DOI: 10.1200/GO.20.00599

Provided by University of Strathclyde, Glasgow

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.