The Patients’ and Caregivers’ Perspective on Follow-up Care after Palliative Radiotherapy - A Qualitative Descriptive Study

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Abstract

Purpose: To explore patients’ and caregivers’ views on follow-up care after palliative radiotherapy.

Method: A qualitative descriptive design was used to present findings from semi-structured interviews. Patients receiving palliative radiotherapy or their caregivers were eligible to participate in personal interviews following informed consent. The interview were guided by a set of open-ended questions designed to explore the participants’ understanding of the purpose and preference for follow-up care after palliative radiotherapy. Interviews were recorded and transcribed verbatim. Themes were identified in the transcripts and described with consideration of the individual participant’s demographics and cancer experiences.

Results: 9 participants (5 patients and 4 caregivers) out of 11 approached consented and were interviewed. Median age of participants was 60 (range 47-80). All participants had an ECOG performance status =<1. Median time from patients’ initial cancer diagnosis to study interview was 4.5 (range 3-35) years. Follow-up appointments were expected to provide an evaluation of treatment outcomes, complications, and current situations. Scheduled appointments were appreciated by some as they provide a dedicated opportunity to ask questions of their healthcare team. Receiving radiation oncology team’s contact information was felt to be helpful because the patients can directly ask treatment related questions to the team. Many participants were comfortable and expected the medical oncologist or referral physician to provide follow-up care for patients who received palliative radiotherapy.

Conclusion: Palliative patients have diverse physical and emotional care needs. Within our study sample, participants expected follow-up care after radiotherapy to provide an evaluation of their clinical status. They valued follow-up because it empowered them to ask questions of their healthcare team. They also viewed their established primary oncologist as the most appropriate person to provide follow-up care whilst supplemented by an efficient way of contacting their radiation oncology team as needed.