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CaringGuidance™ After Breast Cancer Diagnosis Program

- Web-based psychoeducational self-management program
- Framework: PI's Acclimating to Breast Cancer grounded theory, stress & coping, and cognitive processing models
- Strategies/guidance, validation, and cognitive behavioral and problem-solving techniques
- Prior randomized pilot feasibility study of 100 women identified significant reduction of distress and depressive-symptoms among intervention compared to control at 2-3 months and high user satisfaction.

Methods

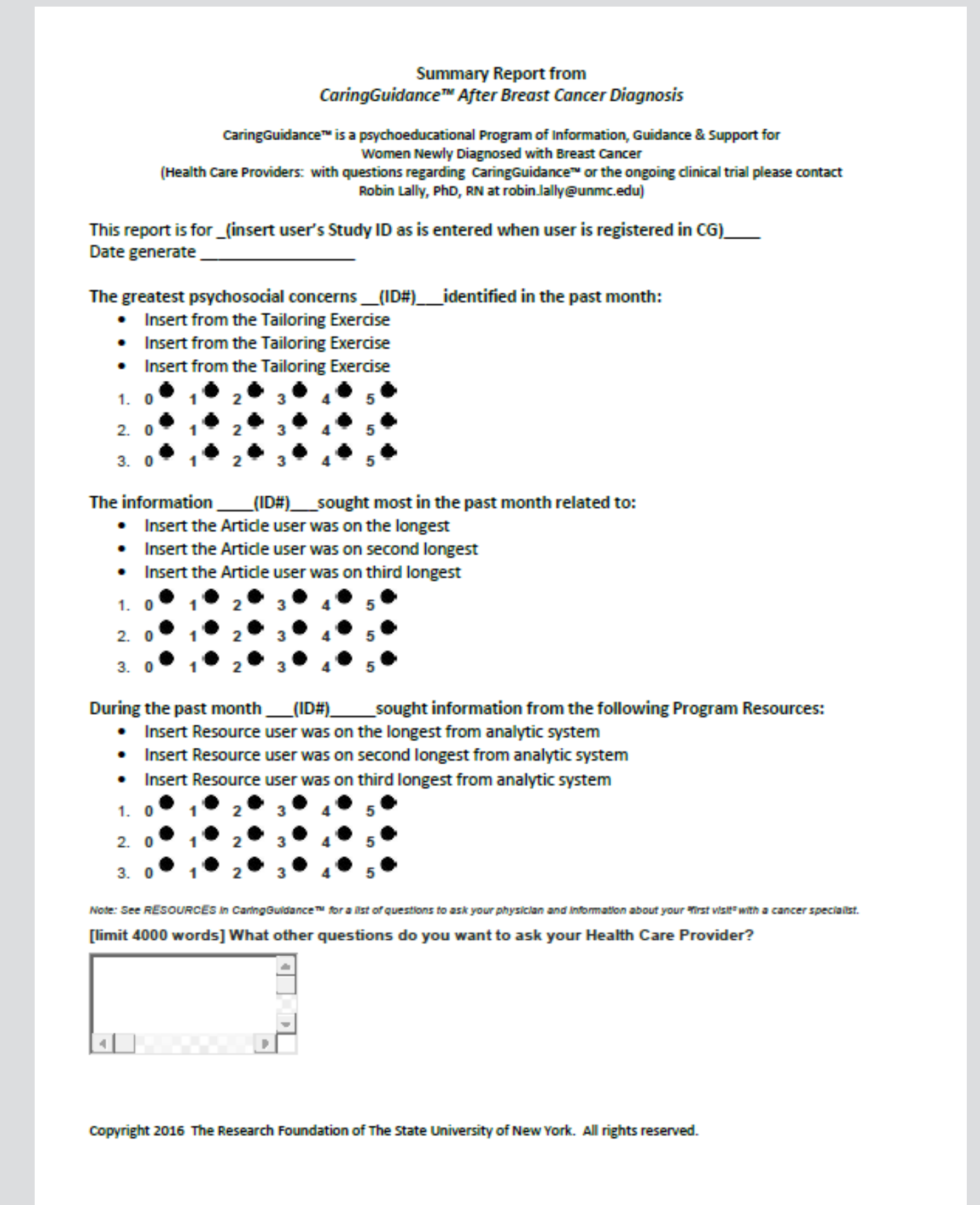
- Single group, mixed-methods design
- Goal - 30 women with Stage I-IV breast cancer scheduled to see medical oncology at Fred & Pamela Buffett Cancer Center
- Subjects use the CaringGuidance™ program at home for 1-2 months
- In clinic subjects generate a Summary Report (CGSR) in the presence of the PI/RA prior to an oncology consultation.
- Usability, satisfaction with the CGSR, and consultation communication, will be captured with 1) a pre-consultation "think-aloud" interview, 2) System Usability Scale, 3) a post-consult interview, 4) recorded consultation transcripts, and 5) clinician post-consultation surveys.
- Clinicians' baseline communication preferences/patterns will also be captured.

Results to Date

- 5 oncology providers (3 MD, 1 PA, 1 NP) consented & participating
- 134 patient contacts; 41 screened; 14 being followed for potential enrollment
- 27 consented & enrolled; 3 withdrawn/lost to follow-up, 19 completed T1 & T2 measures; 5 pending T2 measures
- Demographics (n = 27): Age range = 35-72, Stage I-IV, Caucasian (n = 26), Hispanic (n=1), Employed part-time (n=8), Employed full-time (n = 15), College Educated (n=22), Married (n=15)
- Time using program prior to T2 (n = 19): 8 min. to 531 min. (Mean = 141.39 min.)
- Baseline (n=19) mean (SD): Distress Thermometer = 5.41* (2.61); CES-D depression scale = 13.41 (7.92); Impact of Event = 25.96* (15.80). *Clinically significant values

Qualitative Outcomes

- Analysis is ongoing. Initial data coded (n = 4) into *content*, *usability*, *functionality*, & *communication* themes specific to CGPS.
- *Content*: "Summary Report" was understandable but sounded too academic - renamed the "Personal Summary" (CGPS).
 - CaringGuidance & CGPS content provided subjects with "courage" and "empowerment" to overcome "shy", "vulnerable", and "uncomfortable" feelings when bringing up thoughts and questions with their oncologists. After doing so, one participant stated, "I just came away feeling a lot better, a lot more connected, a lot more trusting."
- *Usability*: Subjects found it fairly easy to rate the importance of the topics they wished to discuss with their oncologist.
 - "Typing's really difficult for me," referring to the text box.
 - Subjects plan to continue to use CaringGuidance and to create additional Personal Summaries.
- *Functionality*: CGPS were not created prior to T2 by subjects. At T2 subjects expressed no difficulty with technical functioning of the report.
- *Communication*: Subjects felt that CGPS increased the time spent discussing thoughts and feelings with their oncologist when compared to previous clinic visits, but not always, "the conversation was focused on the other issues," per one subject.



Background

- Psychosocial issues are only addressed 6 to 27% of the time in oncology consultations.
- Psychoeducation and supportive communication facilitates psychological adjustment to cancer.
- Tools support the patient-clinician communication process by assisting patients' abilities to convey needs so that clinicians can receive and interpret these messages
- The Summary Report (CGSR) is a new feature of the CaringGuidance™ Internet-based psychoeducational program that allows patients to generate a single page summary of their most important psychosocial concerns, rating these concerns on a 0 – 5 scale for communication with their clinician.
- Usability is key to engaging patients in using such tools and therefore is assessed in this study.

Objective and Aims

Objective: To assess satisfaction and feasibility of the CGSR ability to support patient-clinician communication in the outpatient oncology breast oncology clinic.

Aim 1: to describe recently diagnosed women's appraisal of CGPS functionality, content satisfaction, and usability.

Aim 2: to assess communication patterns, topics discussed, and patient-provider communication satisfaction during medical oncology consultations when the CGSR is available for use.

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Future Directions

- Results of this study will guide modification of the CGPS prior to a larger effectiveness study.
- Future goal is implementation of CaringGuidance™, including the Personal Summary tool, in clinical practice to support patient-clinician communication and reduction of breast cancer patients' distress and depressive-symptoms.