



Evaluating nurse-led clinics for secondary breast cancer (SBC)

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Background

- 2,000-2,500 women diagnosed with breast cancer in Manchester each year
- Approximately 6-10% of new breast cancer cases present with metastatic disease (mBC)
- 20-30% of all breast cancer cases will become metastatic (O'Shaughnessy 2005)
- Average survival for mBC is 2-5 years but many will survive much longer

Main issues

- Lack of focus nationally for SBC (Breast Cancer Care)
- Lack of support for patients with SBC in comparison with primary breast cancer
- Wide range of potential unmet needs for patients / families:
 - Physical
 - Psychological
 - Social
 - Practical

Aims

- Set up a nurse-led clinic for patients with SBC
- Undertake prospective evaluations
 - To assess patients' needs
 - To identify any concerns
 - To address any gaps in knowledge and understanding of diagnosis & treatment plans
 - To evaluate patients' experiences of nurse-led clinics

Methods

- Approval from audit department committee
- Design pre and post clinic questionnaires
- HADS and Concerns Checklist
 1. Questionnaires pre nurse-led clinic
 2. Questionnaires 1 month post nurse-led clinic
 3. 4 months nurse-led telephone clinic (HADS & Concerns Checklist)



Results

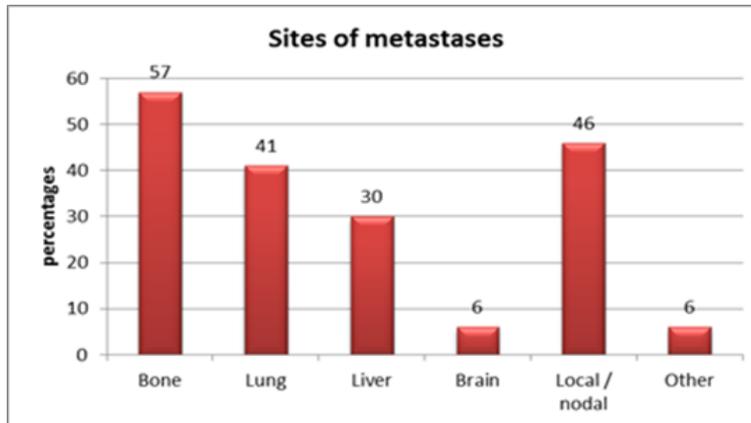
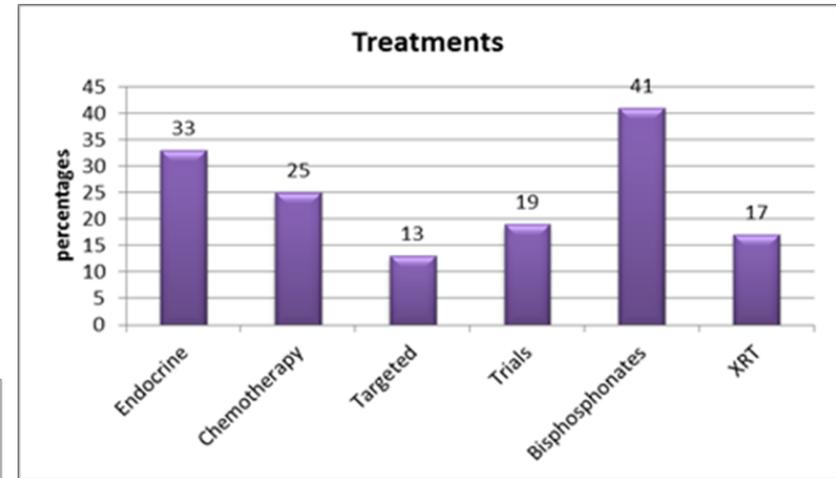
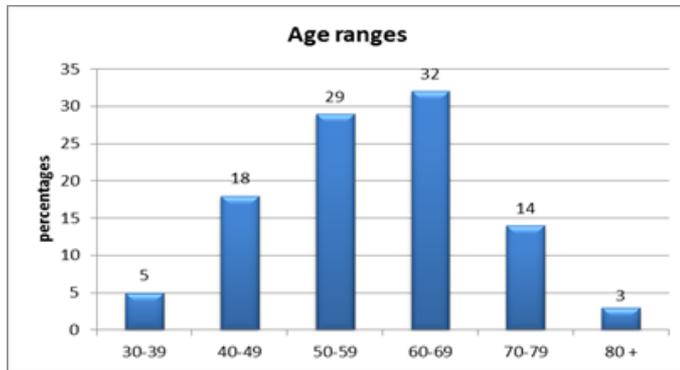
By September 2016, 71 patients had been invited to attend the nurse-led SBC clinic.

- 41/71 (58%) completed the Pre questionnaire
- 52/71 (73%) completed the Pre HADS / Concerns
- 49/71 (69%) attended nurse-led clinic
- 25/49 (51%) completed Post questionnaire
- 21/49 (43%) completed Post HADS / Concerns
- 30/49 (61%) completed HADS / Concerns at 3 months



Demographics

- Ages ranged from 32-86 (mean 59 years)
- 17 (27%) patients had bone metastases only



Pre questionnaire (n=41)

Do you have questions about diagnosis?

Yes 20 (50%) No 18 (45%) Unsure 2 (5%)

“Not had any results from scans or tests explained”

“Feel rushed when with the doctor, On my last visit no-one seemed to know why I was there, or who I was. Only thanks to [BCN] it was sorted”

“How long will I live? How will my illness progress?”

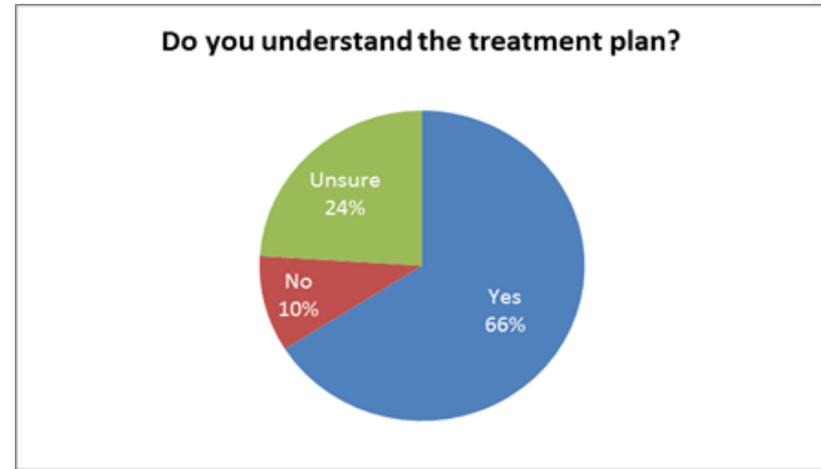
“I feel we were not told the full diagnosis at [local hospital]...I feel my diagnosis has been drip fed”



Do you understand the treatment plan?

“I have not been given any dates of next scan appointment. Big lack of communication”

“Not been told yet”



“Will I see any improvement at all? If not, how bad can I expect it to be? Will I finish up bedridden?”

“If endocrine treatment does not work what is next? How long do you give it to work?”

What do you hope to gain from BCN?

“A clear understanding of the treatment options”

“Answers to ‘side-line’ questions”

“Emotional support and discussing topics that are too upsetting to discuss with friends and family”

“To feel I am being given more information. To help my fears. That they will give me more time”

What did you gain from BCN?

“A chance to talk about my feelings and needs to a person who listened and gave me help where needed”

“Clearer information relating to my treatment and what help is available”

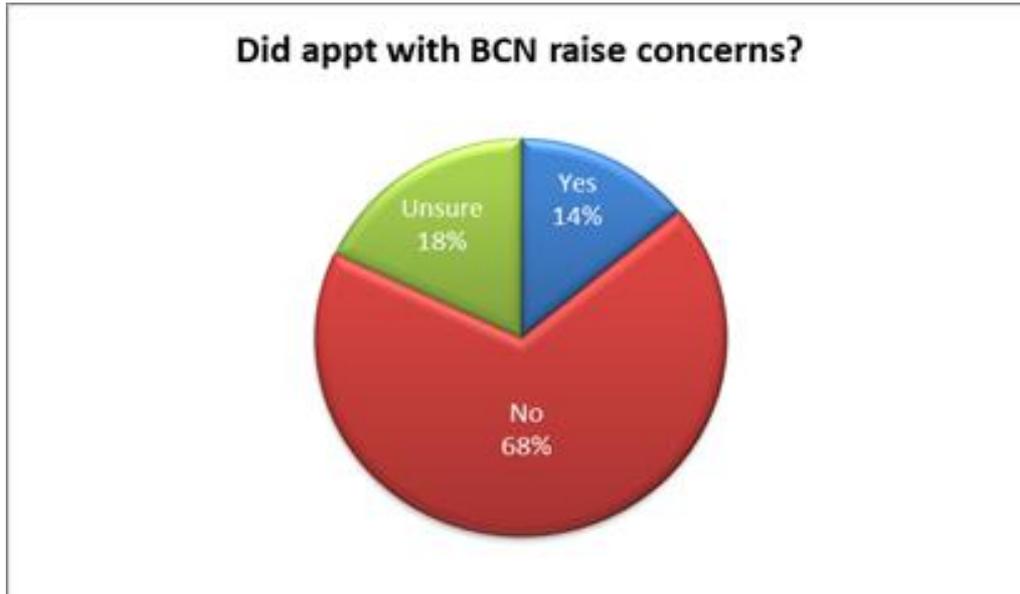
“Comfort” “*Peace of mind*” “*Reassurance*” “*Practical advice*”

“Confidence I am getting the support I need for my condition and not being overlooked”

“Explained fully and understood what she told me. Made me feel positive about treatment”



Did the appointment raise any concerns for you?



“I’ve never felt like this before but it did me good because I’ve never let it out before”

“What happens next?”

“But only due to questions I asked. The responses were difficult to hear but I wanted to know”

After attending nurse-led clinics

- Patients had less questions about their diagnosis
- More patients understood their treatment plan
- More information needs were met
- Patients felt better supported
- Patients felt more in control
- Increased awareness of support at The Christie and in the patients' local areas
- Greater contact with community staff

HADS

- Range and mean **scores** on the HADS total and subscales ↓ post nurse-led clinic
- HADS **caseness** (total & anxiety) scales ↔ post clinic; depression ↓

- At 3-4 months post clinic all HADS **scores** ↓
- At 3-4 months **caseness** for anxiety ↓ total ↓ ;
but caseness for depression ↑

Concerns Checklist

- Concerns Checklist scores ↓ post nurse-led clinic; & further ↓ at 3-4 months
- Caseness on total concerns ↓ but remained high at 3-4 months
 - This indicates the sensitivity of this measure
- Caseness on appraisal score ↑ at 3-4 months post nurse-led clinic
 - This indicates the severity of patients' concerns
 - This suggests that some patients may have several unresolved concerns.



Summary

After attending the nurse-led clinic:

- Increase in patients' knowledge and understanding of diagnosis & treatment
- Improvement in information needs & awareness of what support is available
- Greater contact with community professionals



Summary 2

- Patients felt more in control
- Some evidence of psychological impact
 - HADS scores ↓ one month post clinic
 - At 3-4 months anxiety caseness ↓ but depression caseness ↑
- Total concerns ↓ but caseness remains high
Appraisal score ↑ at 3 months (Unresolved concerns?)