

15th Euro Nursing & Medicare Summit

October 17-19, 2016 Rome, Italy

Patient experiences at diagnosis and perceptions of negative effects after different prostate cancer treatments, and impact on psychological well-being: A nationwide survey

Ulla-Sisko Lehto

National Institute for Health and Welfare, Finland

Most prostate cancers (PC) are diagnosed in the early phase and men live for many years after the diagnosis. Thus, their well-being and quality of life is ever more important. We investigated patient experiences, adverse impacts of different PC treatments, and psychological well-being in a nation-wide sample (n=1239) of PC patients. We collected information on experiences at diagnosis (e.g., treatment selection; patient satisfaction with care and information; and psychological reactions) and negative effects (occurrence, perceived level and bother since the beginning of the treatment) of PC treatments like prostatectomy, external beam radiotherapy, brachytherapy and hormone therapy. We measured the patients' psychological well-being (psychological symptoms, satisfaction with life) for five years after diagnosis. Differences between treatments and predictors of psychological well-being were investigated. Half of the respondents were satisfied with the care and information they received about the cancer and side effects of treatment. Negative experiences, like learning of the diagnosis in an impersonal way and dissatisfaction with the information and care, predicted poorer well-being. Negative effects of treatments were common, multiple, persistent, and vary by treatment modality. All treatments result in sexual difficulties (70–92% reported sexual dysfunction and sex life with the spouse ended in 20-58%), prostatectomy and radiotherapies also in urinary dysfunction, and external radiotherapy in bowel dysfunction. Most symptoms were considered highly bothering. Especially, urinary symptoms were associated with poorer well-being, but bother of the symptoms had a greater impact than the symptoms as such. Unmet supportive care and informational needs were common. Along with negative effects of treatments, needs which improvements in care would probably reduce; have a long-lasting impact on well-being.

Biography

Ulla-Sisko Lehto has completed her Master's degree in Psychology from University of Tampere, and has done her PhD (Oncology) from University of Tampere, School of Medicine. She is currently working as a Senior Researcher in the field of Psychosocial Oncology (Psychological well-being and health after a cancer diagnosis) at the National Institute for Health and Welfare, Finland. She has published papers in reputed journals in Oncology, Health Sciences, and Nursing Sciences.

ulla-sisko.lehto@thl.fi

Notes: