

Eliciting the views of left breast cancer patients receiving deep inspiration breath hold radiation therapy to inform the design of multimedia education and improve patient centred care for prospective patients

Background

The currently accepted best practice radiation treatment for left breast cancer patients is Deep Inspiration Breath Hold (DIBH) where patients hold a deep breath to reduce late cardiac and pulmonary effects from treatment. DIBH can be challenging and induce or exacerbate anxiety in patients due to the perceived pressure to reduce radiation treatment side effects. This study explored the experiences of patients treated with Deep Inspiration Breath Hold Radiation Therapy (DIBH-RT) to improve patient-centred care and inform the design of multimedia educational tools for future patients undergoing DIBH.

Methods

This descriptive qualitative study was underpinned by a social constructivist approach

to create new educational and patient care approaches based on previous patients' experiences. Semi-structured interviews were conducted with patients who had completed DIBH-RT for breast cancer. Data was analysed with reflexive thematical analysis.

Results

Twenty-two patients were interviewed with five key themes identified: (1) informational needs, (2) care needs, (3) autonomy, (4) DIBH performance influencers and (5) other centredness. Recommendations were derived from these themes to improve future treatments of DIBH patients. These recommendations revolved around improvements to education, patient-centred care and strategies to improve self-efficacy with breath holding.

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Kath Dower is a senior radiation therapist working for the North Coast Cancer Institute, Lismore Base Hospital. As a 2021 RRCBP candidate Kath completed a qualitative study exploring the experiences of patients who need to take a deep breath in and hold this breath for their left breast cancer radiation therapy treatment.

Kath plans to further investigate multimedia education for patients and how this impacts on their ability to achieve breath hold for their treatment.

Conclusion

Patients offer a wealth of knowledge regarding their lived experiences with treatment which can enhance future patients' experiences if incorporated into their education and care. Eliciting patients' views of their DIBH-RT treatment highlighted the need to improve patient self-efficacy with DIBH through familiarity with their planned treatment from new multimedia education, and foster patient care to enhance their experience.

Keywords

Breast, Deep Inspiration Breath Hold, Education, Patient Care Approaches