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[Intervention Review]

Information interventions for orienting patients and their carers to cancer care facilities

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ABSTRACT

Background

Cancer patients experience distress and anxiety related to their diagnosis, treatment and the unfamiliar cancer centre. Strategies with the aim of orienting patients to a cancer care facility may improve patient outcomes. Although meeting patients' information needs at different stages is important, there is little agreement about the type of information and the timing for information to be given. Orientation interventions aim to address information needs at the start of a person's experience with a cancer care facility. The extent of any benefit of these interventions is unknown.

Objectives

To assess the effects of information interventions which orient patients and their carers/family to a cancer care facility, and to the services available in the facility.

Search methods

We searched the Cochrane Central Register of Controlled Trials (CENTRAL) (*The Cochrane Library* 2011, Issue 2); MEDLINE (OvidSP) (1966 to Jun 2011), EMBASE (Ovid SP) (1966 to Jun 2011), CINAHL (EBSCO) (1982 to Jun 2011), PsycINFO (OvidSP) (1966 to Jun 2011), review articles and reference lists of relevant articles. We contacted principal investigators and experts in the field.

Selection criteria

Randomised controlled trials (RCTs), cluster RCTs and quasi-RCTs evaluating the effects of information interventions that orient patients and their carers/family to a cancer care facility.

Data collection and analysis

Results of searches were reviewed against the pre-determined criteria for inclusion by two review authors. The primary outcomes were knowledge and understanding; health status and wellbeing, evaluation of care, and harms. Secondary outcomes were communication, skills acquisition, behavioural outcomes, service delivery, and health professional outcomes. We pooled results of RCTs using mean differences (MD) and 95% confidence intervals (CI).



Main results

We included four RCTs involving 610 participants. All four trials aimed to investigate the effects of orientation programs for cancer patients to a cancer facility. There was high risk of bias across studies. Findings from two of the RCTs demonstrated significant benefits of the orientation intervention in relation to levels of distress (mean difference (MD) -8.96 (95% confidence interval (CI) -11.79 to -6.13), but non-significant benefits in relation to state anxiety levels (MD -9.77 (95% CI -24.96 to 5.41). Other outcomes for participants were generally positive (e.g. more knowledgeable about the cancer centre and cancer therapy, better coping abilities). No harms or adverse effects were measured or reported by any of the included studies. There were insufficient data on the other outcomes of interest.

Authors' conclusions

This review has demonstrated the feasibility and some potential benefits of orientation interventions. Orientation interventions may reduce distress in patients, but the quality of the evidence is low. However, most of the other outcomes remain inconclusive (patient knowledge recall/satisfaction). The majority of studies were subject to high risk of bias, and were likely to be insufficiently powered. Further well conducted and powered RCTs are required to provide evidence for determining the most appropriate intensity, nature, mode and resources for such interventions. Patient and carer-focused outcomes should be included.

PLAIN LANGUAGE SUMMARY

Interventions for orienting patients and their carers to cancer care facilities

Patients who are new to a cancer care facility and cancer treatment are often stressed and anxious due to their diagnosis of cancer, uncertainties about treatment, needle phobias and meeting new care providers. This review focuses on the effects of information programs which provide information specifically related to the facility and the services available to patients, their families and care givers. A broad search of published reports located only four studies with 610 participants which met the criteria for inclusion in this review. Orientation interventions may reduce distress in patients, but the quality of the evidence is low. The effects of such intervention on patient/carer satisfaction, knowledge and recall were not sufficiently evaluated or reported by the included trials. Although the studies generally reported positive outcomes for participants (e.g. more knowledgeable about the cancer centre and cancer therapy, better coping abilities), the studies generally were of poor quality and did not have a sufficient number of participants to eliminate the possibility of bias.