

Title:

Developing and Validating a Tool to Improve Self-Management of Antineoplastic Therapy at Home

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Session Title:

Research Poster Session 3

Slot (superslotted):

RSC PST 3: Sunday, 30 July 2017: 9:45 AM-10:15 AM

Slot (superslotted):

RSC PST 3: Sunday, 30 July 2017: 12:00 PM-1:15 PM

Slot (superslotted):

RSC PST 3: Sunday, 30 July 2017: 2:00 PM-2:30 PM

Keywords:

cancer patient, self-management and tool validation

References:

1. Bagnasco, A., Calza, S., Petralia, P., Aleo, G., Fornoni, L., & Sasso, L. (2016). Investigating the use of Barrows Cards to improve self-management and reduce healthcare costs in adolescents with blood cancer: a pilot study. *Journal of advanced nursing*, 72(4), 754-758.

Marchand, F., & Mimassi, N. (2016). Evaluation of the impact of a patient therapeutic educational on compliance and on efficacy on allodynic symptoms of lidocaine 5% medicated plaster in postoperative localized neuropathic pains. *Annals of Physical and Rehabilitation Medicine*, 59, e161.

Abstract Summary:

This study shows how to develop and validate a patient education tool to improve adherence to treatment and improve safety by reducing errors, especially in a vulnerable population such as cancer patients. A small group of lung cancer patients were involved to validate the new tool.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will be able to design and implement a process for the development and validation of a therapeutic education tool for cancer patients.	This study provides and practical example of how a new tool can be successfully developed by experts and then validated thanks to the active involvement of its end-users, who are the patients themselves. This process can also improve patients' motivation to adhere to treatment.
The learner will be able to use qualitative research method for the development and validation of a new tool for patient education.	The patients were actively involved by using a short interview asking if they were satisfied with what was written on each card and if the pictures and illustrations on each were appropriate. Not just words, but also pictures have a significant psychological impact on

	already vulnerable people such as cancer patients.
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Abstract Text:

Purpose:

To develop and validate an educational tool consisting of a deck of cards for lung cancer patients to educate them to autonomously and safely manage their biological antineoplastic oral therapy at home. This process could increase patients' self-confidence and adherence to treatment.

Methods:

We started from the definition of 'self-management' coined by Corbin & Strauss (1988): 'Self-management aims at helping patients to maintain a wellness in their foreground perspective' (Lorig & Holman 2003, p. 1). Therefore, self-management is based on the perception patients have about problems linked to their conditions. This led us to choose a method based on the theory of problem-based learning, such as the Barrows Cards (Barrows & Tamblyn, 1977), and applied it to patients with the purpose of improving self-management through therapeutic education.

The Barrows Cards were originally used to test decision-making skills and critical thinking in medical students. This method—also known as the 'Portable Patient Problem Pack' or simply P4 System—uses a situational card that describes a complex problem and learners can choose from a deck of at least 15 cards each of which describes a possible solution to that problem with the support of a picture. The setting was the Oncology Day Hospital of our Teaching Hospital. The participants were 14 adult lung cancer patients taking antineoplastic oral therapy at home.

The instrument development and validation process included the following steps: 1) A review of the literature to retrieve scientific evidence to support the purpose of our study; 2) Obtaining support and advice from cancer experts; 3) Checking the nursing records of the 14 patients under treatment; 4) Using a short questionnaire, feedback from patients on the clarity of the statement provided on each card and on the appropriateness of the picture that illustrates the statement was obtained.

Results:

At the end of this study, all of the 14 patients were very satisfied with the deck of 15 cards, plus a situational card initially developed with the support of our cancer experts. Through the active participation of patients, we ensured that the cards were actually appropriate for the purpose of educating them to safely self-manage their biological antineoplastic oral therapy at home. This qualitative process enabled to validate the cards initially developed by our experts.

Conclusion:

Despite the great number benefits provided by new antineoplastic drugs, there are still some important issues linked to the incorrect management of oral antineoplastic therapy when patients are at home. The most common issue was found to be the lack of adherence to therapy, which reduces the effectiveness of therapeutic treatment. Therapeutic patient education performed by nurses based on a validated structured model such as the Barrows Cards, can significantly promote adherence to treatment and in achieving better health outcomes also in vulnerable populations, such as cancer patients.