



Partnership project: Reinforcing partnership between cancer patient, general practitioner and oncologist - a randomised controlled trial

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Background

International guidelines underline the importance of strengthening the coordination and continuity of cancer care. The different roles of general practitioners and oncologists with regard to treatment, follow-up and rehabilitation during and after cancer treatment are often obscure to cancer patients. Parallel courses of healthcare are often taking place instead of coordinated care characterised by continuity and partnership between care providers. Patients may feel uncertain about the health professionals' skills and area of responsibility. Healthcare seeking and support during and after cancer treatment may, therefore, be inappropriate, leaving patients feeling insecure, lost between care providers, and with reduced quality of life.

Aim

The study aims to design and evaluate a new way of communication and shared decision-making that brings the patient, the oncologist and general practitioner together in a shared video-consultation in the early phase of chemotherapeutic treatment. The overall aim of this new and innovative intervention is to improve continuity of cancer care as perceived by both patients and healthcare providers.

Method

The effect of the intervention in addition to usual care will be tested in a randomised controlled trial at Vejle Hospital in the Region of Southern Denmark. Based on sample size calculation, we intent to include 340 patients at the Department of Oncology and their general practitioners. The yearly numbers of referrals starting chemotherapy at this department are increasing from 1200 in 2013.

The possibility of additional video consultations, templates for needs assessment and shared decision-making will be included in the study intervention. Furthermore, footage of the consultations will be accessible to the patient for viewing at home.

Results

Results and process outcomes will be evaluated qualitatively and quantitatively, using footage of the consultations, questionnaires to patients, general practitioners and oncologists, and data from registers. The quantitative outcomes at patient level will include decision self-efficacy (primary outcome), unmet needs of rehabilitation, health-related quality of life, continuity, information received, illness intrusiveness and depression and anxiety.

Project Status

The project includes development of a new model of communication and shared decision-making bringing the cancer patient, the general practitioner and the oncologist together. Patient inclusion is planned to start mid 2015.

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