

Real world, routine implementation of patient reported outcomes measures (PROMs) in clinical practice in oncology: Patients' perspectives on the PROMs completed using an electronic device

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BACKGROUND

Real-world, routine use of PROMs lead to timely recognition and management of cancer treatment side effects. Despite this, there's a shortage of studies validating these results in real-world, complex cancer care settings.

RCT samples might not reflect the full target population due to selective inclusion/exclusion criteria, limiting generalizability.

OBJECTIVE

Evaluate an electronic PROM program, sustained in clinical practice for the past 9 years, from patients' perspectives.

METHOD

Design: A sequential explanatory (QUAN -> qual)

Sample: 105 experience survey to patients undergoing chemotherapy, 51 in depth interviews

Data collection: Surveys included demo questions and appreciation of PROMs. Interviews focused on exploring patients' experiences regarding PROMs within usual care

Data analysis: QUAN - Assessed PROM screening rates and symptom severity and evaluated the integration of PROMs in clinical practice. Qual - thematic analysis to enhance patients' experiences with PROMs

BARRIERS

1. **Integration Barriers:** Clinicians' workload leading to inconsistency in questionnaire completion and follow-up
2. **Lack of Explanation:** Some patients felt that the utility of the PROMs was not adequately explained, leading to confusion and lack of understanding.
3. **Lack of Understanding of Summary Report:** Not found to be useful as they did not fill out the PROMs enough times to track symptoms
4. **Physical and Mental Barriers:** Some patients faced difficulties in filling out the PROMs due to physical or mental challenges, requiring assistance
5. **Perceived Lack of Benefit:** Some patients who have few symptoms or received no feedback from the healthcare team did not see the benefit of filling out the PROMs
6. **Language and Age Barriers:** Language barrier as the questionnaire is offered only in French or English. Age barrier as some older individuals struggled with the electronic format
7. **Complexity of the 10-point scale:** Some individuals found it challenging to classify certain symptoms on the 10-point scale, such as depression and anxiety

RESULTS

FACILITATORS

1. **PROMs:** Enable patients to identify their symptoms. Improve communication with clinicians. Support and reassure patients by highlighting symptom evolution. Encourage introspection and open communication about symptoms. Help empower patients in managing their health.
2. **Presentation and explanation of PROM:** Clear and comprehensive communication about the PROMs' utility and function enhance patient engagement.
3. **Self-managed care and peer support:** Advice and support from clinicians, other patients, or family members enhance symptom management and overall well-being
4. **Follow-ups of PROMs in consultations:** Increase patient satisfaction. Encourage collaborative resolution of issues raised by patients. Care team uses the questionnaire to adjust treatments and care
5. **Patient motivation and engagement:** Patients who perceive the PROM's utility are more likely to actively use it to participate in their treatment and communication with the healthcare team.

CONCLUSION

- PROMs are valuable in real-world clinical setting.
- Implementation faces not only clinician level barriers, but those from the patients' perspective as well.
- Addressing barriers with patients' identified facilitators is a necessary step toward optimizing PROM's effectiveness

IMPLICATIONS

- Clear and comprehensive communication about PROMs, coupled with support from care teams, is crucial for patient engagement
- Follow-up discussions and the incorporation of PROMs results into care planning increase patient satisfaction
- Patient motivation is enhanced by recognizing the utility of PROMs in their care

CONTACT

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