Psychosocial Interventions in Cancer Nursing: Implementing Evidence into Practice

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Greetings from EONS

President elect
Lena Sharp, Sweden

President
Daniel Kelly, UK

Past President
Erik van Muilekom (The Netherlands)
Greetings from Switzerland
Overview

1. Psychosocial interventions: Role of cancer nurses

2. Challenges for cancer nurses when providing psychosocial care

3. Future developments in psychosocial care and potential roles cancer nurses could play
Psychosocial Care: Importance

Identification of distress as the 6th Vital Sign of cancer care
Unmet needs as expressed by patients

• *‘It does feel like after your last chemo session you are on your own. It’s then when you are not so much supported by nurses/doctors etc, that it hits home what has happened and the ‘mental health’ element kicks in. That is where I feel support is lacking.’*

• *‘In hindsight I probably did need support but wasn’t aware of it at the time – emotional needs weren’t discussed with the nurses doing consultations, I think they were too busy.’*
Psychosocial support in the era of precision medicine

Host “omes”
- Genome
- Epigenome
- Transcriptome
- Metabolome
- Microbiome

Profiling
- Environment
- Lifestyle
- Co-morbidities
- Health history
- Health Literacy
- Psycho/emotional/cognitive needs

HOLISTIC VIEW

Personalized Cancer Treatment

Diagnostic and Treatment

(Bio)markers

Multi-leveled Stratification

Molecular Target

Predictive/Preventive/Supportive Care

Personalized Cancer Care

Risk/Needs
Challenges in the era of precision medicine

A comprehensive precision medicine approach should encompass:

- Predictive
- Personalized
- Preventive
- Participatory
- Psycho-cognitive aspects

Psychosocial support: International guidelines

- Psychosocial oncology has grown over the last decade.
- It is not possible to organize cancer care without a specific investment in psychosocial oncology.
- Psychosocial oncology (…) is not an integral part of cancer care in many countries, especially developing nations, where basic care is sometimes not provided to cancer patients.
Psychosocial support: Definition

- psychological, social and spiritual care services and interventions
- enable patients, their families, and health care providers to optimize biomedical health care and to manage the psychological / behavioural, social and spiritual aspects of illness and its consequences so as to promote better health

Canadian Association of Psychosocial Oncology (2010) Standards of Psychosocial Health Services for Persons with Cancer and their Families, www.capo.ca
Psychosocial Support: Definition

Psychosocial Oncology

• focuses on the **emotional distress** aspects of cancer care and is particularly concerned with the **assessment and treatment of distress** and the management of complex issues.

• offers care to persons with cancer who have **specific unmet needs** related to coping with their illness, emotional distress, changes in relationships and planning for the next phase of their lives.

• is addressed by **professionals trained in this sub-specialty** (e.g., psychologists, social workers, spiritual care specialists, psychiatrists and psychiatric/mental health advanced practice nurses [APNs]).
Psychosocial Support: Definition

Supportive Care services

• Address a range of needs, including informational and counselling needs related to the management of symptoms and specific practical or functional issues.

• A variety of disciplines may be involved in provision of supportive care, such as nursing, medicine, nutrition and rehabilitation services.

• Address unmet needs of persons with cancer who require information, education, support, financial advice, or other practical advice.

Canadian Association of Psychosocial Oncology (2010) Standards of Psychosocial Health Services for Persons with Cancer and their Families, www.capo.ca
Psychosocial interventions: Definition of the NCCN / IOM report

• non-pharmacological
• interpersonal relationship between a patient or group of patients and one or more trained (usually professional) helpers

• key types of psychosocial care:
  • Cognitive Behavioral Therapy
  • Supportive Psychotherapy
  • Family Therapy

Who is providing psychosocial care?

Proportion of providers of the interventions (%)

- Nurses: 40%
- Psychologists: 37%
- Social workers: 16%
Effectiveness of psychosocial care: Comparing providers of the intervention

Galway K, Black A, Cantwell M, Cardwell CR, Mills M, Donelly, M: Psychosocial interventions to improve quality of life and emotional wellbeing for recently diagnosed cancer patients. Cochrane Database of Systematic Reviews 2012, p. 4
Effectiveness of psychosocial care: Comparing providers of the intervention

- 27 studies (n=3324)
- 7 studies reported significant effects
- 5 of the effective interventions were provided by (oncology) nurses:
  - education about fatigue
  - teaching in self-care or coping techniques
  - facilitation of activity management learning
Uptake and adherence to psychosocial care: Who takes up?

53 studies (n= 12 323 cancer patients) reporting 60.1% uptake / 90.4% adherence for psychological interventions

Patients screened and identified as distressed were less likely to accept intervention than unselected patients (50.3% vs. 66.3%)
Uptake and adherence to psychosocial care: Acceptance

- Uptake was higher for interventions delivered by telephone than face to face (71.2% vs. 53.8%) and when interventions were offered prior to medical treatment compared with later (72.9% vs 56.8%)
- Patients were more likely to accept intervention from nurses than other health professionals (68.3% vs. 50.5%)
Are nurses recognised as important providers of psychosocial care?
Overview

1. Psychosocial interventions: Role of nurses

2. Challenges for nurses when providing psychosocial care

3. Future developments in psychosocial care and potential roles nurses could play
Psychosocial interventions revisited

• non-pharmacological
• interpersonal relationship between a patient or group of patients and one or more trained (usually professional) helpers
• three key types of psychosocial care:
  • Cognitive Behavioral Therapy
  • Supportive Psychotherapy
  • Family Therapy

Diffusion of Distress Management Guideline into practice

- Observational study conducted in 2013 in the US
- Study respondents (n = 409) were predominantly certified nurses (84%)
- 17% of respondents were using the Distress Management Guideline (DMG)
- Time, staff uncertainties and ambiguous accountability were the largest barriers to not assessing distress
- Significant predictors of DMG use included:
  - higher familiarity with the DMG (OR 3.81, p < .001)
  - lower perceived barriers (OR 0.41, p = .001)

Psychosocial interventions might request a behavior change of intervention providers first.

Michie et al. Implementation Science 2011, 6:42; http://www.implementationscience.com/content/6/1/42
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Cancer a global concern

Psychosocial support: Targeted and tailored

Key design features for psychosocial support interventions

1. **Target**: e.g. cancer type, treatment stage
2. **Tailor**: individual needs
3. **Self-management support**
4. **Low intensity**: integrated professional support with other mechanisms; e.g. technology
5. **Training**: adherence to intervention
6. **Evidence-based**
7. **Stakeholder involvement**
Self-Management Support: What is effective?

Focus on self-efficacy
- Care plans
- Telephone coaching
- Motivational interviewing
- Goal setting

Focus on technical skills
- Patient held records
- Active group education
- Group education
- Self-monitoring

Information provision
- Online courses
- Electronic information
- Written information
- Care plans

Behaviour change

Swiss study: Co-creation and testing of a peer-led self-management program for Breast Cancer Patients

Eicher M, Haslbeck J, Urech C, Ribi K, Holm K: Co-creating and testing the effectiveness of an integrated peer-to-peer Selfmanagement program for breast cancer Survivors: A pilot study (COSS)
Swiss example of an effective psychosocial low intensity intervention

- web-based stress management intervention
- 8 modules with weekly written feedback by a psychologist ("minimal-contact") based on well-established stress management manuals
- program was feasible and effective in improving QoL and distress

Hess V, Grossert A et al J Clin Oncol 35, 2017 (suppl; abstr LBA10002)
Can we delegate psychosocial interventions to digital devices?
Why does an intervention work?

Effectiveness of an intervention can be predicted by:

- team knowledge and skills
- contextual factors at the
  - system (external policy and incentives),
  - facility (management support)
  - and team (knowledge and skills) levels.
Implementation Research

Model of quality cancer care including psychosocial aspects

Take Home Message

• Cancer Nurses play a most pivotal role in the provision of psycho-social interventions
• To be able to provide evidence based interventions, cancer nurses need to be equipped with adequate:
  • education and training
  • infrastructure and time
  • guidelines that adress the specific roles and functions of nurses adequately
• Future investigations in psycho-social interventions need to enhance:
  • tranparency about the intervention provision in studies
  • rigorously planned implementation studies that take the complexity of the context of an intervention provision into account (e.g. by referring to established frameworks such as CFIR / PARIHS / RE-AIM )
Merci beaucoup!

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