Patients’ Experiences of Preparation for Radiation Therapy: A Qualitative Study

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Forshaw, Hall, Boyes, and Carey contributed to the conceptualization, design, and analysis. Forshaw and Hall completed the data collection and provided statistical support. All authors contributed to the manuscript preparation.

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Purpose/Objectives: To explore patients’ experiences of and preferences for preparation for radiation therapy.

Research Approach: Qualitative study.

Participants: 26 individuals who recently received radiation therapy for cancer.

Setting: One Australian radiation oncology clinic located within a tertiary referral hospital in New South Wales.

Methodologic Approach: Semistructured interviews were conducted and analyzed based on a qualitative descriptive approach and content analysis of the transcribed interviews.

Findings: Four main themes related to preparation techniques were identified: (a) psychological preparation (frame of mind, downward comparison, coping mechanisms, and reassurance); (b) information preparation (format, content, and knowledge from patients’ own or others’ experiences); (c) quality of health care; and (d) social support. Two themes related to outcomes of preparation were identified: feeling psychologically prepared and knowing what to expect. Overall, participants’ accounts of preparation for radiation therapy revealed that provision of information was satisfactory. Some participants would have liked more information and support primarily in relation to side effects and the practicalities of what would happen during treatment.

Conclusions: The information gained in this study indicates what strategies may best prepare patients for radiation therapy.

Interpretation: Providing patients with information that creates a realistic expectation of what radiation therapy involves both before and after treatment seems particularly important in helping them feel prepared.

Radiation therapy is one of the three major cancer treatment modalities (Tait & Hardy, 2006), with about 50% of all patients with cancer recommended to receive it (Barton et al., 2013). Radiation therapy is used to treat cancer itself (curative) or to relieve symptoms (palliative). For many, curative radiation therapy is a time-intensive treatment, which is often undergone five days per week for as many as eight weeks (New South Wales [NSW] Department of Health, 2010). Palliative radiation therapy usually involves fewer treatments given during a specified time. Although the physical and psychological impacts of radiation therapy can vary, short-term effects commonly include skin changes and fatigue, and long-term side effects include secondary tumors, cognitive impairment, or infertility, depending on the site and dose of treatment. Poor psychological outcomes, such as anxiety and depression, are also common among people receiving radiation therapy (Hess & Chen, 2014; Reilly et al., 2013).