M. O'Brien*, J. Harris* P. Hirsch* T. O'Brien®

*The Women's Psychotherapy Service Inc., Brisbane, Australia

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Research Aim

Survey

Diagnosis of metastatic breast cancer may result in high levels of psychological morbidity. In controlled studies, supportive-expressive groups have been effective in reducing symptoms, yet there is evidence of limited take up of groups, for a range of reasons. Anxiety associated with the impact of death on group members is one factor which may contribute to wariness amongst health professionals to refer to such groups.

The aim of this study was to compare perceptions of women and their treating oncologists of the perceived benefits of a supportive-expressive group for women with advanced breast cancer.

Sample

Rate the following benefits (1-5)

Q1. Alleviates sense of isolation as a result of the diagnosis

Q2. Helps express and manage feelings about the disease

Q3. Increases capacity to deal with the diagnosis

Q4. Increases capacity to make choices about treatment

Q5. Helps to improve control of physical symptoms

Q6. Helps to improve communication/relationship with my doctor

14 women with metastatic breast cancer & 8 oncologists

Response Rate

Group members: 67%; Oncologists: 62%

Description of Group

 professionally led weekly supportiveexpressive group for women with advanced breast cancer

•Delivered face to face & with audio teleconferencing to women throughout Queensland, Australia.

Results

Figure 1. Mean Ratings (1-5) for Women & Oncologists

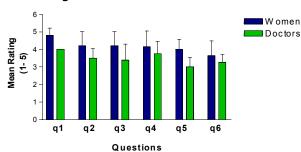
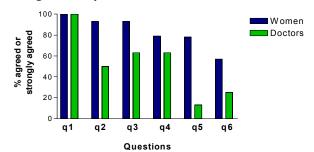


Figure 2. The percentage of Women & Oncologists who either agreed or strongly agreed to questions.



Women & Oncologists agreed on 4 main benefits of Group:

- •Alleviated sense of isolation (100%/100%)
- •Increased capacity to deal with diagnosis (93%/63%)
- •Helped to express and manage feelings about disease (93%/50%)
- •Increased capacity to make choices about treatment ■Women (79%/63%)

Women and Oncologists disagreed on 3 benefits of Group:

- •Improved control of physical symptoms (78%/13%)
- •Helped express and manage feelings (93%/50%)
- •Helped improve communication/relationship with doctor (57%/25%)

Oncologists tended to be undecided or disagree more, compared to women, about potential benefits.

Conclusions

Overall, results suggest some wariness amongst oncologists about benefits of group.

However results also suggest:

- •oncologists may have limited knowledge of the psychosocial needs/situations of women
- •women and oncologists may not be talking about the same thing when responding to questions
- •they may hold different perceptions about the benefits of the group
- •views need to be made explicit and not assumed