

Breaking bad news of cancer diagnosis – Perception of the cancer patients in a rural community in Malaysia

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Abstract

Context: Breaking of bad news is an important component in the management of cancer patients. **Aims:** This study aimed to assess the perceptions of breaking bad news of cancer diagnosis. **Settings and Design:** It was a cross-sectional study using Breaking Bad News Assessment Schedule (BAS) questionnaire on cancer patients in Serian district. **Materials and Methods:** Using snowballing sampling method, a total of 134 patients were interviewed face-to-face after the consent was obtained from each of the respondents. **Statistical Analysis Used:** Data was entered and analyzed using SPSS version 19.0. **Results:** Majority were comfortable with the current method of breaking bad news. The main aspects found to be the areas of concern were the importance of the usage of body language, management of time and identifying patients' key area of concerns. There were significant difference between sex and "information giving" ($P = 0.028$) and "general consideration" ($P = 0.016$) and also between "the age and setting the scene" ($P = 0.042$). Significant difference was also found between the types of cancer and "the setting of scene" ($P = 0.018$), "breaking bad news technique" ($P = 0.010$), "eliciting concerns" ($P = 0.003$) and "information giving" ($P = 0.004$). **Conclusion:** Good and effective communication skill of breaking bad news is vital in the management of cancer patients. As the incidence of new cases of cancer increase every year, breaking of bad news has become a pertinent to the medical professionals' role. Specific aspects of communication skills based on local characteristics should be more emphasized in the formulation of training for doctors.

Key words: Breaking bad news, cancer, patients' perception

Introduction

Breaking bad news has always been an extra burden for medical officers and specialists, especially when dealing with diagnosis of cancer or imminent death. Bad news as defined by Buckman^[1] is any news that drastically and negatively alters the patient's view of her or his future. During the delivery of bad news, patients often feel hopeless as they are often being forced to make limited choices that involved their mental and physical well being.^[2] This complexity can create serious miscommunications, such as the patient misunderstanding the prognosis of the illness or purpose of care.^[3] According to Fallowfield and Jenkins^[4], if bad news is communicated badly it can cause confusion, long-lasting distress, and resentment; if done well, it can assist understanding, acceptance, and adjustment. It is an important communication skill in the medical profession, in which formal training is rarely available. Even though such training has been shown to be helpful and effective,^[5]

it requires a complex communication task that requires expert verbal and non-verbal skills.

Cancer is a leading cause of death worldwide and the total number of cases globally keeps increasing. In Malaysia, a total of 18,219 new cancer cases were diagnosed in 2007 and registered in the National Cancer Registry, with the ten leading cancers: Breast, colorectal, lung, nasopharynx, cervix, lymphoma, leukaemia, ovary, stomach and liver. According to the Ministry of Health Malaysia^[6], cancer is the fourth leading common cause of death in public hospital in Malaysia (11.12%), after the diseases of circulation system, diseases of respiratory system and infectious and parasitic diseases. In Sarawak itself, there were 1,580 (8.7% of the national figure) new cases of cancer in 2007, registered in National Cancer Registry with the top five most common cancers among males being nasopharynx, colorectal, (trachea, bronchus, lung), liver, stomach, meanwhile among females were breast, cervix, colorectal, ovary and nasopharynx. In contrast with the national cancer ethnicity distribution, Bidayuh, one of the indigenous communities of Sarawak has the highest age-standardized incidence rates (ASR).

As the incidence and mortality rate associated with cancer cases increases each year, delivering the bad news has become more pertinent and essential role for medical professionals. In order to perform this role efficiently, it is necessary to understand how competent doctors are from patients' perceptive and the factors that may affect patient's perception of breaking of bad news. Previous studies had showed that delivering of bad news is affected by socio-demographic factors such as education level, socio-economic status, gender, cultural background.^[7-9]

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