Original Article Provisional Pdf

Submitted: 26 Oct 2011 Accepted: 21 Feb 2012

Perceptions of Receiving Bad News about Cancer among Bone Cancer Patients in Sarawak General Hospital - A Descriptive Study

CHEAH Whye Lian¹, Nurul Bahariah Dollah², Chang Ching Thon³

- ¹ Department of Community Medicine & Public Health, Faculty of Medicine and Health Sciences, 94300 Kota Samarahan, Universiti Malaysia Sarawak, Malaysia
- ² Department of Orthopedics, Faculty of Medicine and Health Sciences, 94300 Kota Samarahan, Universiti Malaysia Sarawak, Malaysia
- ³ Department of Nursing, Faculty of Medicine and Health Sciences, 94300 Kota Samarahan, Universiti Malaysia Sarawak, Malaysia

Abstract -

Background: This study aimed to determine the perceptions and expectations of bone cancer patients with respect to their doctors and the breaking of bad news as well as the environment in which the news was delivered.

Methods: A cross-sectional study using a pretested 41-item questionnaire was conducted using convenience sampling among bone cancer patients in Sarawak General Hospital. Face-to-face interviews were conducted after consent was obtained. Data were analysed using SPSS version 16 (SPSS Inc., IL, US).

Results: A total of 30 patients were interviewed. The majority of the respondents were younger than 40-years-old, Malays, and female. All of the respondents perceived that they received news in a comfortable place, agreed that the doctor used simple language and appropriate words during the interaction, and believed that the way the doctor delivered the news might influence their life. The majority of the respondents reported that their news was received without interruption, that the doctor was sitting close but without making physical contact, and time was given for patient to ask questions and they were informed accordingly.

Conclusion: Delivering bad news regarding cancer is an important communication skill and a complex task that can be learned and acquired. Specially tailored training is proposed to improve medical practice in this area.

Keywords: bone neoplasms, communication barrier, health care, truth disclosure

Introduction

Cancer is one of the leading causes of death in the world today. The estimated cancer incidence in Malaysia is 30 000 cases annually with a prevalence of 90 000 (1). Bone cancer is relatively uncommon and involves tumour growth in the bone resulting in pain, hypercalcemia, anemia, skeletal fractures, and spinal related injuries that can affect mobility and subsequently the patient's functional status, quality of life, and survival (2). The most common type of bone cancer is osteosarcoma; mainly affects children and young adults, chondrosarcoma; usually afflicts adults over 40 years of age, and Ewing's sarcoma; which is commonly found in children and teenagers (3).

As cancer is a complicated illness that often leads to a poor prognosis, it is a major challenge to healthcare providers, particularly at the point when they have to break bad news to the patient. Bad news can be regarded as unfavourable news that in the context of medicine has been defined as "any news that drastically and negatively alters the patient's view of her or his future" (4). It is often a dilemma for the physician in charge to be able to break the bad news to patient and family members without giving a sense of false hope. Effective breaking of bad news must consist of the ability to break the news compassionately, clearly, and at the same time provide emotional support, respond to questions, and maintain a sense of hope. A good breaking of bad news should avoid