

Making an Informed Decision: The Discrepancy between a Patient's Recall of Information and the Information Needed for Acquisition of Radiotherapy Informed Consent

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ABSTRACT

Introduction: To give informed consent, a patient needs to sufficiently understand the information provided by a physician to decide among treatment options. Although shared decision-making is becoming an important aspect of patient-centered care, little is known about decision-making by cancer patients in Korea.

Objectives: This study assessed patients' understanding of treatment goals and the need to obtain further information after a physician obtained informed consent for radiotherapy.

Methods: In this prospective study, doctors and patients completed questionnaires independently after informed consent for radiotherapy had been obtained. The questionnaires for the doctors and patients were comprised of matched items regarding treatment aims and the need for further information.

Results: The study enrolled 103 cancer patients scheduled for radiotherapy. The proportion of respondents who stated that the intent of treatment was to bring about a cure was 80.6% among the patients (83 of 103 patients) and 53.4% (55 of 103 patients) among the doctors ($p = 0.000$). The proportion of respondents who believed that the aim was prolongation of life was 17.5% and 1.9%, respectively ($p = 0.000$). Regarding the need for further information, 42.7% (44/103) of the patients did not want further information because they had faith in the physicians' medical expertise.

Conclusion: Many cancer patients misunderstand the aims of treatment and half of participants do not want further information. Physicians should address whether specific interventions can solve these barriers so that Korean cancer patients can make truly autonomous treatment decisions.

INTRODUCTION

- Informed consent suggests that patients took in enough information provided by physicians to decide between treatment options. Therefore, the acquisition of informed consent reflects their interactions with and understanding of information given by a physician [1]

- To make an informed decision, cancer patients need to understand the goals of treatment. Also, a trend towards disclosure of a diagnosis to Asian cancer patients increases the importance of determining effective and satisfactory ways for physicians and patients to exchange information [2,3]

- This study aimed to determine patients' recognition and understanding of the goals of treatment and their needs for further information after giving informed consent for radiotherapy. No prior research has been done on informed consent and decision making in cancer patients in Korea

METHODS

Design

- Data, consisting of the questionnaires completed by the doctors and patients, was conducted prospectively.
- Two radiation oncologists who work in two local academic hospitals were responsible for obtaining informed consent for radiotherapy.
- Patients who were referred to the radiation oncology department and fulfilled the inclusion criteria (age over 20 years old and alert mental status) participated in the study.

Questionnaires

- The questionnaires for doctors and patients were composed of matched items about the patient's diagnosis and the aims of treatment. The need for further information after offering informed consent for radiotherapy was compared, also.

Statics

- Patient demographics and the further informational needs of patients are summarized as the number of subjects
- Concordance between the provided physician's information about treatment aims and the patient's perception of those aims were examined using the chi-squared test.
- The association and the difference in means between the patients' information needs and their demographics were analyzed with the chi-squared test and Student's t-test.

RESULTS

Description of participants

- A total of one hundred three patients participated 55.3% of whom were female. Their median age was 60 years. Twenty-nine patients had breast cancer (28.2%), 13 had head and neck cancer (12.6%), and 12 had lung cancer (11.7%). 36% of patients were referred from the department of general surgery, and 17.5% were referred from the department of medical oncology. The rest of the patients were referred from others.

Concordance between physician-provided information and patients' perceptions

		Patient	Physician	p-value
Treatment goal				
Cure	Yes	83 (85.5)	55 (53.4)	0.00
	No	20 (19.5)	47 (45.6)	
Adjuvant	Yes	26 (25.2)	40 (38.8)	0.04
	No	77 (74.8)	62 (60.2)	
Prolongation of life	Yes	17 (16.5)	2 (1.9)	0.00
	No	86 (83.5)	100 (97.1)	
Symptom control for palliative aim	Yes	26 (25.2)	16 (15.5)	0.08
	No	77 (74.8)	86 (83.5)	

Patients' need for further information

Yes (N= 59)	N (%)
Items for more information	
Diagnosis	2 (3.4)
Course	16 (27.1)
Stage	30 (50.8)
Treatment goal	2 (3.4)
Side effects	7 (11.9)
Etc	2 (3.4)
No (N= 44)	
I do not curious about that	3 (6.8)
It is not good even I know more details	1 (2.3)
I will follow as guidance of medical expertise	40 (90.9)
I will follow as decision of my family	1 (2.3)

CONCLUSION

- A significant number of patients did not fully understand the intent of radiotherapy treatment even though physicians had explained it, and that physicians did not properly recognize patients' desires for further information. Meanwhile, around half of the patients in our study did not want further information owing to their faith in medical expertise.

- More research is needed to provide the appropriate level of information and to understand the best ways of ensuring shared decision making via informed consent from cancer patients

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