

# Unmet Needs of the Cancer Patients at Tertiary Care Hospital

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**Abstract:** Cancer is the second most common cause of death in the world today, and is recognized as a major threat to common health by many governments. In countries where the western lifestyle is followed, cancer accounts for a quarter of the deaths. Objectives of study were to assess the unmet needs and patients satisfaction towards unmet of cancer patients at tertiary care hospital. Methodology- non experimental approach and descriptive survey design was used in the present study. The study was conducted at tertiary care 1050 bed specialty hospital. In present study, the population consisted of male and female cancer patients comes to outpatient department and diagnosed as cancer more than three months. The present study, study samples were selected by convenient sampling technique by the investigator. The sample size was 128. Findings- maximum the majority of the samples 61(47.7%) belong to the age of 41-59 years. In terms of gender, 68(53.1%) subjects were female, place of residence 103(80.5%) were from rural area, educational states of the subjects 39(30.5%) are secondary, whereas duration of illness 97(75.8%) in <1 years. Majority of 92% patients had reported unmet needs. In Psychological Needs Domain (78.1%) Health System and Information Needs (12.50%). Physical And Daily Living Activity (59.40%) Patient Care And Support Needs (9.40%). The majority of 82 % of subjects were reported dissatisfaction towards unmet needs and only 12% of patients were having satisfied with their needs. Conclusion- Assessing unmet needs in cancer patients are not a one time it needs continuous monitoring and evaluation. Study concluded that cancer patients in tertiary care hospital are having unmet needs and they were having dissatisfaction towards their needs.

**Keywords:** unmet needs, cancer, patients, at tertiary care hospital

## 1. Introduction

Cancer is the second most common cause of death in the world today, and is recognized as a major threat to common health by many governments. In countries where the western lifestyle is followed, cancer accounts for a quarter of the deaths. [1] Among the global deaths in 2008, 63% were attributed to non-communicable diseases, and is expected to increase further with aging of population, urbanization and globalization of risk factors. [2] One of the major differences between these communicable and non-communicable diseases is the need for regular supportive care in the latter. Among the non-communicable diseases, malignancies constitute 21% of the total disease burden [3] similarly, in India cancer is treated as an issue of increasing importance. It is the second leading cause of death and the second leading cause of non-communicable chronic diseases. [4] As a result, the diagnosis of cancer may be experienced as a stressful event that negatively impacts many aspects of a patient's life.

Despite the advances in cancer treatment, the prognosis of cancer remains unsatisfactory. It causes various physical and mental disorders in patients such as social isolation and spiritual pain. [5] Which affect their daily lives. Accordingly, the need for supportive care is increasing and it is vital to support the patients with cancer. [4] Today, the provision of supportive care is the equivalent of proper diagnosis and treatment [6]. The first step to develop and provide supportive care is to thoroughly investigate the patient's situation in order to identify his or her supportive care needs. [5] The identification of these needs is essential to high-quality care and the patients' satisfaction [7]. Many

studies have addressed supportive care needs of cancers patients; most of these studies have been conducted in the West, [8] or in Eastern countries such as Hong Kong, Taiwan and Japan. [9], The results of these studies, however, is different from each other; in some studies, the patients' physical needs are the top priority and treated as the essential supportive care needs, [9] while in the others the patients' psychological needs are considered as their first supportive care needs. [10] According to a systematic review by Carey et al., cancer patients' physical and psychological needs as well as information needs are all important and need to be addressed in supportive care. [11]

Unmet Needs assessment is a direct measure of the gap between patients' experience and their expectations. Needs assessment not only directly measures patients' own perceptions of their need for help on given issues but also directly measures the magnitude of patients' desire for help in dealing with the unmet needs. Obtaining a direct index of patients' perceived needs means that assumptions do not have to be made about patients' care requirements. This ability to identify specific issues that patients need help with and to directly assess the perceived urgency of the need for help enables care to be focused on the issues patients themselves have identified as most needing help with. On a broader scale, it also enables service providers to pinpoint gaps in existing services and priorities resource allocation to those aspects of care that need improving. [12]. Hence study was undertaken to assess the unmet needs of the cancer patients at tertiary care hospital.

## 2. Problem Statement

A study to assess the unmet needs of the cancer patients at tertiary care hospital, Karad.

### Objectives

- 1) To assess the unmet needs of cancer patients at tertiary care hospital, Karad.
- 2) To assess the patients satisfaction towards unmet needs at tertiary care hospital, Karad.
- 3) To find association between unmet needs and patient satisfaction with care at tertiary care hospital, Karad.

### Operational Definitions

- **Assess** – assess is defined as to estimate to evaluate a person work performance or characteristics. In present study assess refers to process of identifying and estimating unmet needs of cancer patients.
- **Unmet needs of cancer patients:**  
An unmet need can be defined as “problems for which people express a requirement for assistance, out of recognition of existing resource deficits, to enable problem resolution and attainment of goals.
- **Cancer:**  
Cancer An abnormal growth of cells which tend to proliferate in an uncontrolled way and, in some cases, to metastasize (spread).
- **Satisfaction:**  
Fulfillment of one's wishes, expectations, or needs, or the pleasure derived from this [oxford dictionary]. In present study satisfaction defined as patients experience and fulfilment towards professionals care.
- **Tertiary care hospital**  
According to Wikipedia, A tertiary referral hospital is a hospital that provides tertiary care, which is health care from specialists in a large hospital after referral from primary care and secondary care.by specialist working in center that has personnel and facilities for special investigation and treatment.

In present study tertiary care hospitals refers to Krishna hospital and medical research center, karad it is 1070 bedded multispecialty hospital attached with teaching institutions.

### Assumption

- 1) Cancer patients will have some unmet needs.
- 2) The subject's satisfaction will vary depending upon unmet needs.

### Variables

Variables are the factors or conditions that can change during the course of experiment an experiment.

### Independent Variables

Cancer disease

### Dependent Variables

Unmet needs

## 3. Methodology

### Research Approach

The research method adopted for the present study was non experimental description approach because the present study was aimed to assess the unmet needs of cancer patients.

### Research Design

In the present study, the investigator has selected for this study in descriptive survey design to assess the unmet needs in cancer patients and satisfaction towards unmet needs.

### Independent Variable:

The independent variable in this study is the cancer patients.

### Dependent Variable

The dependent variables in this study were unmet needs of cancer patients.

### Setting of the Study

The study was conducted at tertiary care 1050 bed specialty hospital.

### Population

In this study, the population consisted of male and female cancer patients comes to outpatient department and diagnosed as cancer more than three months.

### Sampling Technique

In the present study, cancer patients were selected by convenient sampling technique by the investigator. It was suitable keeping in view the time provided for data collection and the study.

### Sample Size

The sample size determined by statistical formula. 128

### Criteria for Sample Selection

#### Inclusion Criteria

- All cancer patients
- Patients who are willing to participate
- Patient diagnosed with cancer more than three.
- Patients who have age above 18 years.
- The patients those who could easily read and understand Marathi, English and Hindi were included in the study.

#### Exclusion Criteria

- Patients who are critically ill.
- Patients who do not respond/ disoriented/ altered mental status.

### Data Collection Technique and Tool

#### Development of the Tool

The standard unmet supportive care needs questionnaire. Was used for data collection.

#### Description of the Tool

The Structured demographic questionnaire and standard unmet needs survey questionnaire consists of two sections.

**Section 1:** Deals with the demographic data of the samples, which includes personal data of cancer patients, age, sex, place of residence, duration of illness, Educational states, and diagnosis of patient.

**Section 2:** Supportive care needs survey 52 items questionnaire.

### Procedure for Data Collection

Permission was obtained from institutional ethical committee. A total of 128 subjects were selected for the study as per the criteria of selection. Data collection was done through one to one interview. Total time spend for one patients were 15 to 20 minutes

### Content Validity

To ensure content validity of the tool it was submitted to 10 experts who were doctors from medical department, oncology department, educationist, statistician and faculty members of different college of nursing and was a specialist. And 5 tools received back from experts.

The experts were selected on the basis of their clinical / teaching experience and interest in the problem and suggestions of the items on the tool. On common agreement a few additions and deletions were made in the tools.

### Reliability

The reliability of tool was determined by inter rater method. Cronbach Alpha was used for reliability. Cronbach Alpha measures how well a set of items (or variables) measures a single unidimensional latent construct. Cronbach Alpha is not a statistical test; it is a coefficient of reliability (or consistency). Formula for standardized Cronbach Alpha is  $\text{Alpha} = (N \cdot r') / [1 + (N-1) \cdot r']$

### Pilot Study

A pilot study was conducted from 4<sup>th</sup> September to 17<sup>th</sup> September, to assess the Feasibility of the study and to decide the plan for data analysis. Prior administrative permission was obtained from the Medical Director.

There was no major feasibility problem. And tool required no further changes and also gave better insight to the investigator.

### Plan for Data Analysis

The analysis was made on the basis of objectives and hypothesis. The data analysis was planned to include descriptive and inferential statistics. The plan was developed for data analysis on the basis of the opinion of experts.

Data on sample characteristics revealed that out 128 cancer patient's maximum the majority of the samples 61(47.7%) belong to the age of 41-59 years. In terms of gender, 68(53.1%) subjects were female, place of residence 103(80.5%) were from rural area, educational states of the subjects 39(30.5%) are secondary, whereas duration of illness 97(75.8%) in <1 years.

### Finding related to Unmet Needs

Majority of 92% patients had reported unmet needs. In Psychological Needs Domain (78.1%) the most frequent

needs were with Confusion about why this has happened to you?(51.6%), Feeling bored and/or useless?(43%), with Fears about the cancer spreading (42.2%), Concerns about the worries of those close to you?(40.6%) with Fears about the cancer returning?(39.8%).

Health System and Information Needs (12.50%) most frequent needs To be informed about things you can do to help yourself get well(28.9%), The opportunity to talk to someone who understands and has been through a similar experience?(29.7%), To be given information (written, diagrams, drawings) about aspects of managing your illness and side-effects at home(19.5 %) Physical and Daily Living Activity (59.40%) need for help with Pain (40.6%), need for help with Lack of energy/tiredness (31.3%), need for help with Nausea/vomiting (15.6%) Patient Care and Support Needs (9.40%). with Hospital staff to attend promptly to your physical needs? (19.5%), Hospital staff to acknowledge, and show sensitivity to, your feelings and emotional needs? (18%), Reassurance by medical staff that the way you feel is normal? (17.2%).

### 4. Finding Related to Unmet Needs Satisfaction

The majority of 82 % of subjects were reported dissatisfaction towards unmet needs and only 12% of patients were having satisfied with their needs. If we see the domain wise more patients were dissatisfaction in Psychological Domain only 21.9 % subjects were satisfied hence. Help with keeping a positive outlook? (6.3%), with Finding meaning in this experience? (7%) Making the most of your time? (7%) these were the least rated needs patients were fulfilled these needs. Majority in Health System and Information Needs 87.5% patients reported satisfaction with care. Hospital staff to convey a sense of hope to you and your family? (0.8%), To be treated like a person, not just another case (1.6%), To be given choices about when you go in for tests or treatment (1.6%). Activity of Daily Living 40.6% were reported in satisfaction. for help with Work around the home?(1.6%), need for help with Feeling unwell (3.7%), need for help with Not being able to do the things you used to do?4.3%(0). Patient care and support needs 90.6%.reported satisfaction. More choice about which cancer specialist you see (0.8%), Family or friends to be allowed with you in hospital whenever you want (0), More choice about which hospital you attend. (1.6%). So these were the lowest needs of subjects very few subjects reported needs to these items. It means they are satisfied with these needs.

### Finding Related to Association between Unmet Needs and Satisfaction

23 satisfied cancer patients, 17 wanted some need while 7 wanted no need at all. Of 105 unsatisfied patients, 101 wanted some need.

Chi square test was done to check the association between unmet needs and satisfaction of cancer patients. It was found that, no. of unsatisfied patients who had some need were significantly higher than no. of satisfied patients who had some need ( $p < 0.05$ ).

## 5. Discussion

The present study is descriptive study on unmet needs of cancer patients at tertiary care hospital karad. This is an important study of the needs faced by peoples who have been diagnosed with cancer, and how well those needs are met. It is unique in that we began with the assumption that neither the subjects nor the researchers are fully aware of these patient's needs. Thus, starting this needs assessment process by listening to patient's describe the experience of living with cancer allows us to discover needs which might otherwise be overlooked. An exploration of the study results is the focus of this chapter. Based on participants' reported priority unmet needs and use of existing services the potential gaps in healthcare services are identified. Study findings about the unmet needs among patients diagnosed with cancer. Examined in relation to the existing research literature. Supportive care and nursing practice. Implications for future research are also identified. An unmet health need is recognized as the difference between services deemed necessary to deal with a particular health problem and the services actually received

### Related to Unmet Needs

The current study (Table 3) revealed that subjects indicated a higher mean score (higher scores representing a higher level of unmet needs in the domain, range 1.00–4.00).in the

- The maximum number of subjects were ranked psychological domain 100 (78.9%),
- Physical daily living 76 (76%), subjects were reported unmet needs
- Health care information 16(16%)
- Patient care and support domain 12(9.4%),

This finding is consistent with recent research among cancer patients A systematic review conducted by Harrison, J.D 94 articles in their study physical and daily needs domain(7-73%) and psychological needs Domain(12-85%) were highest ranked items in these studies. [48]Sharon L. et.al at southern California (N=109) the greatest needs found in their study psychological (75%) and physical and daily living activity ( $\beta=-0.30$ ,  $p<0.001$ ) in this study also most common need is lack of energy and tiredness reported (75%),[14] Jiong Li et.al study at south wales Australia patients total 1492subjects 888were completed study questionnaire their results reported a higher mean number of unmet psychological needs (7.6 versus 5.0) and physical and daily living unmet needs (2.8 versus 1.4)[15].another one study matching to similar finding a cross sectional population based study by Allison W Boyes et.al study at Australia in their study 444 patients were reported Moderate to high level unmet needs were most commonly reported in the psychological (25%) and physical aspects of daily living (20%) domains. The five most frequently endorsed items of moderate to high unmet need were concerns about the worries of those close to them (15%), fears about the cancer spreading (14%), not being able to do the things they used to do (13%), uncertainty about the future (13%) and lack of energy/tiredness (12%).[13]

Vanessa Beasley et.al were highest included needing help with fear about the cancer spreading (17%), concerns about the worries of those close to them (15%), uncertainty about

the future (14%), lack of energy/tiredness (14%), and not being able to do things they used to do (14%). similar to present study finding. Fears about the cancer spreading (42.2%), uncertainty about the future (17.2%), concerns about the worries of those close to them (40.6%), lack of energy/tiredness (31.3%), not being able to do things they used to do (15.6%).[16]

Based on individual reveals that unmet needs according domains there is greater expressed needs in psychological domain and physical daily living needs. These findings however were in contrast to Angel Au et.al in Hong Kong (n= 198/220) using supportive care needs survey questionnaire in their study health system information needs and patient care and support needs.[17] A cross sectional study by K.K.F. Cheng et.al on 128 breast cancer patients. Study results also similar finding where the health system and information needs (37%) and patient care and support needs highest ranked [18]. Byeong Woo Park conducted study at Korea using the supportive care needs questionnaire the study were health system and information needs and patient care support needs.[19]

### Unmet Needs and Patient Satisfaction

Table no 10 revels about cancer patients unmet needs and satisfaction

- Psychological domain 100(78.1%) subjects were having highest no of unmet needs and only 28 patients having satisfied with psychological care needs.
- Physical and daily living needs 76(59.4%) subjects were reported unmet needs 52 (40.6%) satisfied with their care needs.
- Health system & information needs 16(12.5%)reported needs means in this domain most of patients were satisfied with these needs
- Patient care & support needs 12(9.4%) were reported unmet needs and 116 (90.6%) were satisfied with items of needs.

This finding is consistent with Faller H et.al concluded that unmet information needs were also prevalent in 36 to 48 %. Gender differences found were generally small. Although subjects felt less informed about psychological support, they expressed fewer needs for further information regarding this topic. Irrespective of gender, patients who were less satisfied with information received and had more unmet needs reported more anxiety, depression, and lower quality of life. In this largest study to date, we found high levels of both information received and satisfaction with information, but also considerable amounts of unmet needs, particularly regarding psychological support. [20]

A cross -sectional study on 295 cancer patients Soothill K et.al their study results The majority expressed the opinion that information and good relationships with health care professionals were important, and few expressed dissatisfaction with these aspects of need For a sizeable minority of patients, items of significant unmet need cluster around aspects of managing daily life, emotions, and social identity. Most of the significant unmet need is beyond the remit of services primarily designed for the treatment of disease. [21]



### Association Between Unmet Needs And Satisfaction

The majority findings depicts that 23 satisfied cancer patients, 17 wanted some need while 7 wanted no need at all. Of 105 unsatisfied patients, 101 wanted some need.

Chi square test was done to check the association between unmet needs and satisfaction of cancer patients. It was found that, no. of unsatisfied patients who had some need were significantly higher than no. of satisfied patients who had some need ( $p < 0.05$ ).

When the patients having higher no of unmet needs automatically their satisfied needs were less here we used most frequent 17 highest ranked unmet needs to find the association.

No were studies found with similar finding this is the first study in which the association between patient unmet needs and satisfaction were assessed.

## 6. Summary

The primary aim of the study was to assess the unmet needs of cancer patients at tertiary care hospital karad, cancer patients unmet needs and care related dissatisfaction has a cost for individual in term of health welling. Unmet patient needs which indirectly affect the quality of life patients. This study would great help for hospital administer to know about unmet needs of cancer patients and their dissatisfaction towards care where there is scope to reduce patients' needs and increase satisfaction towards needs.

## 7. Conclusion

Assessing unmet needs in cancer patients, is not a one time it needs continuous monitoring and evaluation. Study concluded that cancer patients in tertiary care hospital are having unmet needs and they were having dissatisfaction towards their needs.

It reveals that cancer patients had a relative high number of unmet needs in needs psychological and physical daily living needs. (The needs pain, fatigue/tiredness, uncertainty about future, fear about cancer spreading, loosing independence, information regarding home care management) The patients were more satisfied in health information and patient care and support needs; this shows the necessity of including these factors in the routine assessment of all cancer patients and planning treatment interventions based on their individual's need.

## 8. Scope of Research

The research describes the unmet care needs of cancer patients and how their needs change over time. The study explored what psychosocial issues people in pain needed more help with and what influenced these needs. The outcomes of the study will be used to inform healthcare professionals about the needs that their patients may require help with. The results of the research will be used to encourage healthcare professionals to examine whether there are provisions to support people in the areas that people

require further help with, and if not, to find ways of improving their service. It is hoped the results of the study will encourage clinicians and nurses to enquire about their patients' supportive care needs, rather than just the severity of their pain, and approach pain management in a more holistic manner.

## Nursing Administration

### To reduce unmet needs

Nurse administrator could target specific source of unmet needs like pain, fatigue/tiredness, fear of spreading of cancer, loosing independence, uncertainty about future, and can plan measures to reduce needs of patients.

Patients' needs can be minimized to ensure the quality care and improve patient's satisfaction towards care.

To improve nurses' skill, knowledge and practice planning workshops, conference, and in-service education for nurse's fresher courses for few nurses will help them to get oriented with routine policies of hospital and hence stress among new nurses.

### To improve patients satisfaction towards care

- Providing work to staff as per their interest which helps to better quality care.
- Appreciating good work done by health care professionals which is helpful to achieve quality work.
- Maintain proper communication channel clearing the doubts of patients and taking feedback from patients.
- Formulating clear policies regarding care treatment.
- Respecting religious beliefs of each individual.
- Providing assurance to the patients
- Improving safe and secure environment in hospital.

## Nursing Education

Cancer is serious disease patients suffering the disease has to undergo various treatment radiotherapy, chemotherapy, hormonal therapy they are very painful. Providing education for student nursing regarding patients' needs areas of needs and sources of needs. They can provide quality care to patient

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