

The Power of the Patient: Making Good Treatment Decisions

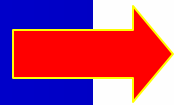


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University of Michigan

Estimated New Cases 2007



Estimated New Cases*



			Males	Females			
Prostate	218,890	29%		Breast	178,480	26%	
Lung & bronchus	114,760	15%		Lung & bronchus	98,620	15%	
Colon & rectum	79,130	10%		Colon & rectum	74,630	11%	
Urinary bladder	50,040	7%		Uterine corpus	39,080	6%	
Non-Hodgkin lymphoma	34,200	4%		Non-Hodgkin lymphoma	28,990	4%	
Melanoma of the skin	33,910	4%		Melanoma of the skin	26,030	4%	
Kidney & renal pelvis	31,590	4%		Thyroid	25,480	4%	
Leukemia	24,800	3%		Ovary	22,430	3%	
Oral cavity & pharynx	24,180	3%		Kidney & renal pelvis	19,600	3%	
Pancreas	18,830	2%		Leukemia	19,440	3%	
All Sites	766,860	100%	All Sites	678,060	100%		



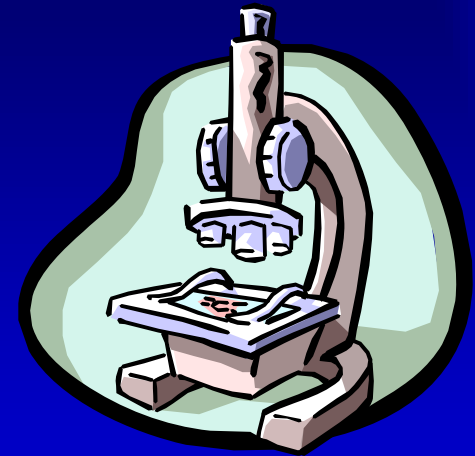
Jemal, et al. CA Cancer J Clin, 57: 43-67, 2007

Elements of Informed Decision Making

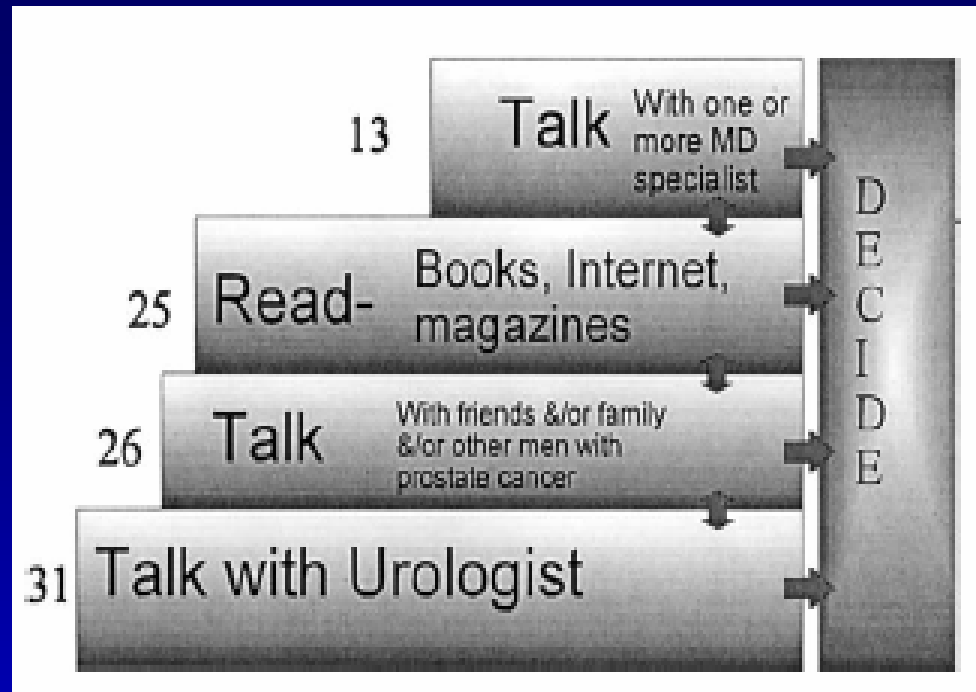
- Discussion of the clinical issue and nature of the decision
- Discussion of the alternatives
- Discussion of the pros and cons of the alternatives
- Discussion of uncertainties associated with the decision
- Assessment of patient's understanding
- Asking the patient to express a preference

Braddock CH. J Gen Intern Med. 12:339-345, 1997

Factors Influencing Treatment Decisions



Process of Information Gathering



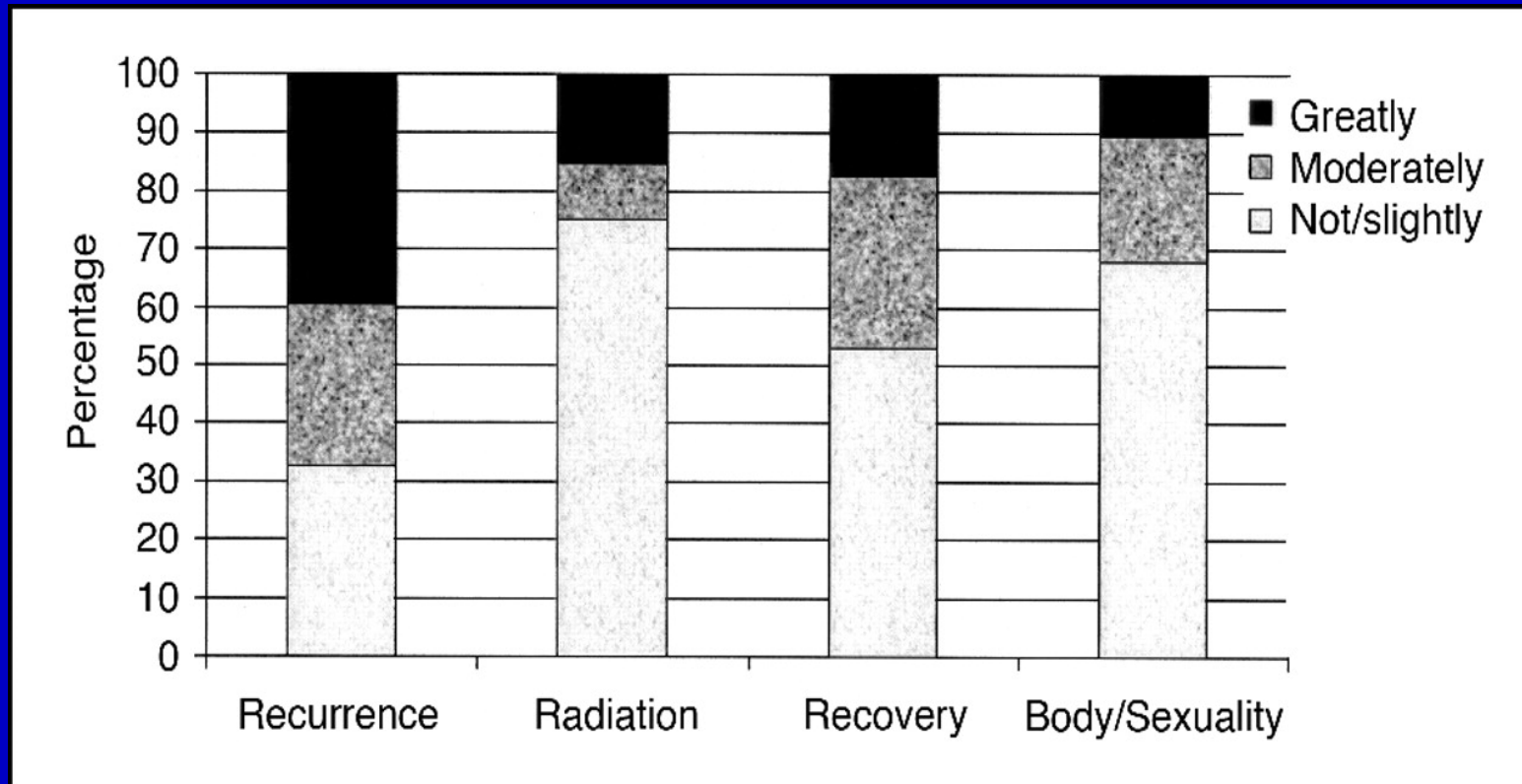
- Focus group study of 44 men
- Document aspects of treatment decision making.
- 45% rely heavily on an “influential other”
50% of the time – an MD

Berry, et al. *Urologic Oncology*: 21:93-100, 2003

Factors Influencing Patient Decisions

- 108 men – newly diagnosed prostate cancer
 - 91% - non-systematic approach to treatment decisions
- Most common:
 - Deferring to their doctor's recommendations
 - Positive & negative experiences of others
 - Pre-existing belief that surgery is “better”
- Other relevant factors
 - Cancer stage
 - Fear of cancer spreading
 - Overall mortality
 - Treatment side effects

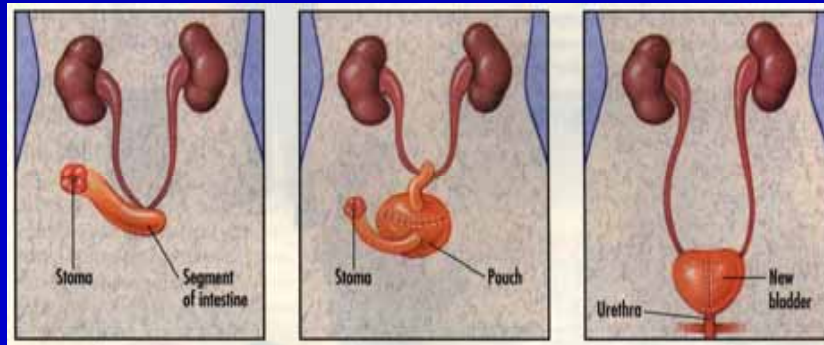
Level of Patient Concern in Breast Cancer Patients (n = 1,079)



Katz, S. J. et al. J Clin Oncol; 23:5526-5533 2005

Patient Concerns: Treatment Effects

- Body Image
- Sexuality
- Urinary Function
- Impact of Treatment on Family Members
- Practicality of Undergoing Radical Therapy



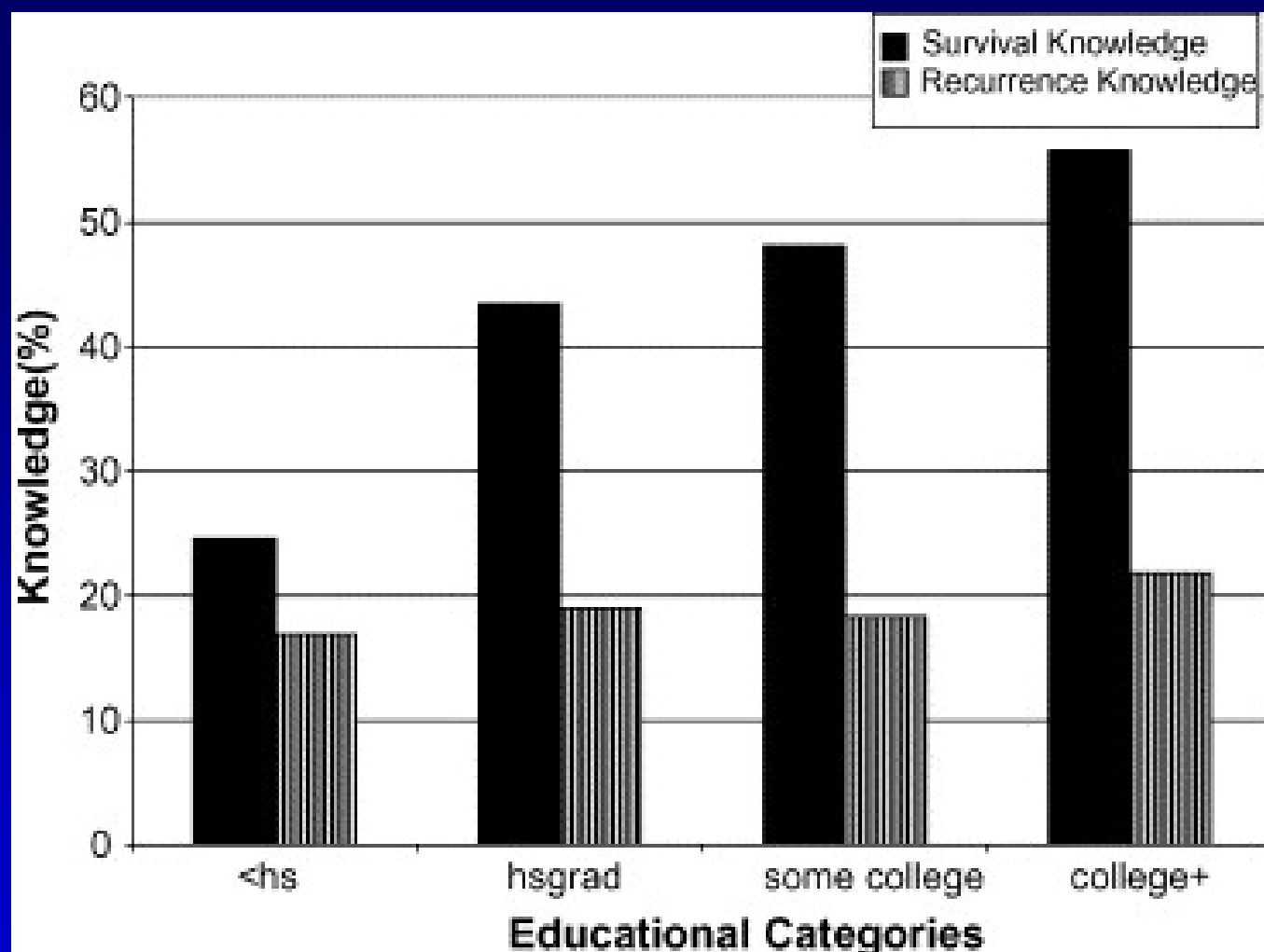
Spousal Role

- Men with prostate cancer reported that their spouse played a significant role in making their treatment decisions
- Spouse opinions:
 - In hypothetical situations, women opted for more radical treatment choices than their husbands.
 - Largely motivated by their desire to prolong life as opposed to concerns for side effects.



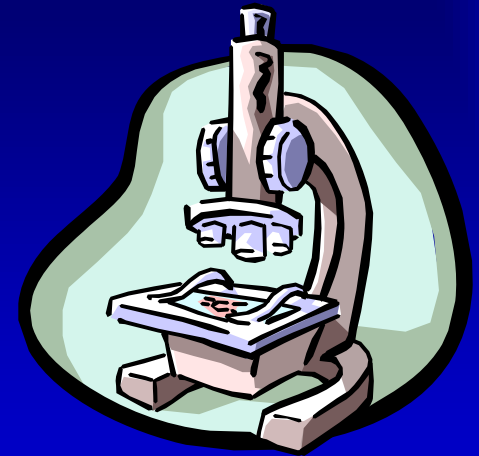
Volk et al Arch Fam. Med, 1997

Survival and Recurrence Knowledge



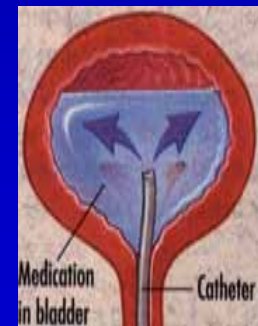
Fagerlin A. Patient Education and Counseling 64:303-312, 2006

Treatment



Treatment

- Correct Treatment?
- Timely Therapy?
- Options?
- Risks and Benefits?
- Shared Decision?

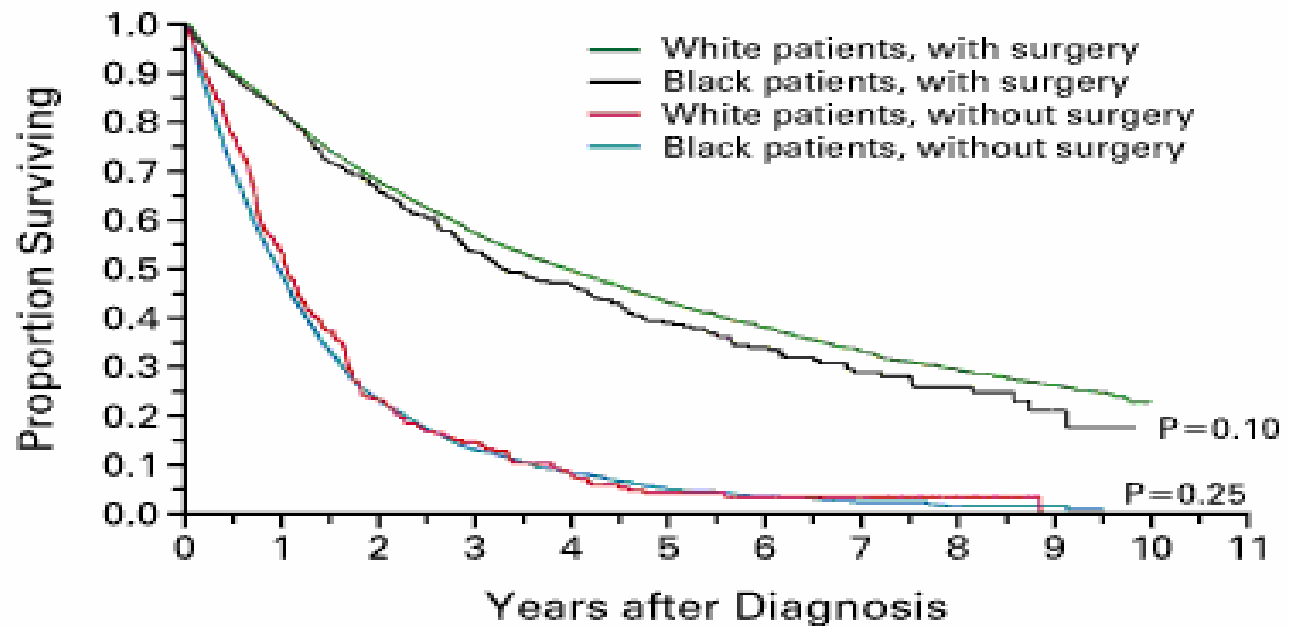


Decision Making in the Treatment of Bladder Cancer

- Stage of the cancer
- Tumor “personality”
- Patient preferences

NSCLC Survival by Treatment

SEER: 1985-1993



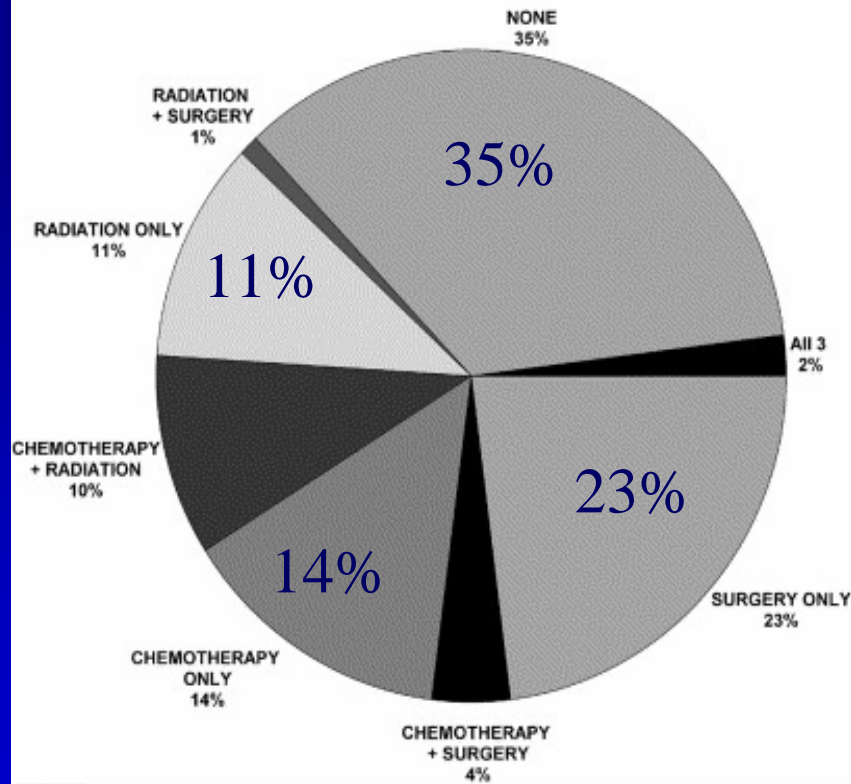
No. of Patients at Risk

White, surgery	7763	4495	2255	1069	407	12
Black, surgery	550	301	145	69	30	0
White, no surgery	2361	458	110	30	6	0
Black, no surgery	310	60	14	2	1	0

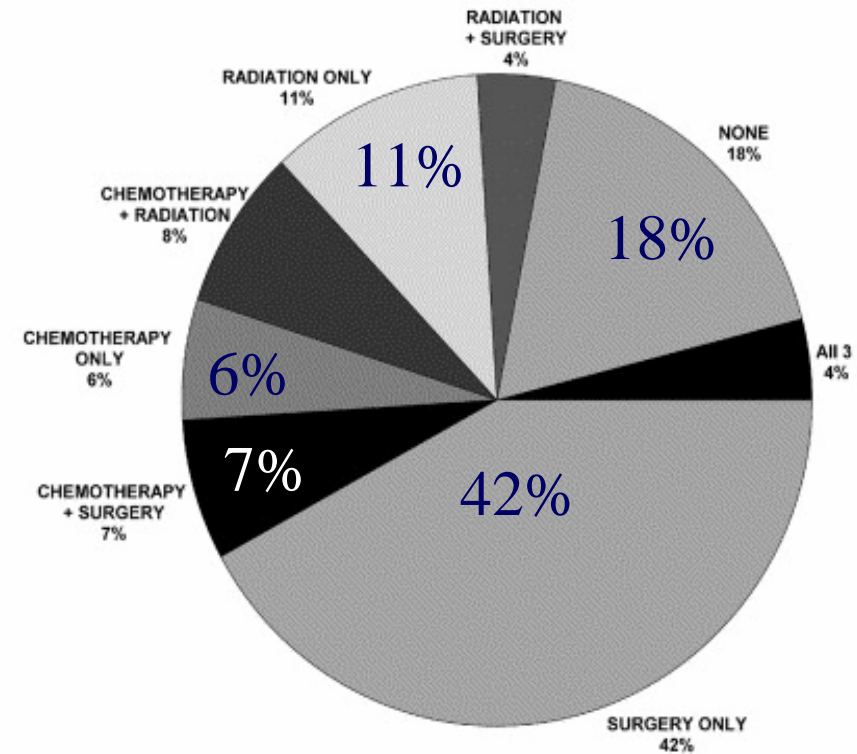
Bach et al., NEJM: 341 (16): 1198, 1999

Treatment Variability Medicare Recipients in SEER

Treatment Patterns among Stage II Bladder Cancer
within 6 months of diagnosis
N=1991



Treatment Patterns among Stage III Bladder Cancer
within 6 months of diagnosis
N=1096



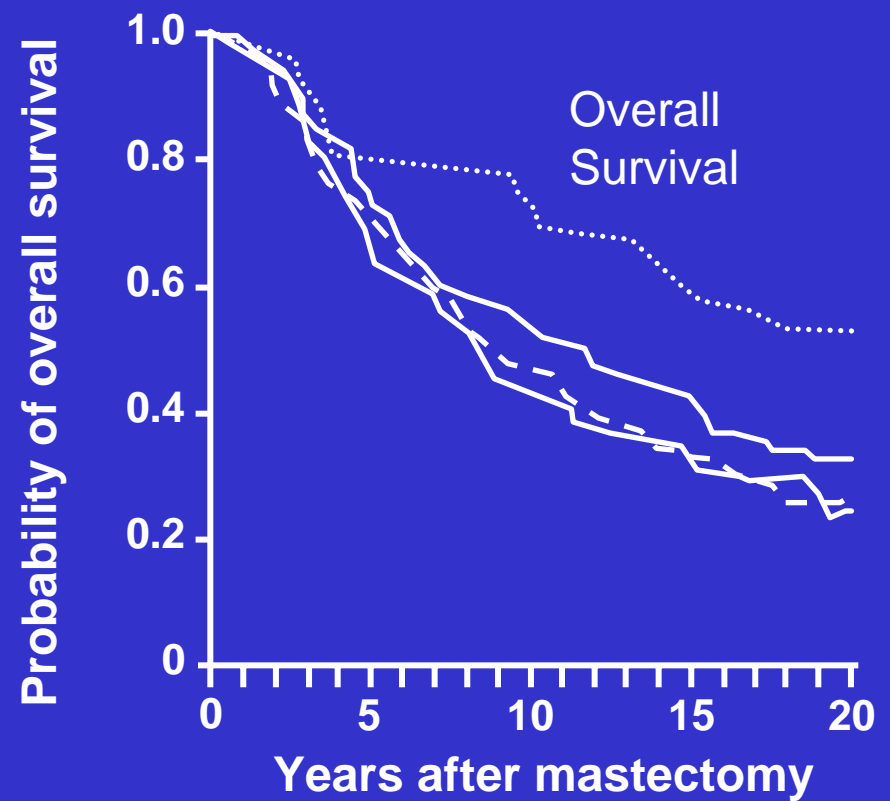
Risk of Undertreatment in Stage I and II Breast Cancer (N = 639)

Characteristic	Odds Ratio	95% CI	P
Black or Hispanic	2.0	1.3 to 3.1	.001
Oncology referral	0.2	0.1 to 0.3	< .0001
Comorbidity index	1.4	1.1 to 1.8	.01
No insurance	1.9	0.9 to 4.0	.08
Age \geq 70 years	1.4	0.9 to 2.2	.2
Stage IIA	1.1	0.7 to 1.8	.9
Stage IIB	0.9	0.5 to 1.8	.6

NOTE. All patients without a poor prognosis due to other conditions who should get adjuvant therapy: patients with breast-conserving surgery or patients with stage $>$ 1A. Logistic model $c = 0.72$; $P < .0001$.

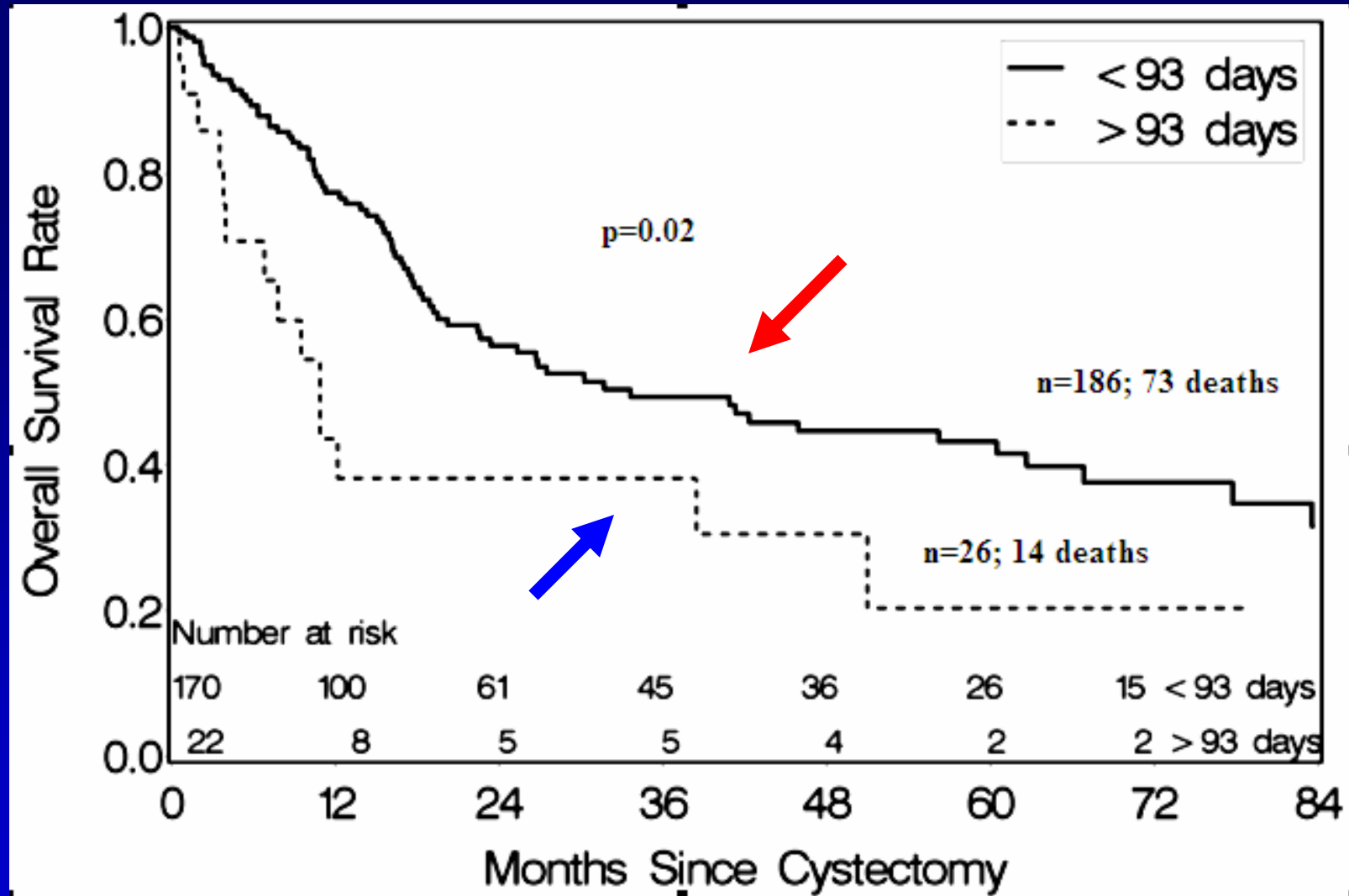
Importance of Chemotherapy Dose

- a - - Control
- b — <65% of optimal dose
- c — 65%–84% of optimal dose
- d ≥85% of optimal dose



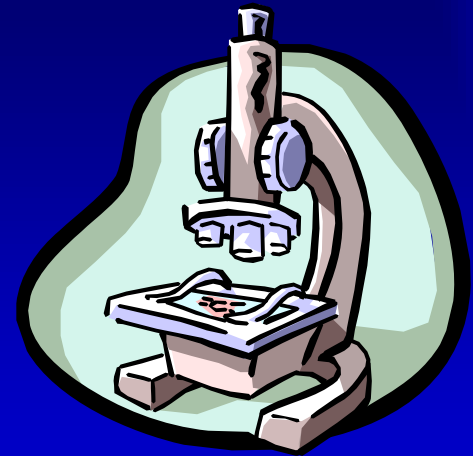
Bonadonna et al. *NEJM* 1995.

Timeliness



Lee CT. J Urol , 175:1262-1267, 2006.

Patient - Physician Encounter



Elements of Informed Decision Making

- Discussion of the clinical issue and **nature of the decision**
- Discussion of the **alternatives**
- Discussion of the **pros and cons** of the alternatives
- Discussion of **uncertainties** associated with the decision
- Assessment of patient's **understanding**
- Asking the **patient** to express a **preference**

Braddock CH. J Gen Intern Med. 12:339-345, 1997

Physician Mistrust

Table 4. Scores for Previsit and Postvisit Trust in Physician and the VA by Race

Measure	Black		White		<i>P</i>
	Mean Score	SD	Mean Score	SD	
Previsit					
Trust in physician	8.2	1.9	8.3	2.0	.80
Trust in VA	7.6	2.1	8.2	2.0	.22
Postvisit					
Trust in physician	8.0	2.3	9.3	1.3	.02
Trust in VA	8.2	2.2	8.8	1.7	.16

Abbreviations: SD, standard deviation; VA, Veterans Affairs.

- Questionnaire study in 103 pt (22% black / 78% white)
- Consultations in thoracic surgery or oncology clinics in a Southern VA
 - Pulmonary nodule or lung cancer
- Evaluated physician trust

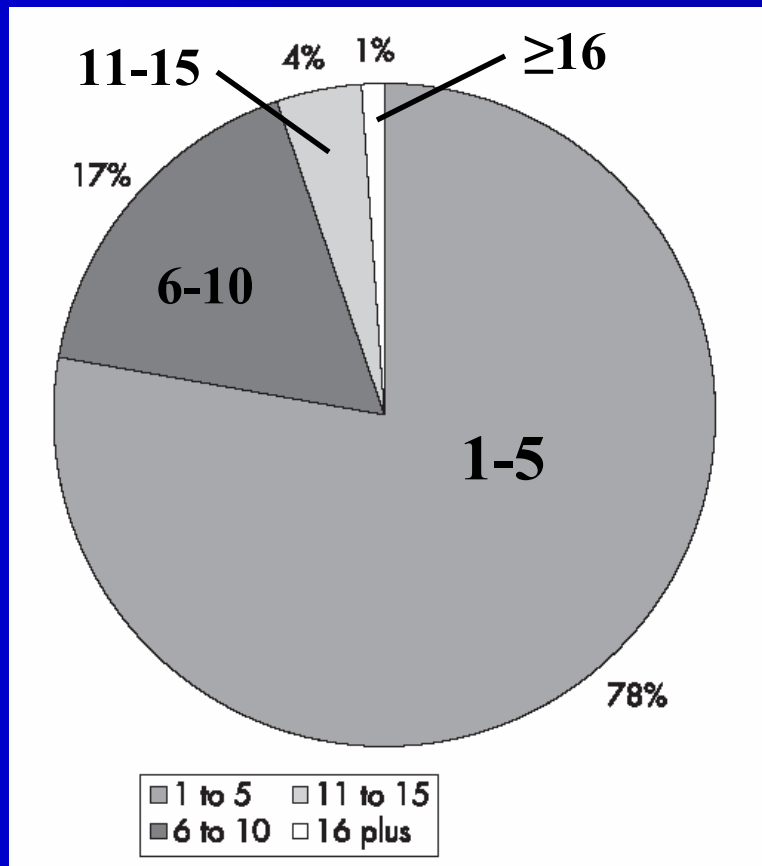
Gordon, et al. JCO 24: 904-909, 2006.

Physician Mistrust

- Black patients, compared with whites, judged the physicians' communication
 - less informative
 - less supportive
 - and less partnering
- Compared with patients in white concordant visits, patients in black discordant and white discordant visits perceived their physician:
 - shared less information
 - less supportive
 - engaged in less partnership building

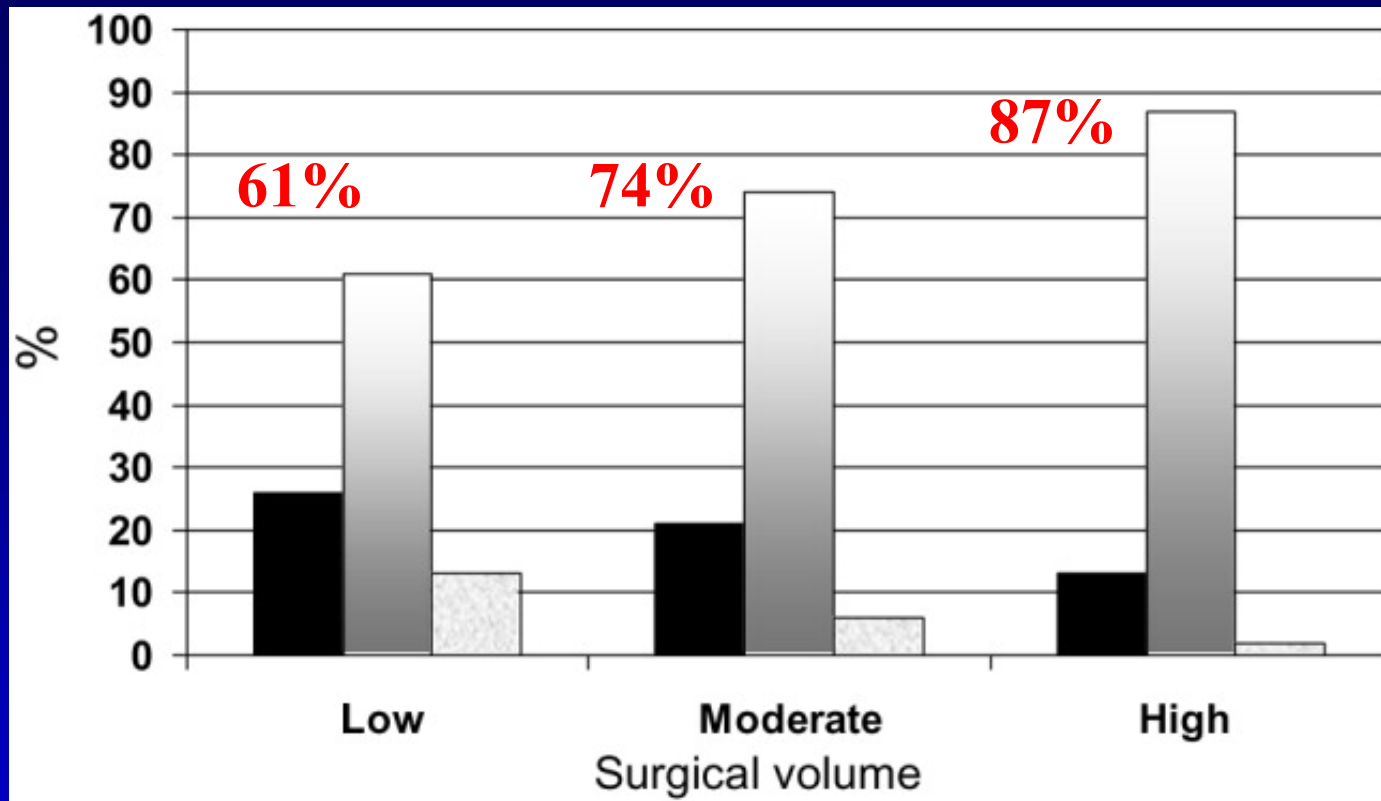
Gordon, et al. JCO 24: 904-909, 2006.

Surgeon Cystectomy Volume



- England
 - 6308 cases ; 327 doctors
- Mortality rate of 5.5%
- Minimum of 8 cystectomies
 - lowest mortality rate
- Other factors must be considered

Surgeon Perspectives About Local Therapy for Breast Cancer



Black – neither

Shaded – BCS + radiation

White - mastectomy

Katz SJ. Cancer Vol.104, 9 Pages: 1854-1861, 2005

Summary

- Decision making involves a process of information gathering + dependence upon an “influential other”
- Spouses play a significant role. They opt for cancer eradication as the priority as opposed to side effects
- Therapy choice is based on the risk of tumor. It is critical that patients receive the correct treatment in a timely manner.
- Race, comorbidities, education level can all influence treatment
- The physician – patient encounter should be a partnership.

Take Home Points: How To Make Good Decisions

- Education
 - Know the disease!
 - Internet
 - Local support groups
- Provider Selection
 - Reputation
 - Surgeon volume / experience
 - Second opinion
- Ask Questions
 - Treatment options
 - Side effects

