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Functional Assessment of Cancer Therapy–Lung (FACT-L) Can Enhance Patient Care provided by Lung Cancer Case Manager

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Introduction

The newly diagnosed lung cancer patients are not only facing a rapidly change in physical condition, but also suffering from emotional symptoms. An integrated lung cancer case management programme has been established in Queen Elizabeth Hospital since February 2013. By using Functional Assessment of Cancer Therapy–Lung (FACT-L), Lung cancer case manager (LCCM) can have individual's condition, need and problems identified forthwith.

Objectives

To evaluate the effectiveness of using FACT-L in the programme.

Methodology

This is a retrospective study to evaluate the work of LCCM from February 2013 to December 2015.

Patients self-administrated the FACT-L at baseline (pre-treatment) and 4 months after treatments, including lung surgery, chemotherapy, radiotherapy and target therapy. The four general subscales include Physical-Well-Being (PWB), Social-Well-Being (SWB), Emotional-Well-Being (EWB), and Functional-Well-Being (FWB). It also includes one lung cancer symptom-specific subscale (LCS) assessing patients' symptoms. The higher the FACT-L score, the better the quality of life. According to the score and patient journey, LCCM reacted and referred to relevant departments for further investigation and support.

Result

There were 376 newly diagnosed lung cancer cases recruited and 1206 attendances of the lung-cancer nurse clinic. The mean age was 68.5, of which 61.2% were male. Patients reported mean pre-treatment FACT-L score of 93.7 (full mark 136). There was only 6% improvement (from 93.7 to 99.25) after 4-months of treatments. Significant improvements on SWB & EWB (13 and 14% respectively) after 4-months of LCCM programme were found.

78% of the patients and their family received counselling from LCCM. 78 (21%) patients faced different levels of nutritional problems. Nutritional education was provided to all of these cases. 44% of them were referred to dietitians for further assessments and education. 46% of the recruited patients were ex-smokers, 28% were current smokers and 26% were non-smokers. 1/3 of the current and ex-smokers regretted their history of tobacco smoking after diagnosed of lung cancer. Total 98 proactive phone enquiries were received from patients for their treatment opinions, daily care and expressed worries. A written patient satisfaction survey about LCCM service was conducted, with 90% return rate and the satisfaction mean 91/100.