What do informal carers of people living with breathlessness in advanced disease want to learn *What to Expect in the Future"*?



RCN International Research Conference, 4th Sept 2019, Sheffield Morag Farquhar, Gail Ewing, Sylvia Barnes



Breathlessness

Common in advanced cancer & non-cancer conditions

- chronic obstructive pulmonary disease (COPD)
- heart failure
- renal & neurological conditions

Almost as common as pain

- fewer interventions/ resources
- less public understanding
- Frightening & disabling
- Difficult to manage



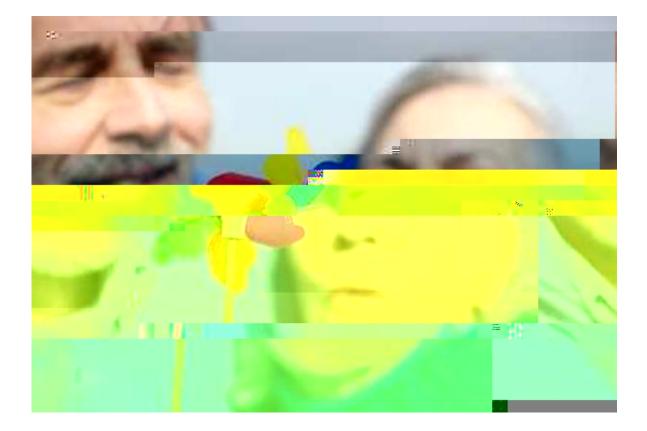
Supporting carers

- Lack evidence-based educational interventions carers
- Symptom-focused interventions particularly rare



- Systematic reviews no educational interventions:
 - for carers in chronic respiratory disease
 - for carers in breathlessness

Learning about Breathlessness (LaB) study programme



Learning about Breathlessness 1



Aim of LaB1:

To find out what carers want to learn about supporting someone with breathlessness and how they want to learn



- Educational need & desire of carers
- Six key topics they want to learn about
- Wide variation in how carers wanted to learn
- How we could meet varying learning preferences



LaB1 6 key topics

- 1) Understanding breathlessness
- 2) Anxiety, panic and breathlessness
- 3) Managing infections
- 4) Keeping active
- 5) Living positively
- 6) What to expect in the future

[Farquhar et al, 2017]



LaB1 How carers wanted to learn



LaB1 Web-based educational platform

Accessible in four ways:

- 1) Self-accessed (or "prescribed")
- 2) Peer-led support groups
- 3) Clinician-led groups
- 4) Clinician one-to-ones

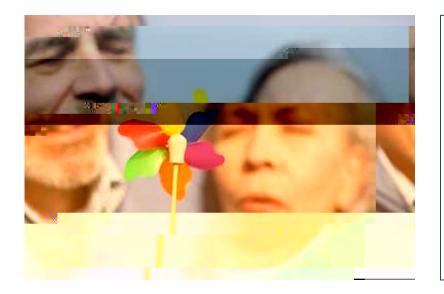
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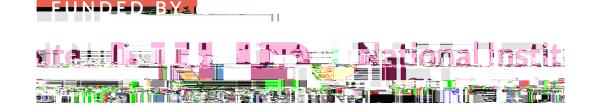
<u>Requirements</u>: cover the 6 topics; menu-driven; text, pictures & short film-clips (experts & peer carers); downloadable leaflets; links to other resources; badged/endorsed

Learning about Breathlessness 2



Aim of LaB2:

To develop a web-based, educational intervention on breathlessness for informal carers of patients with advanced disease



Bereaved carers recruitment

- Multi-setting recruitment strategy:
 - primary care, secondary care (palliative care, respiratory, oncology), hospices and support groups
- 2 focus groups and 6 x 1:1 interviews
- 12 bereaved carers (6-9 months post death)
 - cancer carers = 6
 - COPD carers = 6
- Range of different caring experiences, relationships and stories

Results

Five key areas:

- 1) Coping with symptom changes as the patient's condition worsened
- 2) Discussing "the future" with others
- 3) Accessing care and support
- 4) Administrative tasks

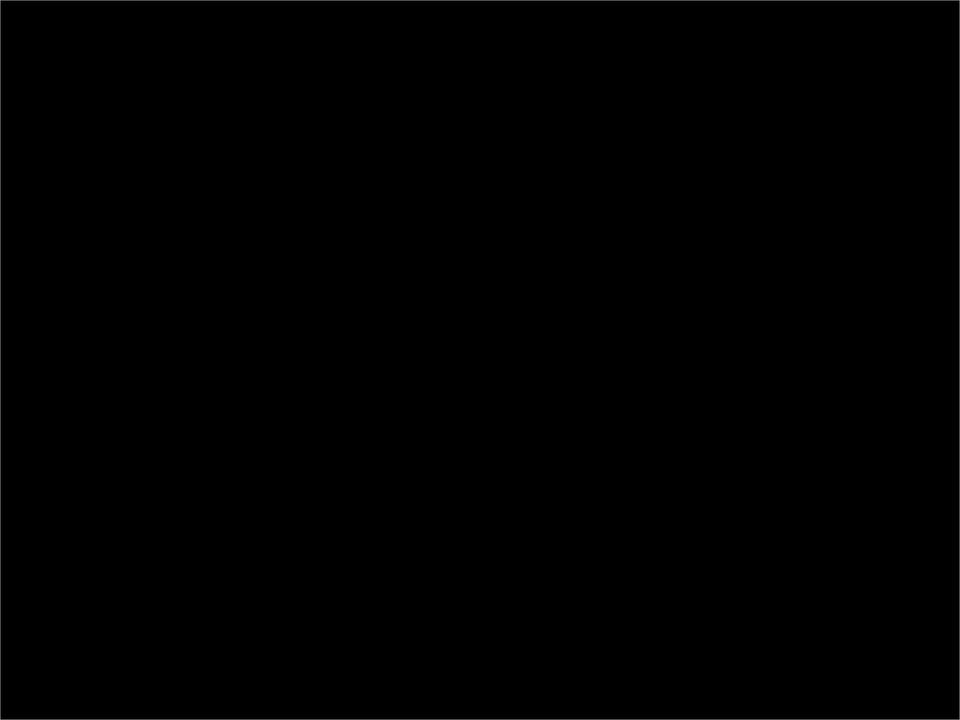
5) Coping with emotions after the patient's death

1) Coping with symptom changes as the

- Surprised and unprepared for changes in symptoms
- Denial and hope
- Understanding the dying process
- Practical advice and planning ahead
- Tension between the needs of carers and patients



• Wider social issue, of people generally being unable to discuss death – making their grieving even more difficult





4) Administrative tasks

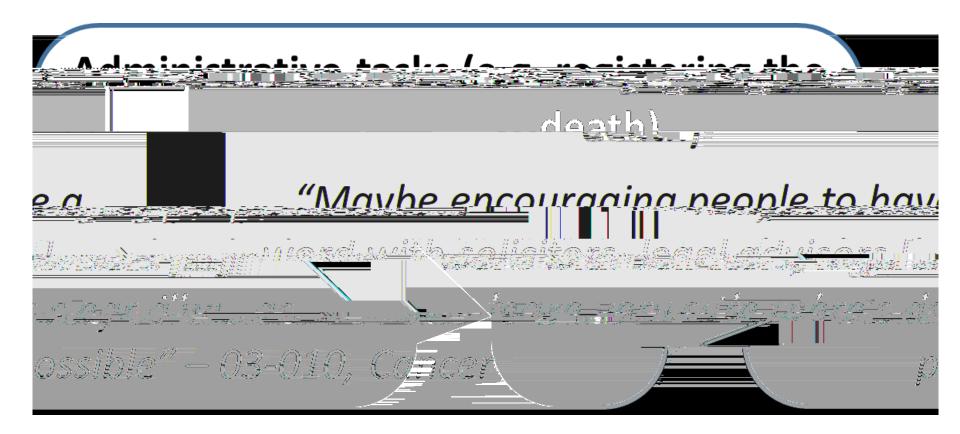
• Unprepared for the amount of practical, administrative jobs that needed to be done once their patient had died

• Helpful to have arrangements organised together with the patient, in advance:

directors, got the plan of everything, there was very

[01-008, Cancer]

[03-010, Cancer]



5) Coping with emotions after the

- Struggled with range of difficult emotions after the death:
 - Shock
 - Guilt
 - Sadness
 - Anger

[01-017, COPD]

`[04-010, Cancer]

-

Viewing the topic with the patient

• up to the individual. I think they will make it clear if

might play on their mind and make them upset [03-006 COPD]

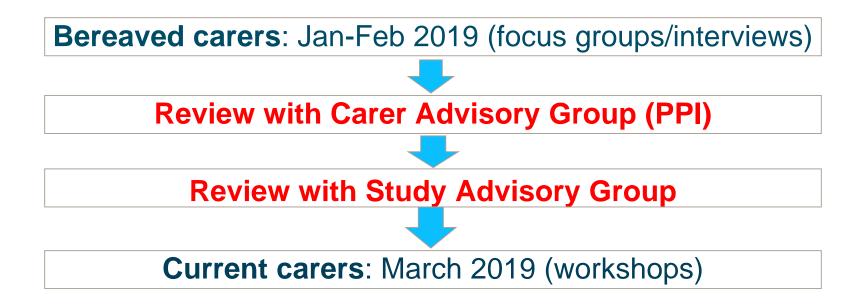
might

have opened her up to talk to me more for me to broach the subject

[01-017 COPD]

how helpful it would be for me [01-008 Cancer]

Draft topic content review



Refined topic content review

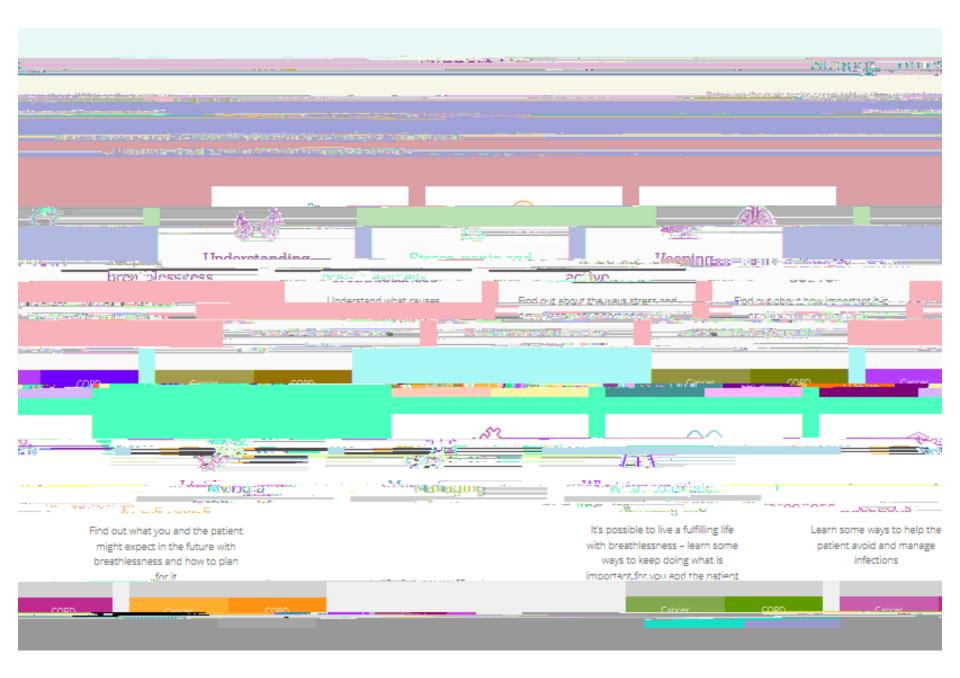
Bereaved carers: Jan-Feb 2019 (focus groups/interviews)

All six topics

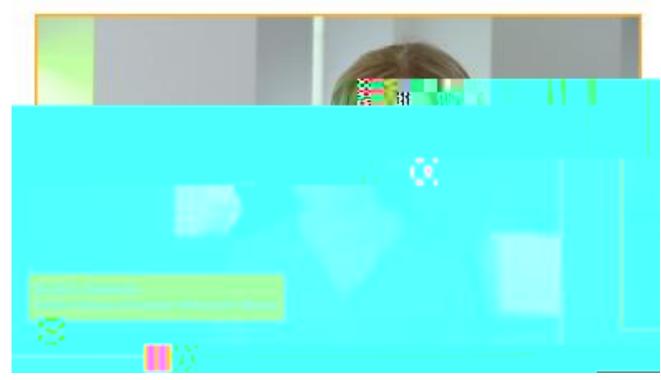
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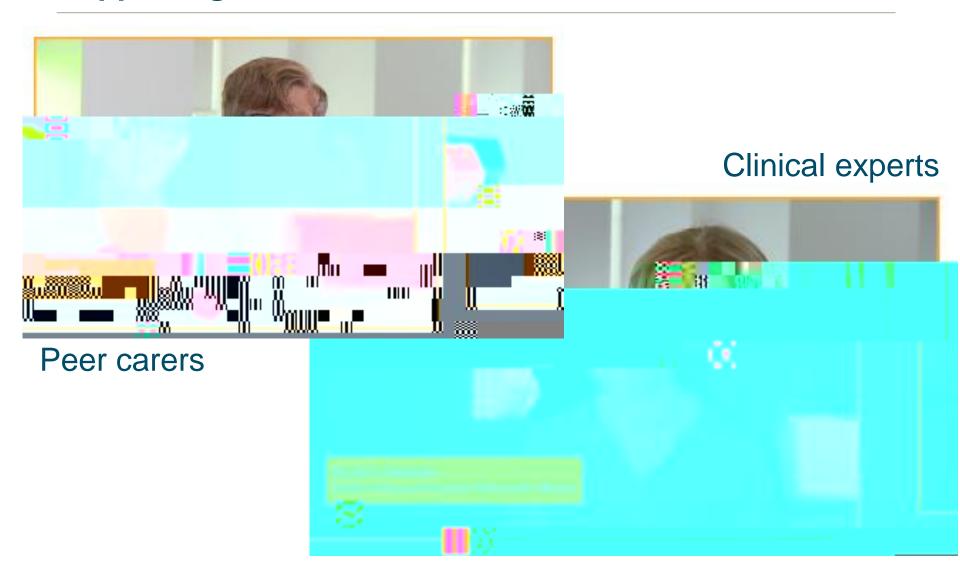






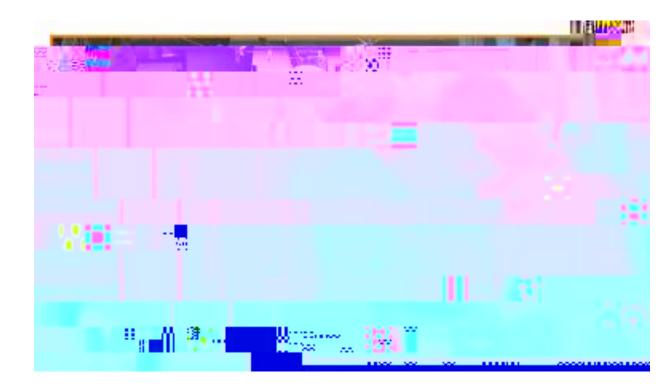
Clinical experts

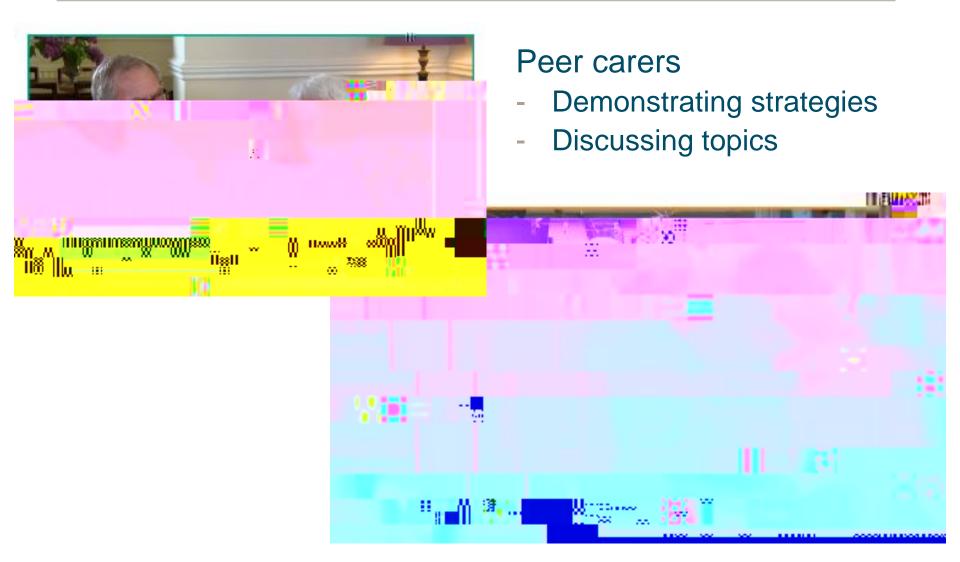




Peer carers

- Demonstrating strategies





Next steps

• Think-aloud interviews on the prototype website:

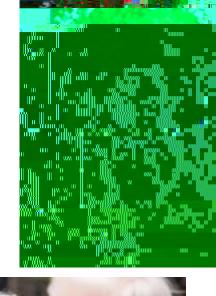
- Carers on own
- Carers and patients together
- Clinicians who support carers
- Website refinement

• Pilot the four access routes:

- Self-accessed
- Peer-led support groups
- Clinician-led groups
- Clinician one-to-ones

Conclusion

Photo credits





https://smartfishnutrition. com/health-care/copd/



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References

- Boyle A. An Integrative Review of the Impact of COPD on Families. SOJNR 2009; 9(3)
- Caress A et al. A review of the information and support needs of family carers of patients with chronic obstructive pulmonary disease. *J Clin Nurs* 2009; 18: 479-91.
- Cruz J et al. Impacts of COPD on family carers and supportive interventions: a narrative review. *Health Soc Care Community* 2015 doi: 10.1111/hsc.12292
- Ewing G, Penfold C, Benson J, Mahadeva R, Howson S, Burkin J, Booth S, Lovick R, Gilligan D, Todd C, Farquhar M. Clinicians' views of educational interventions for carers of patients with breathlessness due to advanced disease: findings from an online survey. J Pain Symptom Manage 2017;55(2):265-271
- Farquhar M et al. What are the key elements of educational interventions for lay carers of patients with advanced disease? A systematic literature search and narrative review of structural components, processes and modes of delivery. *J Pain Symptom Manage* 2016;52(1):117-30.
- Farquhar M et al. Six key topics informal carers of patients with breathlessness in advanced disease want to learn about and why: MRC Phase I study to inform an educational intervention. *PLoS ONE* 2017 May 5;12(5):e0177081

Thank you







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