Understanding the experiences of people with lung cancer during the COVID-19 pandemic

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Introduction

Lung cancer patients are particularly vulnerable in the context of COVID-19. During the pandemic, lung cancer diagnosis and management have been affected including a sudden change in outpatient care with increased remote consultations.

Aims

This study aims to: 1) Identify the impact of COVID-19 on patients’ psychological well-being 2) Explore patient experience of the new outpatient care pathways.

Method

This study utilised a mixed-methods approach. Postal questionnaires were sent to 883 lung cancer patients in Greater Manchester, who are on active surveillance or active anti-cancer treatments. Telephone semi-structured interviews were conducted with a subsample of patients. Questionnaire data was analysed descriptively. Interviews were audio-recorded, transcribed verbatim and analysed thematically.

Qualitative Results

30 patients were interviewed. Four key themes were identified:

- Communication strengths and challenges
- Experience of care delivery
- Current health and wellbeing
- Impact of COVID-19 on quality of life

Quantitative Results

Results from 296 survey respondents suggest the majority did not feel the pandemic had delayed cancer diagnosis (76%) or treatment (68%). Patients felt supported by specialist services (89%) and friends/family (87%) but less so by community services (59%). Patients valued clinical nurse specialist contact, particularly during COVID-19 (72%). 87% were happy with oncology team communication. Patients were happy to have some telephone appointments but preferred to have the majority in person (62%), particularly first appointments with the oncology team (91%).

Discussion and conclusion

Despite changes in care delivery, most lung cancer patients felt that quality of care was not significantly impacted. Patients’ quality of life has been impacted and patients may require additional support. Decisions regarding future outpatient care should be tailored to individual circumstances and preferences. Whilst some patients valued being less rushed, and reducing travel, some suggested the telephone is less personal and may instead prefer video calls or face to face. As pandemic restrictions ease, there is an opportunity to take on board both positive and negative feedback to help shape evolving patient care.

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