How do older adults with a new diagnosis of aggressive lymphoma make decisions about their treatment?  
A qualitative study

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BACKGROUND

- UK life expectancy is increasing¹, with more older people at risk of developing frailty²
- Frailty can negatively impact on older adult’s experience and outcomes of cancer treatment³
- Geriatric oncology service provision is disparate across the UK⁴
- Lymphoma (blood cancer) is the 5th most common type of cancer diagnosed in the UK⁵
- Some types of lymphoma behave aggressively with rapid cancer cell division and require prompt treatment⁶,⁷
- UK health policy, such as national cancer waiting time targets⁸ can limit time to undertake specialist geriatric assessment before treatment decisions are made, potentially impacting on the treatment decision making experience for patients
- Decision making in older adults with cancer has been widely studied in other types of cancer⁹,¹⁰,¹¹,¹² but not specifically in lymphoma patients

STUDY AIMS

- To gain an in-depth understanding of the lived experience of the treatment decision process from the perspective of older adults with a new diagnosis of aggressive lymphoma where systemic treatment (chemotherapy/immunochemotherapy) has been recommended
- This will enable healthcare professionals to tailor future assessments, information, and support for this patient group

METHODS

- Interpretative Phenomenological Analysis (IPA)¹³ methodology will be used
- Purposive sample of adults aged 65 years or older with a new diagnosis of aggressive lymphoma (Hodgkin lymphoma, diffuse large B cell lymphoma, T cell lymphoma) receiving systemic treatment
- Data collection will involve conducting in-depth semi-structured participant remote interviews (telephone or video) within 12 weeks of commencing systemic treatment
- Up to 10 participants will be recruited
- A heuristic framework analysis approach¹³ will be used, with meticulous analysis of interview transcriptions to develop themes related to the decision-making experience for this patient group

RESULTS

- University ethics application has been submitted; approval awaited.
- NHS HRA IRAS ethics approval will then be sought before data collection can commence for this Professional Doctorate (DProf) research study

IMPLICATIONS FOR CLINICAL PRACTICE

- Gaining an in-depth understanding of the experiences of treatment decision making from the perspective of older adults with lymphoma will inform the development of a future person-centred assessment strategy
- This would aim to optimise the experience and quality of life of older adults with lymphoma

REFERENCES

⁶Swerdlow et al.,(2016), Blood, doi:10.1182/blood-2016-01-643569

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