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Experiences of cancer patients who had been hospitalized at medical institutions in other regions: a qualitative research

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INTRODUCTION & AIM

Residents have the right to receive quality health care services in the area where they live when needed. Therefore, it is necessary to review whether the community has a well-equipped system to properly supply essential health care services that are closely related to life and have a decisive impact on health-related quality of life.

In this study, by using qualitative research, we aimed to gain a profound understanding of the overall experiences of cancer patients residing in Ulsan Metropolitan City who received medical care in medical institutions outside the region.

Through this, we tried to identify the problems of the cancer treatment system in the community and suggest improvements.

METHOD

○ Selection of research participants

- The criteria for selecting research participants are:
 - Residents of Ulsan Metropolitan City,
 - Adults aged 19 or older,
 - Cancer patients who have been hospitalized in other regions for cancer treatment,
 - Those who can communicate.
- The participants were recruited using the purposive sampling.

○ Data collection method and procedure

- Among the content analysis methodologies, 'traditional content analysis' was used.
- In-depth online face-to-face interviews were conducted using ZOOM.
- In-depth interviews took about 1 hour and were conducted one session per participant.
- The interviews followed a semi-structured guideline, with the following questions:
 - How did you receive the cancer diagnosis?
 - What experiences did you have during the cancer diagnosis process?
 - What experiences did you have during the cancer treatment process?
 - What experiences are you having during the cancer management process?
- Data collection was conducted from September 28, 2022, to October 12, 2022.

○ Analysis method and procedure

- Transcript data from in-depth interviews were used for the analysis.
- The analysis procedure is as follows:
 - (1) A 'semantic unit' was created through 'the detailed or line by line approach'. 3 researchers who conducted in-depth interviews conducted their own analysis.
 - (2) The generated 'semantic units' were divided according to major themes (primary categorization).
 - (3) Common experiences of participants within a major theme were grouped to categorized (secondary categorization).

RESULTS

○ Socio-demographic characteristics of research participants

N	Sex	Age	Residence	Cancer type	Stage
1	F	37	Ulju	Adenocarcinoma of the ear	2
2	F	56	Ulju	Thyroid cancer	3
3	F	35	Dong-gu	Breast cancer	2
4	F	44	Buk-gu	Thyroid cancer	2

N	Sex	Age	residence	Cancer type	Stage
5	F	44	Ulju	Breast cancer	1
6	F	42	Buk-gu	Breast cancer	1
7	F	52	Ulju	Thyroid cancer	1

○ Structure of the analysis results

The research participants' experiences as cancer patients using medical institutions in other regions were summarized in a total of 330 semantic units, and organized into 8 themes as follows.

- (1) Cancer unexpectedly approaching my life
- (2) Striving to make the best choice in an unwanted reality
- (3) Feeling overwhelmed when confronted with words I didn't want to hear
- (4) Gathering information myself to overcome anxiety before surgery
- (5) Trusting the reputable medical institution in another region and expecting my health to improve through the surgery
- (6) Enduring a series of hardships during the follow-up examinations after surgery
- (7) Feeling fearful of losing health again and at the same time efforts to restore daily life
- (8) Recognizing the need for various efforts to improve the quality of life for cancer patients

The study participants experienced fear after hearing from a doctor unexpectedly that they suspected it could be cancer as a result of a biopsy.

"At first, I had a casual mindset like 'Let's just get a health check-up!' but when the doctor said, 'The tissue examination results show something abnormal ' it felt like my heart sank..'" (Participant 4)

They wanted to get a definitive diagnosis as soon as possible, but it was not realistic. Some participants were required to wait at least 6 months at tertiary general hospital in Ulsan.

"The clinic referred me to 'A' Hospital. However, they told me that 'A' Hospital's schedule was fully booked and suggested looking into other hospitals. As a cancer patient, I naturally felt worried, and it was quite frustrating to receive such a response." (Participant 2)

Since then, they have been unable to accept the reality when they have been diagnosed with cancer by doctors at tertiary general hospitals in other regions. Participants were overwhelmed in anxiety, and continued to try to find information about the disease on their own.

"When I heard that I had cancer, I was so shocked that I couldn't even cry."(Participant 3)
"When you are in a similar situation, you find support among people who are going through the same thing. There's a cafe for thyroid patients at the hospital, and by going there, I learned what to do before and after the surgery, what kind of food to eat, and things like that." (Participant 4)

Most of the processes of cancer diagnosis, treatment, and follow-up management at medical institutions in other regions were all a series of hardships.

"Yesterday, I had to wait for about 3 hours to get my chemotherapy injection. I arrived at the hospital at 7 in the morning, but there were around 60 people waiting ahead of me. It's just waiting for everything. It took another 2 hours to meet the doctor... So, I spent about 12 hours at the hospital yesterday." (Participant 1)

Currently, participants have partially recovered their health, but they are still concerned about losing their health. Participants said that in order to improve the quality of life of cancer patients, first, reliable medical institutions in the region are needed, and second, sufficient information related to cancer is needed.

"At the hospital, they mainly focus on prescribing medication and giving injections. So, patients have to look up information on their own about diet and exercise. It would be great if they could provide support in those aspects too."(Participant 5)
"I would really appreciate it if they could provide accurate and sufficient explanations about the cancer."(Participant 7)

CONCLUSIONS

Through this study, It was confirmed that when cancer patients occur in the region, their unmet needs should be comprehensively met.

It is necessary to evaluate whether local cancer medical institutions have the capacity to monitor and address the needs of cancer patients.

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