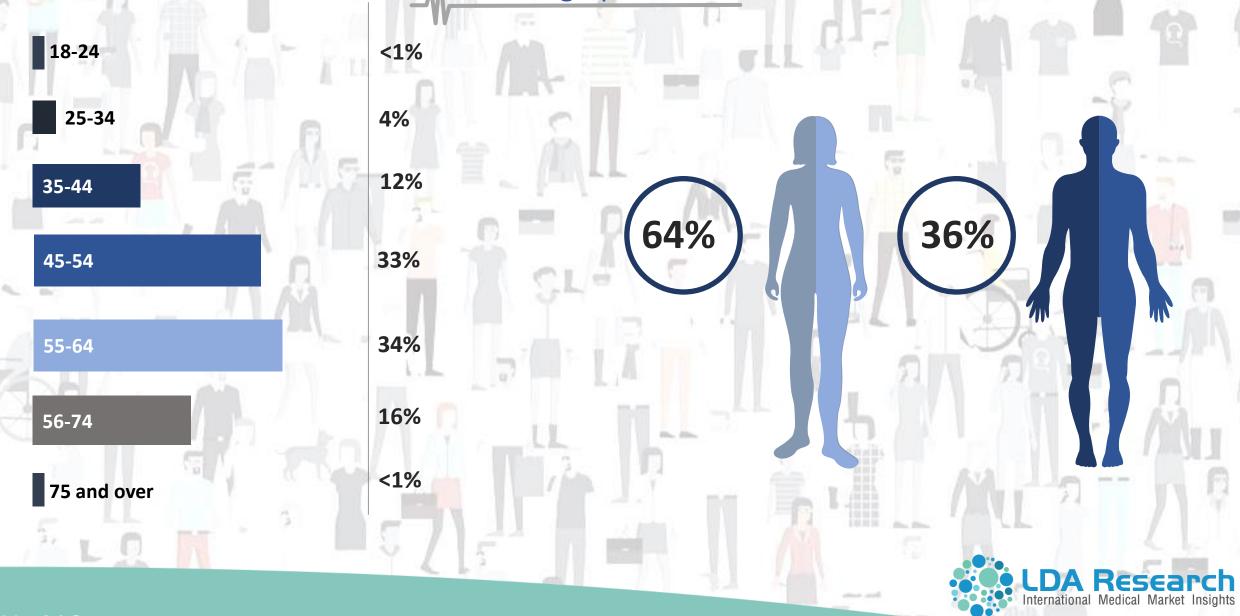


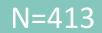


Cancer Survey 2018

LDA Research Ltd.

Demographics





Demographics

White – 94%

Asian / Asian British 2%

Black / African / Caribbean / Black British 2%

Mixed / Multiple ethnic groups 2%



2°

8%

6%

7%

√ 18%

12%

19%

7%

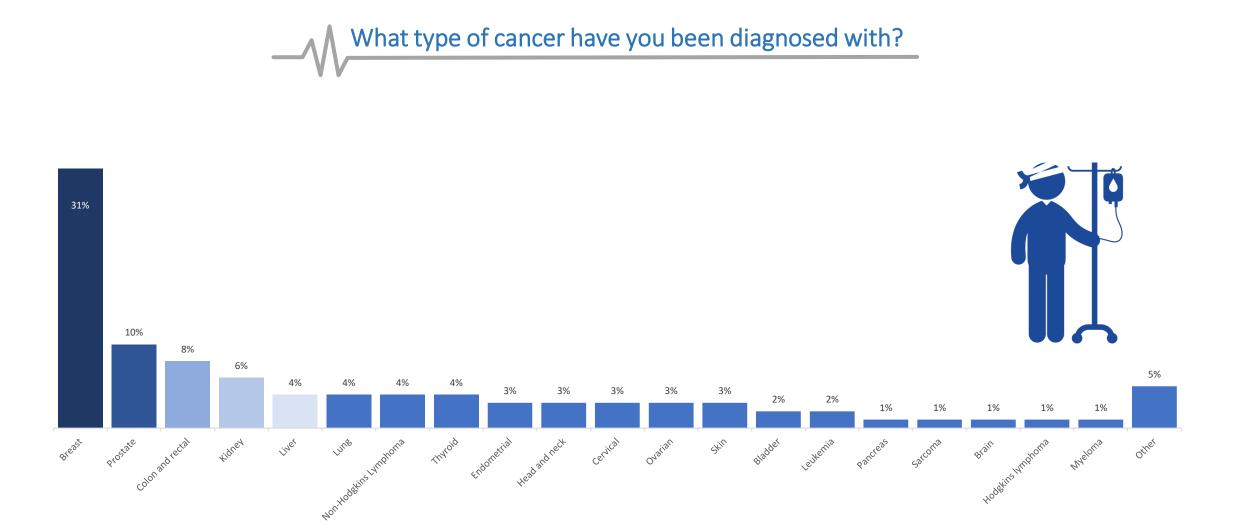
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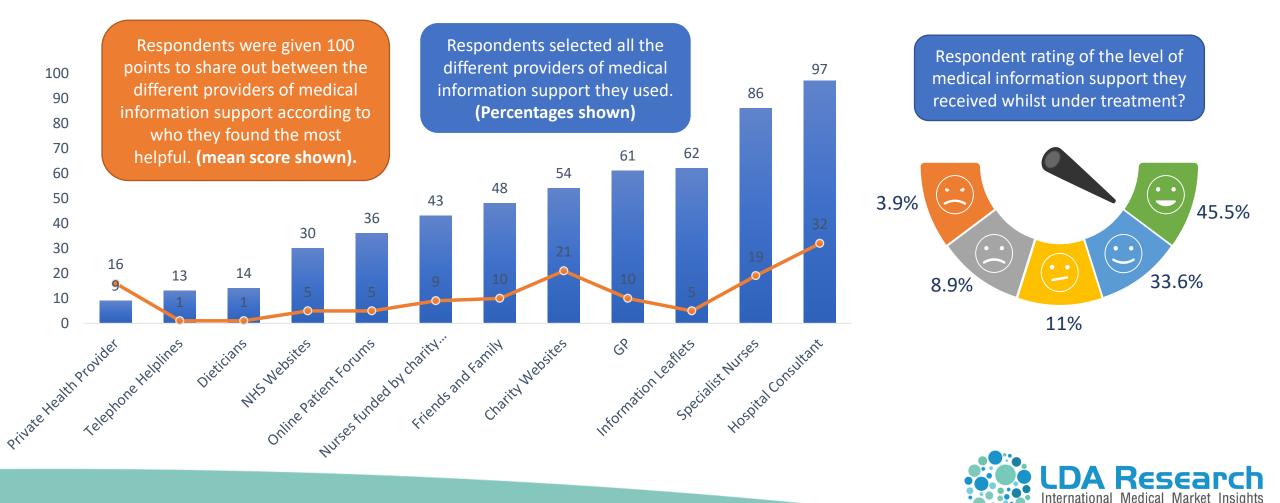


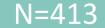




Medical Information Support Definition - Information about treatment, information about diagnosis, support with questions about treatment and diagnosis, support and information about managing secondary conditions, dietary information.

Medical information support



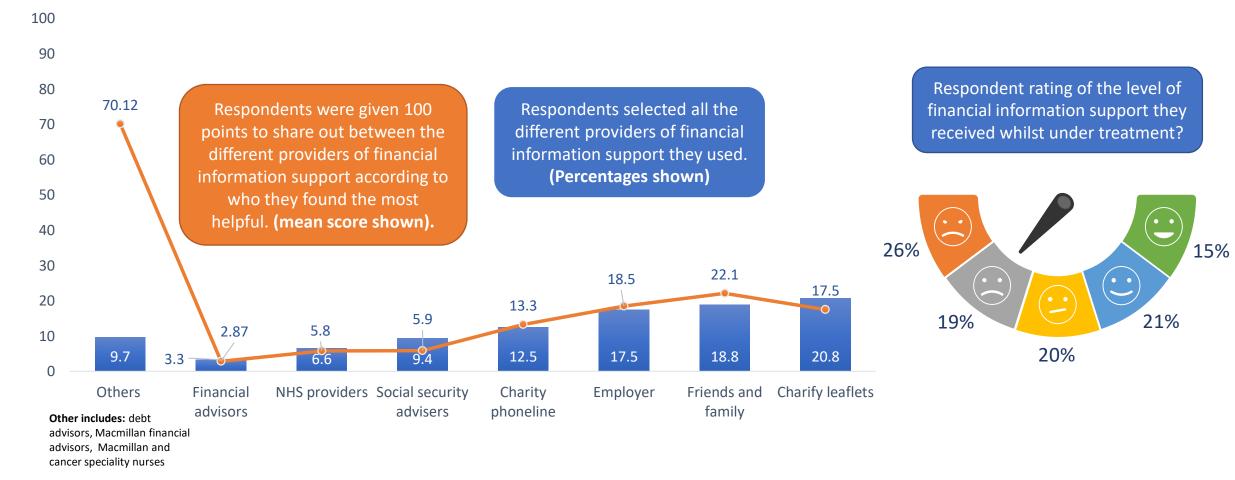


Financial Information Support Definition -

N = 413

Information about available sources of financial support, information about managing employment, information about budgeting

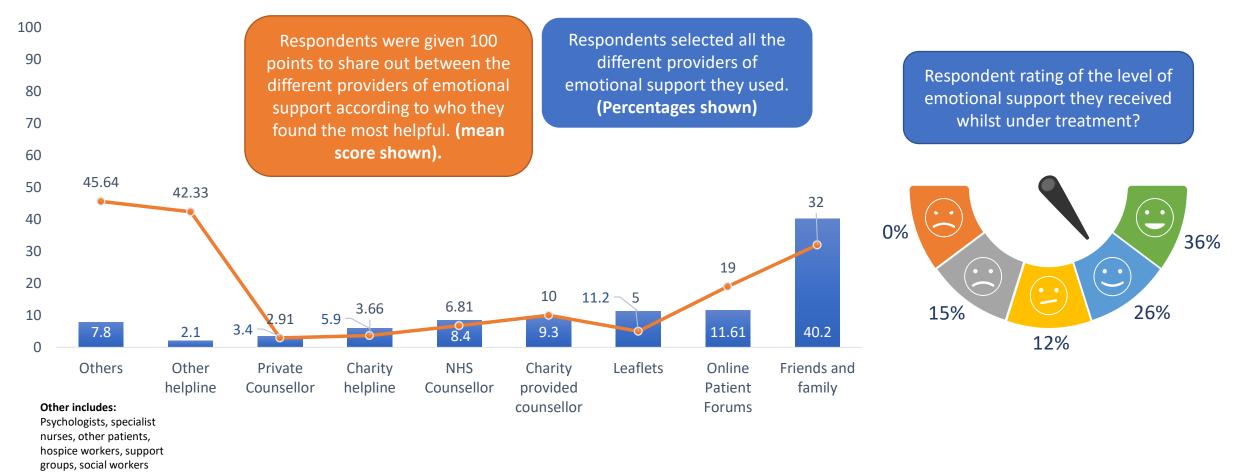
Financial information support





Emotional Support Definition - help with depression, anxiety, fear about diagnosis, stress

Emotional support



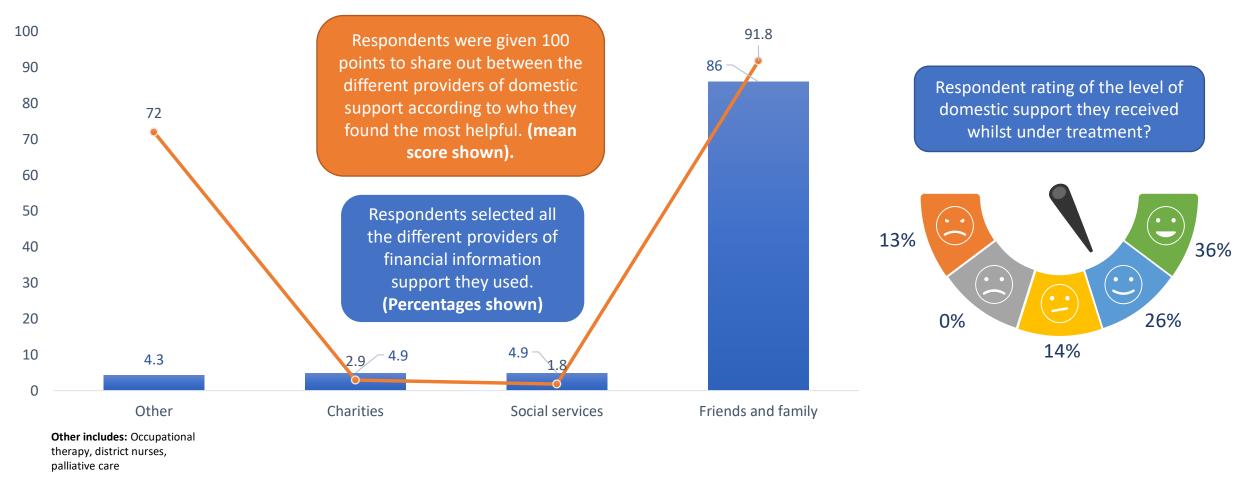




Domestic Support Definition - help with sourcing medical aids for things like mobility or continence, support with childcare, pet-care, managing shopping

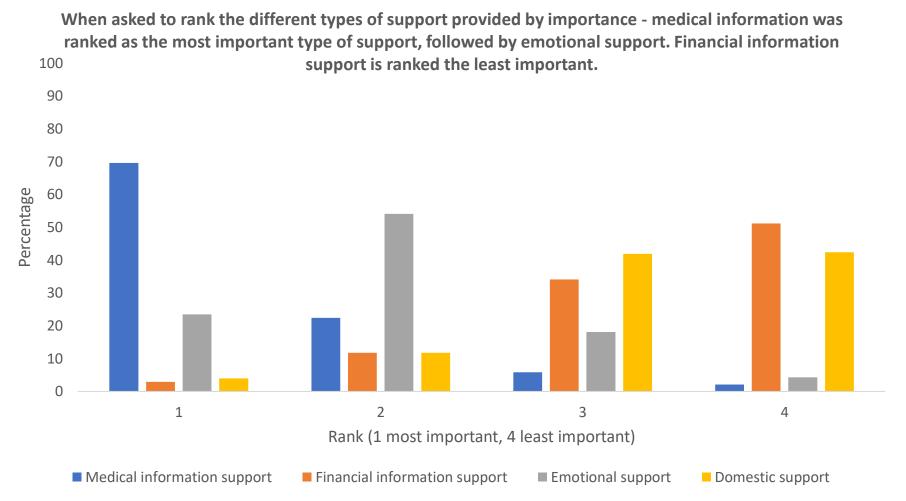
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Domestic support















- Nearly a fifth of respondents (19.75%) sometimes fail to take their prescribed medicines because of the side effects, with 1.57% doing this most of the time
- Nearly 5% of respondents have not attended hospital for chemotherapy / radiotherapy sessions, with 0.31% doing this most of the time.
- More than 10% of respondents have used alternative medicines instead of those suggested by their doctors; 31.67% have used alternative medicines alongside their prescribed treatment.





- More than 7% of respondents have taken more of their prescribed medicine on purpose, with 0.63% doing this most of the time.
- Nearly a fifth (18.49%) of respondents have taken less of their prescribed dosage on purpose; 2.5% do this about half the time or most of the time.
- Nearly half of respondents (44.2%) have taken their medication at the wrong time, with 3.13% doing this about half or most of the time.
- A third of respondents (31.98%) have not known when or how to take their prescribed medication, with 1.57% doing this most of the time.



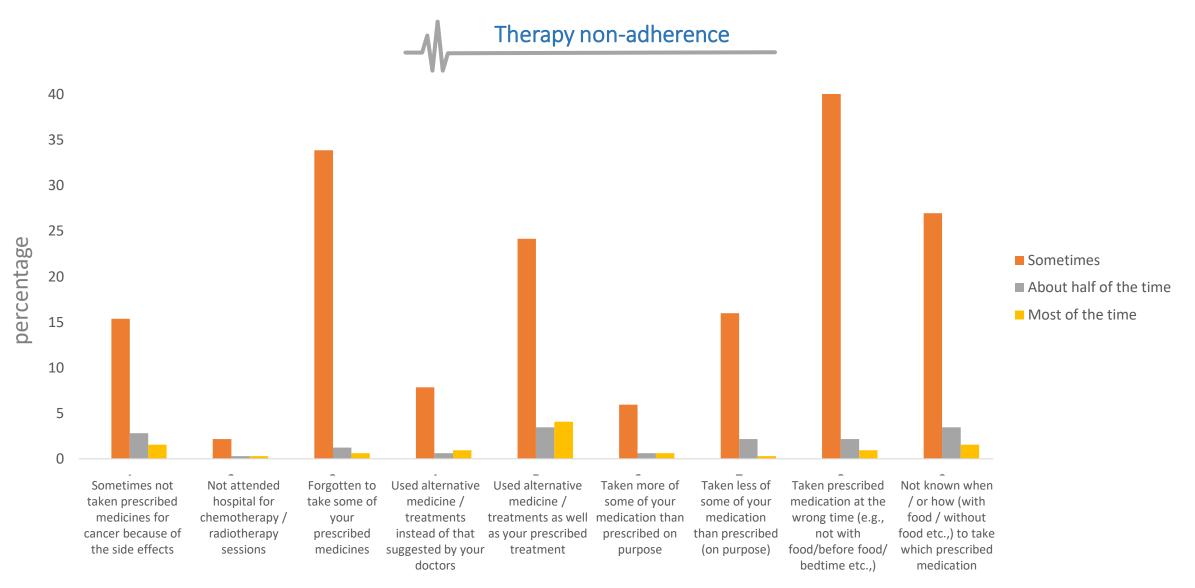




	prescribed medicines	Not attended hospital for chemotherapy / radiotherapy sessions	some of your prescribed	medicine /	Used alternative medicine / treatments as well as your prescribed treatment	Taken more of some of your medication than prescribed on purpose	Taken less of some of your medication than prescribed (on purpose)	medication at the	Not known when / or how (with food / without food etc.,) to take which prescribed medication
Most of the time	1.57%	0.31%	0.63%	0.94%	4.08%	0.63%	0.31%	0.94%	1.57%
About half of the time	2.82%	0.31%	1.25%	0.63%	3.45%	0.63%	2.19%	2.19%	3.45%
Sometimes	15.36%	2.19%	33.86%	7.84%	24.14%	5.96%	15.99%	41.07%	26.96%
Never	78.37%	95.92%	63.95%	89.34%	63.32%	92.48%	80.25%	54.86%	67.71%







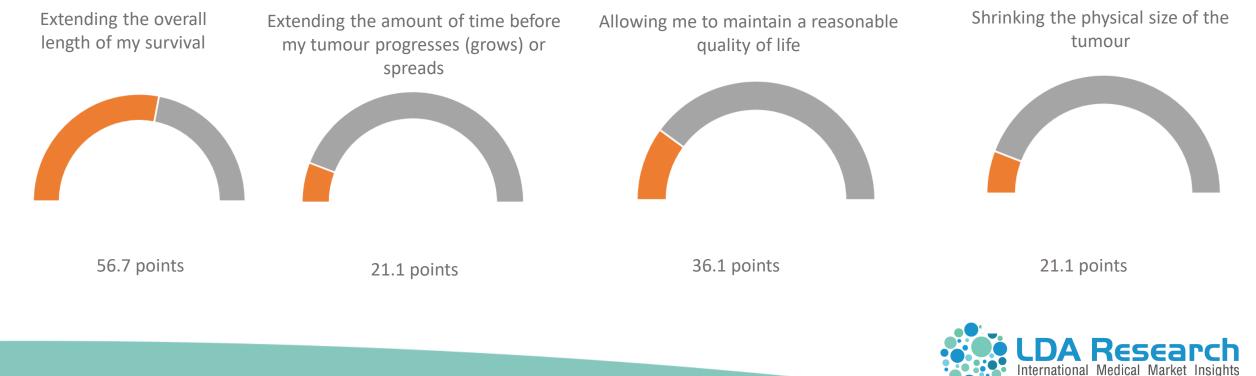






Extending survival and quality of life are the most valued effects of treatment

Respondents were given 100 points to share out between the different effects of treatment according to which was mattered most to them. (mean score shown).





Given the limited finance and understaffing situation in the NHS they do an Amazing job and I thank them all so much for providing such a great level of care.

It would have been intolerable without your care. I just don't have words to thank you all enough.

I cannot give enough praise and thanks for the wonderful work and support these groups do

BUT...

The overwhelming message – more than a third of the comments - was one of gratitude for the support received:



Without their support, cancer can put you in a very lonely scary space.

They are brilliant, the support they give is second to none.

Cancer is a scary place. Thank you for making my journey easier.

You do an incredible job working in what can only be described as a very challenging and often upsetting role, but your worth is priceless.

99





More than a *third* of the comments related to poor information, communication and anonymization

INFORMATION:

- Information at the time of diagnosis is hard to take in
- Checklists for patients about the stages of treatment would be useful
- Printed information as well as verbal
- Access to information varies widely across healthcare trusts, departments and bodies
- A broader more holistic offering of information including – where to access financial, emotional and domestic support



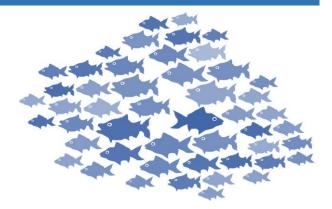
ANONIMIZATION:

- Treat people as individuals and don't 'anonymize' them
- A 'one size fits all' approach does not work
- People should be credited with intelligence and given all the facts
- Patronizing and 'talking down to' does not help patients



COMMUNICATION:

- Be honest: many comments stated that healthcare providers had **lacked transparency**
- Listen
- Don't try to 'sugar coat' diagnosis, prognosis or implications of treatment
- Make side effects more clear
- Reduce waiting times for results
- Communicate at an appropriate level for the patient – not 'one size fits all' approach







This is your job & sometimes you can be blasé. It was all new to me & terrifying. More information & help should be offered & we shouldn't have to try & find things out for ourselves such as financial help & benefits. I got the most help from CAB who told me about the MacMillan grant & put me in touch with Perennial Trust & Retail Trust & paid towards my gas & electric. I received excellent treatment but once it's finished you feel confused & abandoned..."is that it? what happens next".

Please look at the whole person, not just your specialty. We have issues with side effects and often do not know whether a symptom or pain is caused by the treatment, the cancer or something additional. Help us through this and not make us feel that we are just being paranoid. It is a very difficult road to travel, so please don't make us feel bad for being frightened or for asking too many questions. We rely on your expertise, but it is our body and our lives.

We as patients are not sure what we need to ask, a list of possible or frequently asked questions would be useful

More information on chemo - **check lists for patients** including more information on side effects and ways to mitigate

Don't assume patients know what your talking about. Some people don't want to know all the details but I think **patients should be asked** if they do want to know the full details.

Remember we are a person first and patient second. **Treat us individually** and holistically.

You're used to this, the terminology and jargon, we aren't. Use plain English to explain what is happening. Leaflets are all very well but the initial shock of receiving a cancer diagnosis, no matter what the stage and grading is, is overwhelming. Trying to read a leaflet can be pretty hopeless, a voice might have more impact

Please speak in **plain English** and don't assume that we know what you are talking about.

Have **more information available about rarer cancers**; better financial advice and offer more support to family members.

Give more information. Ask if there is more information we would like and spend time talking to us. I felt there were huge gaps in the information I was given and I rarely saw my oncologist



More than a *fifth* of the comments related to lack of emotional or financial support, poor aftercare and a need for a more unified approach

EMOTIONAL AND FINANCIAL SUPPORT

- Information relating to access for emotional and financial support **varies widely**
- There is a need for recognizing patients without a support network from friends and family
- Information on financial benefits during treatment is hard to access
- There is an overreliance on friends and family to offer emotional support
- Males find it particularly difficult to access
 emotional support



AFTERCARE

- Give patients information on what symptoms might indicate relapse post treatment
- Don't withdraw all support immediately post treatment
- Emotional support should be offered to cancer survivors
- Be aware that **carers and family also need support**, not just the patient themselves

UNIFIED APPROACH:

- Treatments seem to differ a lot across and within healthcare trusts
- HCPs should **work together** and work alongside and promote charities too
- Levels of care should be nationwide and not differ from hospital to hospital









Thank you for getting me through a very difficult time. I hope I never have to use your services again but if I do, **I would like more aftercare support.** I felt left alone and frightened for my future when my treatment finished.

Please provide emotional support **& somewhere to ask questions AFTER** *active treatment* has ended. Don't leave people in an emotional wilderness.

To understand the importance of emotional support. I felt like someone on a conveyor belt that needs to be rushed through.

It would be nice to have **more physical support** for those that consider themselves fit and healthy prior to diagnosis I.e. Exercise regimens appropriate for the treatment to maintain mobility, strength and boosting confidence/ motivation/ well being feeling

Financial struggle is as bad as the cancer.

Not enough support from anyone had to chase it all myself. It was left up to my husband to support me.

Support varies by postcode as does treatment and follow up.

This is your job & sometimes you can be blasé. It was all new to me & terrifying. More information & help should be offered & we shouldn't have to try & find things out for ourselves such as financial help & benefits. I got the most help from CAB who told me about the MacMillan grant & put me in touch with Perennial Trust & Retail Trust & paid towards my gas & electric. I received excellent treatment but once it's finished you feel confused & abandoned..."is that it? what happens next".

Focus more on emotional support ... sometimes you have to be more direct / pushy with patients, to ascertain if they need this type of support (especially with men) !!

Treatment and care during cancer was great. *Afterwards,* it is almost non-existent and you *feel very alone.*

Emotional support is important and quality of life is very important a plan of action would be appreciated. Reoccurrence is not covered enough or outlooks it feels dire. After initial treatment is finished the worry of reoccurrence is real follow ups should be regular

Recognise and address the **emotional impact cancer** diagnosis has. We are not just a set of physical symptoms.

Not enough support from anyone had to chase it all myself. Pay for private counselling. No financial help. It was left up to my husband to support me



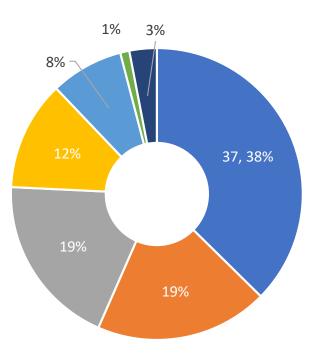
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Messages for drug companies who manufacture treatments for cancer

Whilst again there was a sense of gratitude towards the drug companies, there was a much more diverse response to this question. There was an overwhelming sense that cancer treatment drugs are overpriced – almost two fifths of respondents – and nearly two fifths again supported more research into treatments and a reduction in side effects from the drugs:

Comments by frequency

- High price
- More research being required
- Need for reduced side effects
- Gratitude
- Packaging, drug format and information
- Alternative natural remedies
- Other







Please, **please reduce your costs**, so Nice will authorise the use, far to many people are dying from a disease that you can live with, what is the point in raising funds for cancer research when patients are unable to access the drugs

Why can they not be made cheaper ? I don't understand why some people cannot have or continue to have a drug that works for them

Make your drugs cheaper so that ALL cancer patients can have them. I do believe that the drug that can eradicate cancer is out there but companies prefer to put there own financial gains before human life!!!!

Use plain English to **explain about side effects**. Give % of side effects so you can pick out which are really likely to happen. **Understand how cocktails of drugs interact with each other** - you are seldom taking just one medication. I found it particularly tiresome having to take medication to manage the side effects of the medication that was managing the side effects of the chemo!!

Please take note of and **encourage patients to report side effects**. They are debilitating for the patient and for their family. It is not just survival at any cost. Even different brands of the same drug can have different side effects.

Really unbelievable how can they expect people to take some drugs are so **awful tasting** how can it be so hard. To sort this problem

Make sure the drugs are always available, i.e. Tamoxifen. There have been occasions that my pharmacist has not been able to get any, and regularly can't get the specific brand which gives me the least side-effects.

Please **be very honest about the side effects** of treatment. Employ more clinical pharmacists to identify contra indications of **side effects from multiple medication**





Messages for drug companies who manufacture treatments for cancer

If your doctor suggest you take your medication at a **certain time** to **make this clear** to us as we are not also remembering what the doctors says.

Make the **packaging easier to open**; indicate days of the week on packaging (I used to forget if I'd taken the tablets)

Clearer guidance on side effects, the 1 in 1000 or 20 in 1000 affected doesn't really help!!!

Make information in easier language to understand

Better instructions on medication

Tastier so people don't dread taking it

Explain side effects with **common language** and truthfully not medical jargon

Make sure the packaging the tablets come in are **easy to open** when you have no energy/strength

Make more liquid form or injection or patches

I would have liked an **individualised information pack** giving all drug information, s/e's and their management all in one pack. Maybe the drug companies could work with the HCPs to produce this.





Thank you



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