PATIENT INVOLVEMENT IN PITUITARY MULTIDISCIPLINARY TEAM (MDT) DECISION MAKING:
THE PATIENT EXPERIENCE OF BEING PRESENT AT THE MEETING

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Introduction:
Multidisciplinary teams (MDTs) are the standard for cancer care in the UK [1]. MDTs bring together a wide range of professionals to discuss the management of individual patients. Whilst there is a strong clinical and moral argument for involving patients in decisions about their care [2], there has been much debate as to how best to achieve patient involvement in an MDT-setting [1,3]. Professionals express concerns that patient exposure to an MDT environment could potentially be confusing or distressing [3].

The combined pituitary clinic (CPC) at the Royal Victoria Infirmary is a unique ‘hybrid’ clinic that enables patients to attend a multi-professional clinic that mirrors that of an MDT. Patients have the opportunity to interact with all members of the MDT, provide their personal values and preferences and discuss treatment options.

Interestingly the professional viewpoint on this topic has been well characterised in the literature [3], however the patient experience and participation in an MDT setting has not been explored for any cancer. The CPC provides an exclusive and timely opportunity to characterise the patient response to an MDT-like setting.

Aim:
• To critically analyse the patient experience of attending an MDT-like consultation.

Methods:
• We prospectively recruited 7 patients (2 male, 5 female) at different stages in the management of their condition using convenience sampling. Semi-structured interviews were conducted over the telephone and were audio recorded and transcribed verbatim by the first author; 1 interview was omitted from transcription owing to poor recording quality.
• Transcripts (n=6) were analysed using thematic analysis. Emerging themes of interest were incorporated into subsequent interview schedules for discussion.
• Consent to conduct this service review was sought from the local NHS research and development officer.

Results:
Patients reported variable reactions to the CPC structure and environment; irrespective of reaction all patients find that the CPC is beneficial for information gathering:

“Actually, looking back… perhaps if I’d only seen [the endocrinologist] he may have not been able to answer [all of my questions] because I know [the surgeon] answered some of them. So in a way for getting answers for everything I needed to feel a little more settled that was a good thing.”
Patient 2 (Female)

Patients state that meeting with a number of professionals of different specialties was reassuring as they perceived that a discussion had taken place and that all options for treatment had been considered:

“I think it’s so everybody [can} come together… and put a decent package of care together … If there are any problems… you know [they can all] discuss it and try come up with a better way of dealing with the problems.”
Patient 6 (Female)

Viewing MRI scans appeared to help patients to understand and come to terms with their diagnosis; furthermore it facilitated an appreciation of surgical approaches to treatment:

“It certainly… seeing it the first time [is important] because oh my good god… this is why I’ve been bad for the past 6-7 years… it just puts everything into a package… so to speak. You kind of knew why everything was happening to you the way it was.”
Patient 4 (Female)

Patients reported feeling involved both in the clinic and in decision-making regarding their care, however tended towards descriptions of passive involvement overall:

“I felt… well as involved as I should be. I didn’t feel as if I was getting told and it was left at that. [As] I’ve said I never felt as if they were talking down to me or talking amongst each other without involving me. I mean obviously they have to talk to each other for… conferring and that; but I’ve never ever felt like I was just somebody sitting in the corner that they were talking about.”
Patient 3 (Female)

Conclusion & Discussion:
• This small study is the first assessment of patient involvement in an MDT-like environment.
• Patients report that attending the CPC is beneficial for information gathering; furthermore they describe good overall involvement in the clinic and decision-making.
• Although patients reported improved involvement in decision-making, it is impossible to conclude from the data that this is the case; therefore further investigation is required to characterise patient involvement in decision-making within this MDT environment and the overall impact the CPC structure has on the consultation dynamic from the patient perspective.

References:

*In association with*