Implementing Dementia-Friendly Care Approach for Cancer Patients Living with Dementia

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Abstract

Purpose: The purpose of this study is to address the inequity of care outcomes for patients living with dementia through exploring current challenges and barriers, and proposing a dementia-friendly approach to cancer care.

There is growing recognition that the number of cancer patients living with dementia is increasing. Within this small but growing area of scholarship, these patients have been found to experience poor outcomes; they receive less cancer screening, staging, and curative treatment than patients without dementia, thus they are typically diagnosed at later stage cancers with lower survival rates. The cancer journey is also difficult for their caregivers who play central roles in navigating care systems and communicating with the cancer care team. Additionally, although they are experts in cancer, care providers often lack confidence and knowledge regarding dementia-care.

Methods: This is a three-year interdisciplinary study funded by the Alzheimer’s Society of Canada and set at BC Cancer. We are conducting qualitative applied health research drawing on a focused ethnography methodology underpinned by a person-centred philosophy. Phase one explores the cancer care experiences of patients living with dementia, their caregivers, and their care providers; a total of 55 participants are being interviewed from these groups. Data is also being gathered through participant observation as patients and caregivers navigate the care environment during treatment and follow up visits across BC Cancer sites. Phase one findings will inform the development of a dementia-friendly cancer care education module and recommendations for practice in phase two.

Results/Findings: In this presentation we will share the early findings from phase one of our study. Early caregiver and patient data emphasizes, pragmatic challenges related to "navigating memory issues" when the patients don’t remember their diagnoses and the reason for clinic visits, and the need to "prepare for every eventuality" during appointments. Early care provider data points to the challenges of successfully "sharing the diagnosis" of dementia between members of the care team "navigating unpredictable responses".

Conclusions: Phase one data is underpinning the importance of the need for both additional dementia aware education and recommendations for dementia-friendly policies and processes to better tailor cancer care for patients living with dementia ensuring equity.