The holistic approach of the patient

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Organisers

Partners

Social representations

- Lung cancer as
  - ✓Self inflicted disease
  - ✓Poor prognosis
  - ✓Medical treatments are considered as palliative only

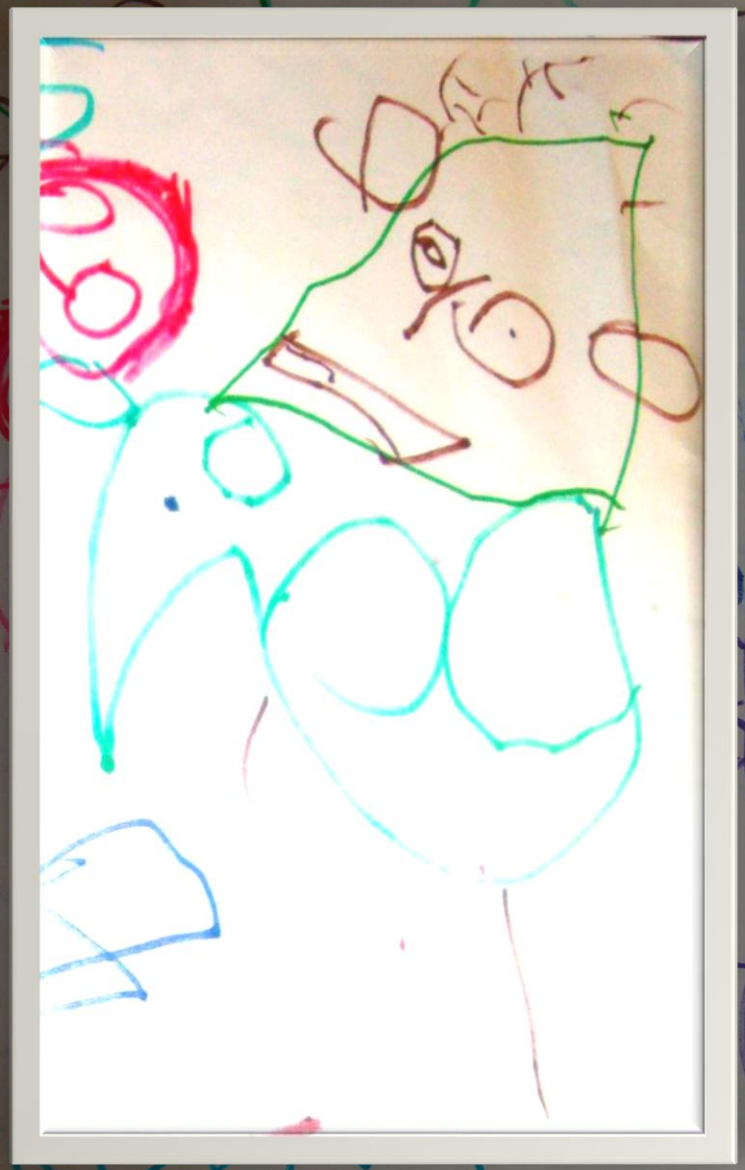
Time stasis

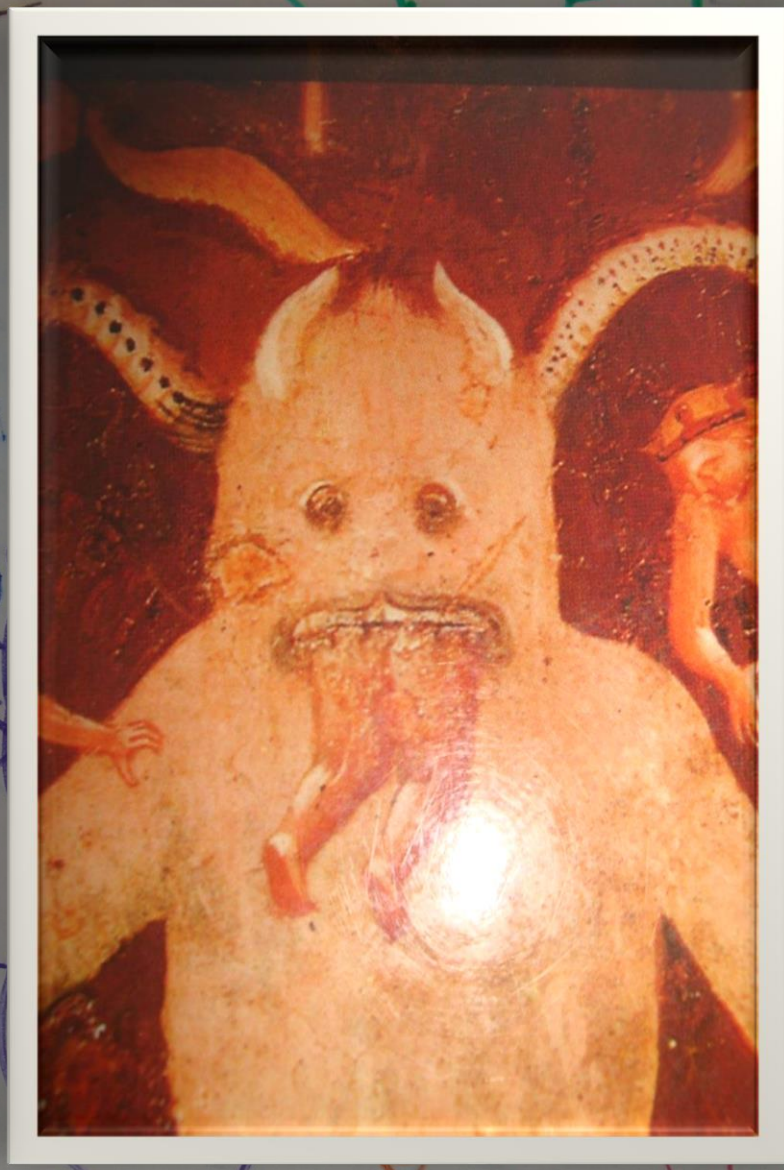
- Temporal anomy
- Loss of self-projection into the future (as a sociological standard)

Representations are complex and idiosyncratic

- archetypal theories
- Recycling of medical theories
- Theory of “denatured man”
- culture
- Contingency

Secular knowledge



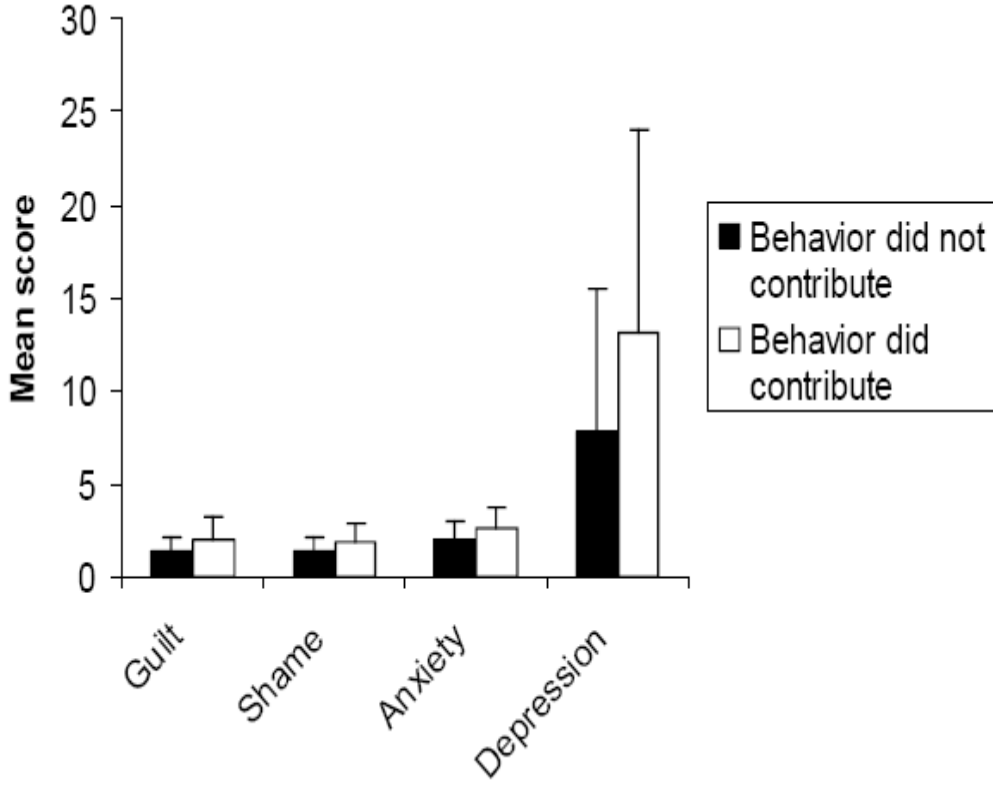


Anguish

- Diagnostic trauma as a reminiscence of an previous traumatic antecedent
- Rationalization
- Unconscious guilt, consciousness of guilt
- Anthromorphic theory: cancer as an intruder (disturbing strangeness)
- Theory of denatured man (man ill due to society and the lifestyles)

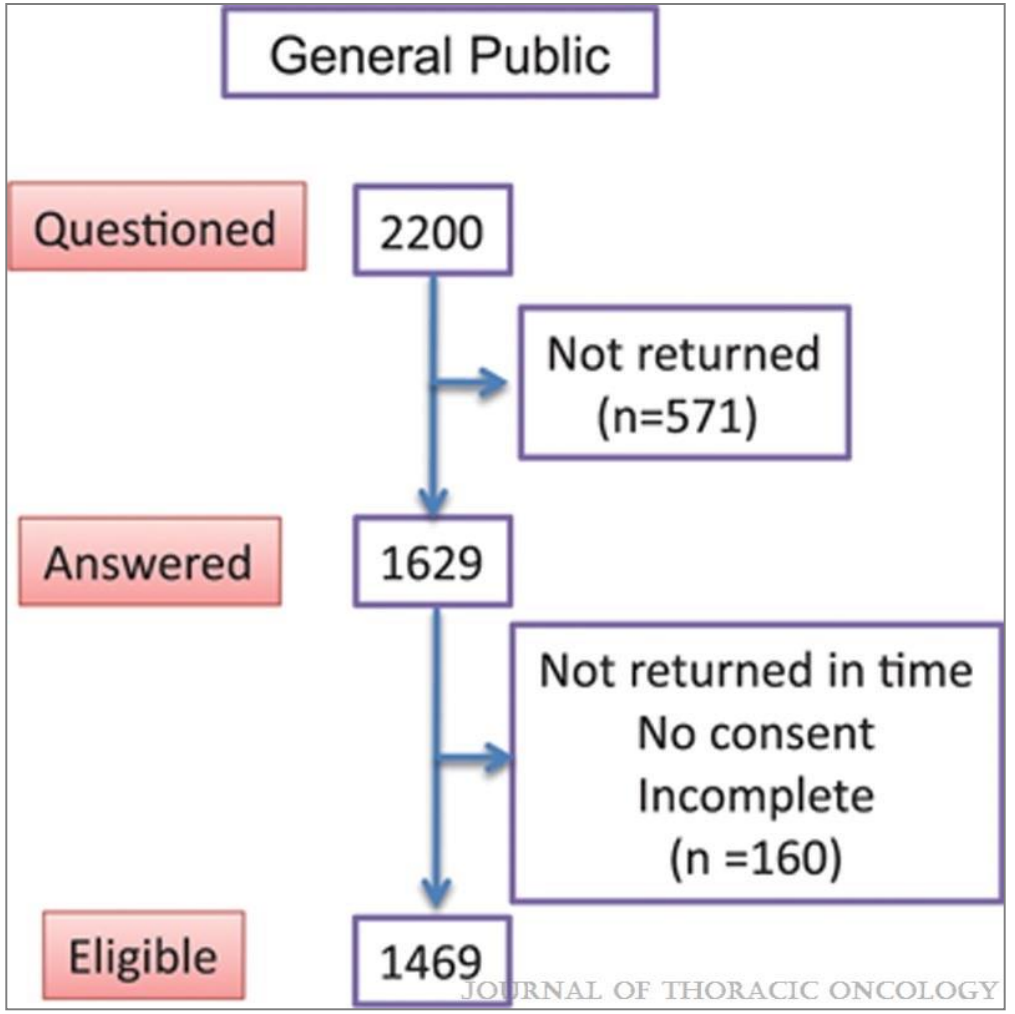
Patients' representations of cancer

Behaviour related versus behaviour unrelated



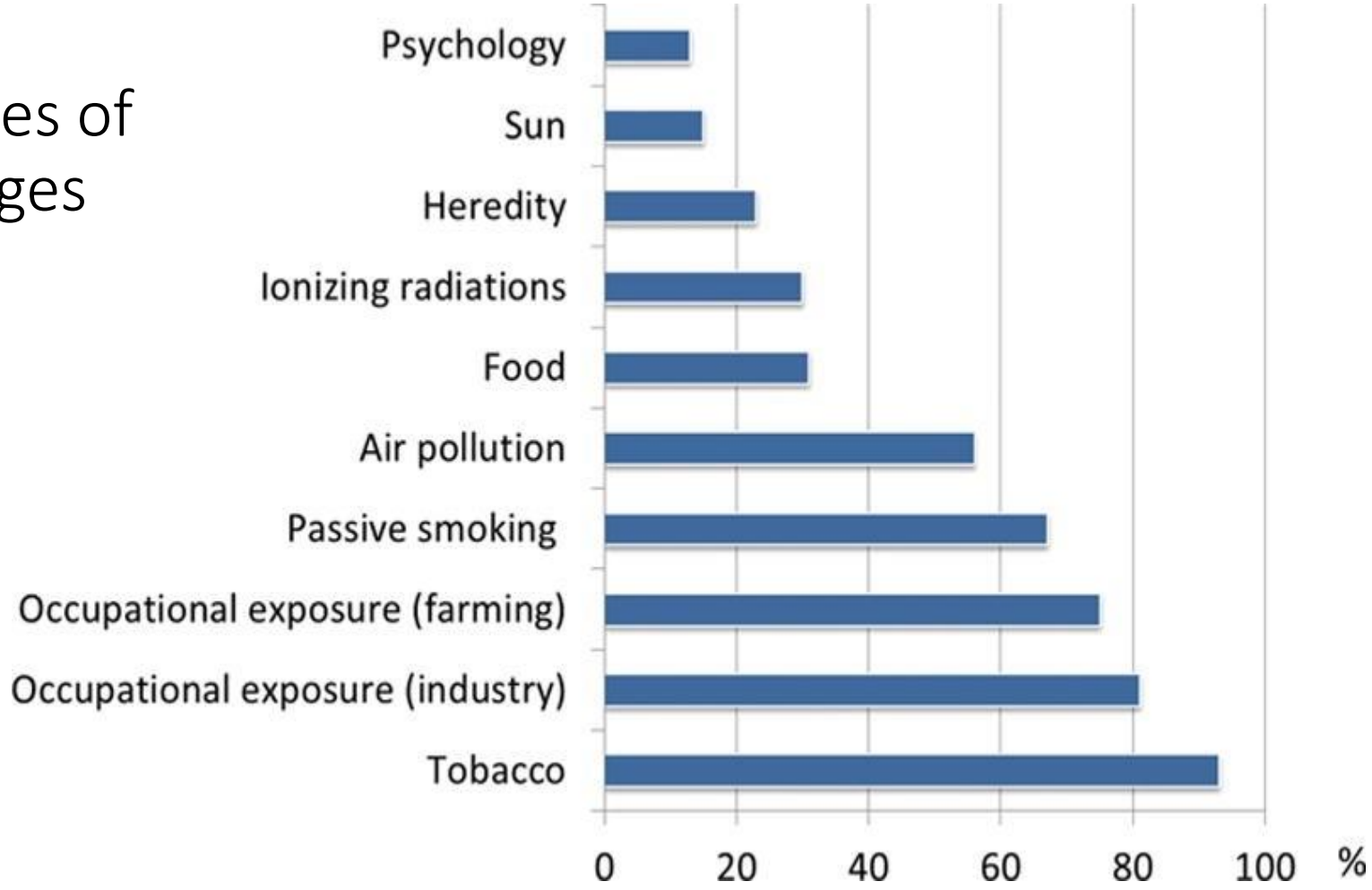
LoConte N, Clin Lung Cancer, 2008

Secular social knowledge



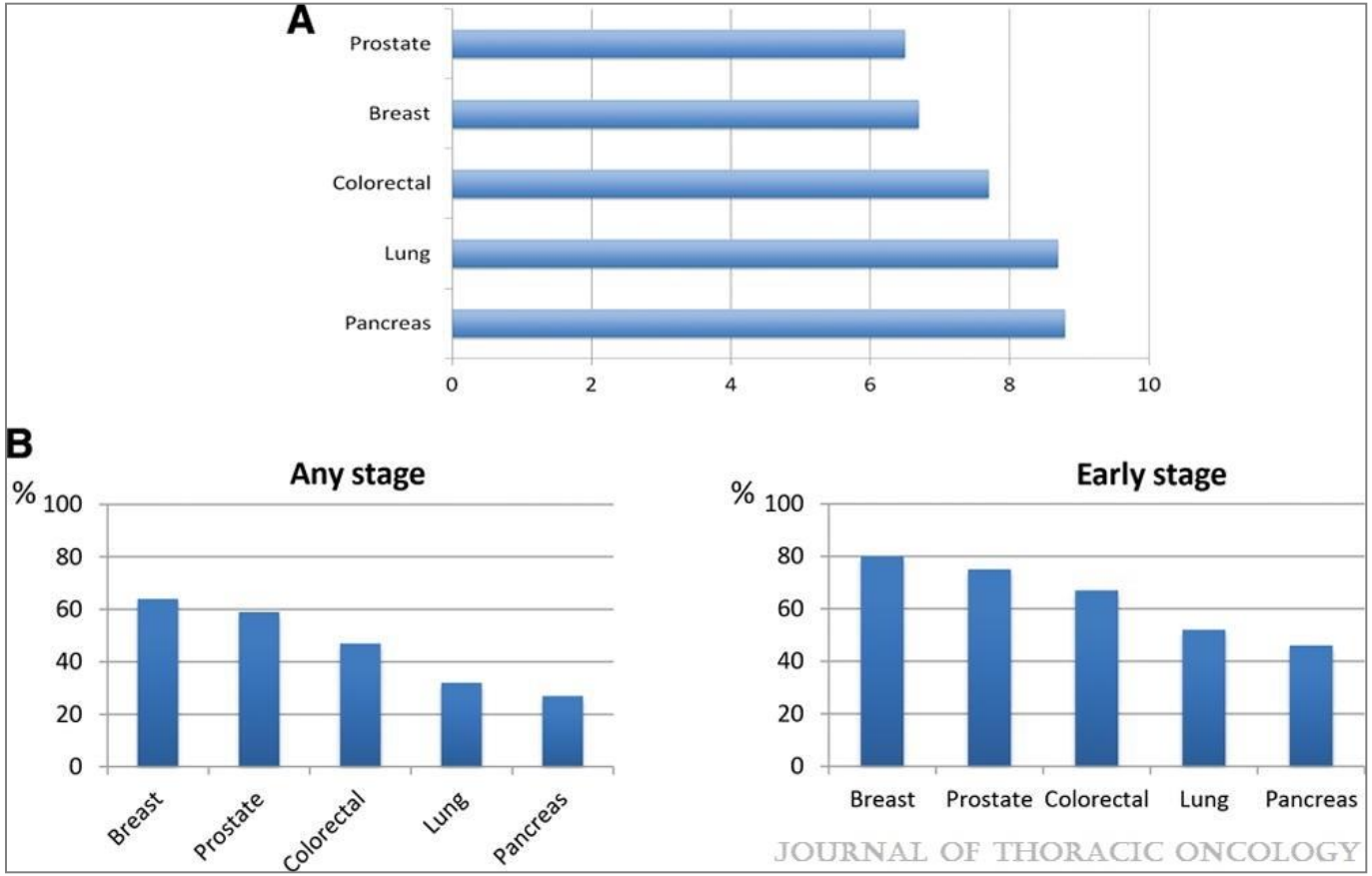
Mazières J, Pujol JL, Kalampalikis N, JTO 2015

Beliefs about the causes of lung cancer (percentages of listed causes)



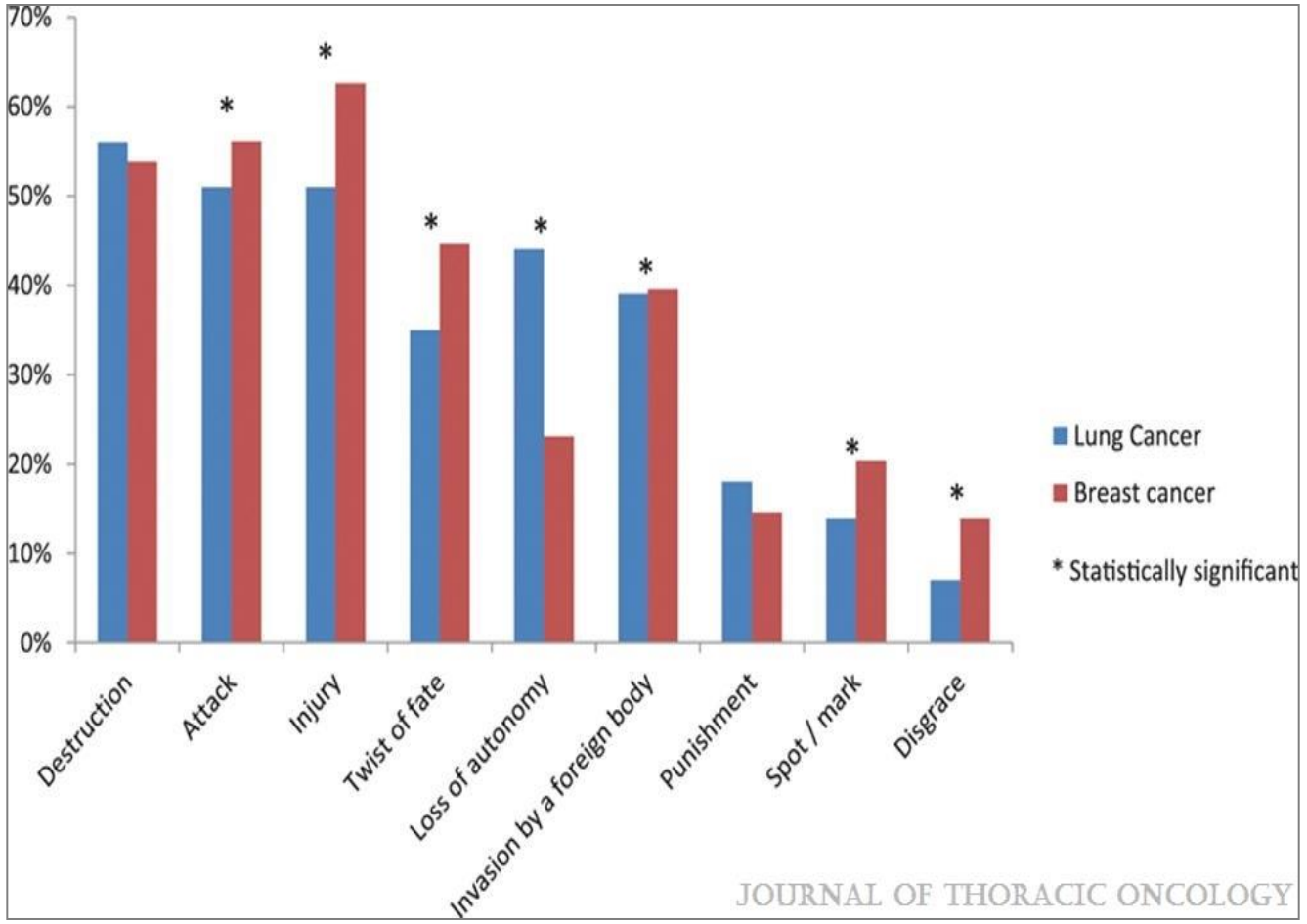
Mazières J, Pujol JL, Kalampalikis N, JTO 2015

Assessing the gravity of five cancers. Answers to the question: “On a scale of 0–10, how would you rate the seriousness of these cancers?”



Mazières J, Pujol JL, Kalampalikis N, JTO 2015

Comparison of how lung cancer and breast cancer feel to the patient. In response to the question *"According to you, how does a patient with lung/breast cancer consider their disease?"*

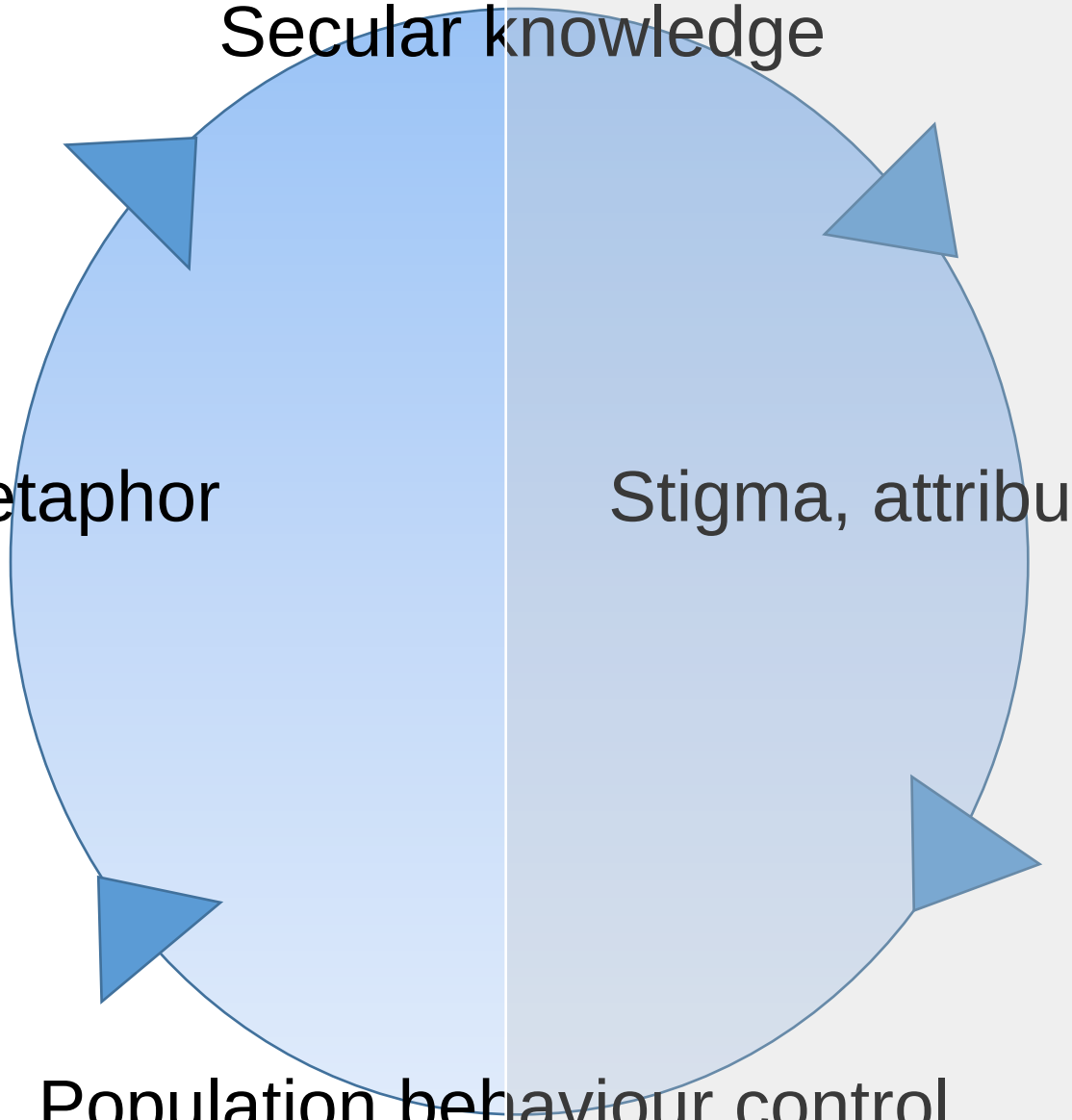


Mazières J, Pujol JL, Kalampalikis N, JTO 2015

NOUS SOMMES
2 MILLIONS
DE HEROS
ORDINAIRES
Catherine
Je suis fière de pouvoir dire que j'ai surmonté il y a dix sept ans mon cancer de l'estomac. Fière de pouvoir en parler, tout simplement. J'ai trop souffert des non-dits qui ont entouré ma maladie.
Retrouvez les héros ordinaires sur www.e-cancer.fr
CANCERINFOSERVICE 0810 810 821

PUBLIC

PATIENT



Lung cancer and cigarette smoking

- Experience of stigma (perceived and internalized),
- Impact of present and past smoking,
- Coping

Hamann HA et al. Pyscho oncol, 2014

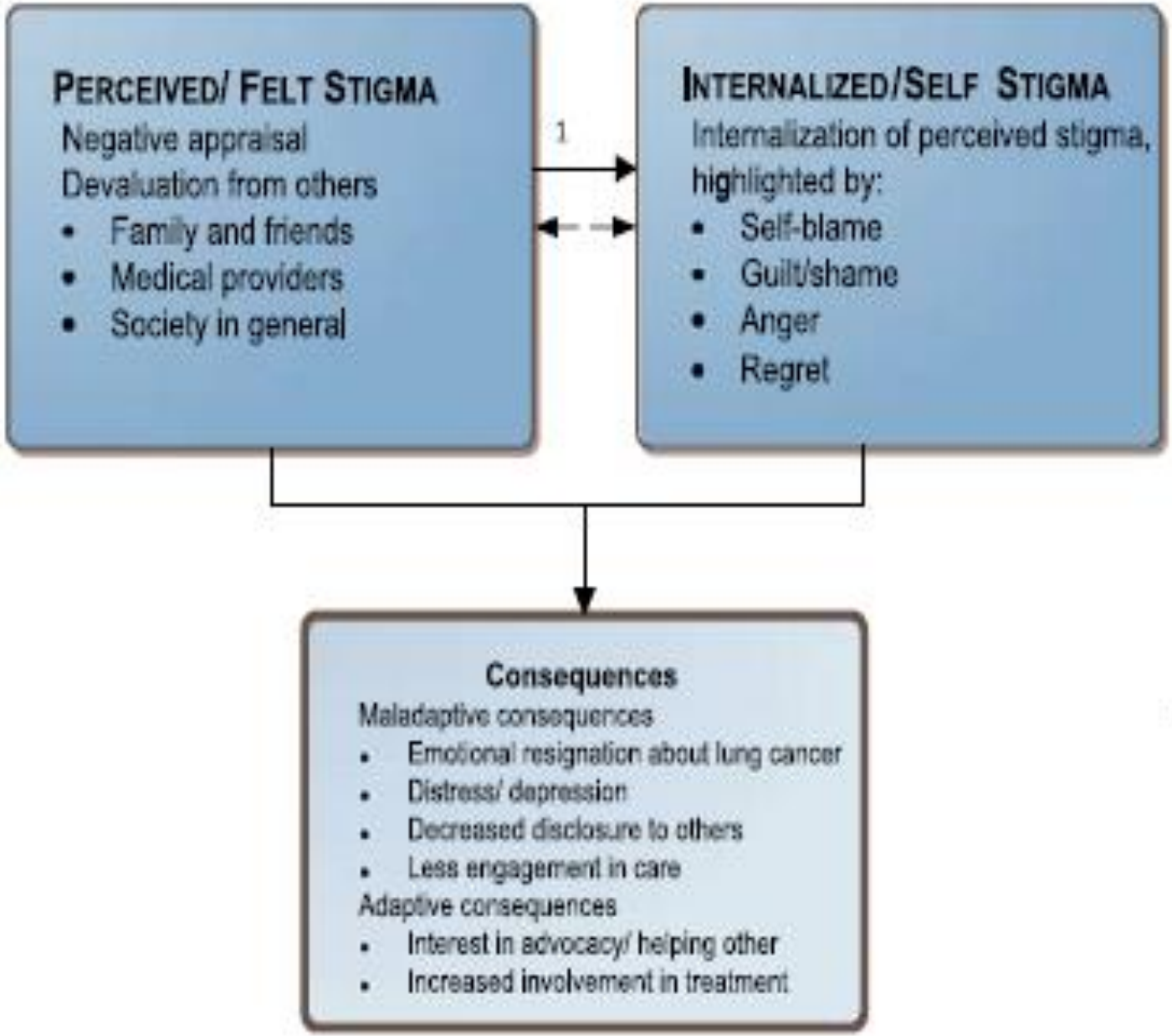
Semi-structured intervews

Table 1. Participant characteristics

	Interview	Focus group
	(*n* = 42)	(*n* = 23)
Characteristics	***n* (%)**	***n* (%)**
Sex		
Male	20 (48)	12 (52)
Female	22 (52)	11 (48)
Education		
11th grade or less	7 (17)	1 (4)
High school graduate or GED	9 (21)	5 (22)
Some college	10 (24)	7 (30)
College graduate	8 (19)	6 (26)
Post graduate training	8 (19)	4 (17)
Marital status		
Married/partnered	29 (69)	18 (78)
Divorced	7 (17)	3 (13)
Widowed	2 (5)	1 (4)
Single, never married	4 (10)	1 (4)
Race		
White	27 (64)	16 (70)
Black/AA	12 (29)	5 (22)
AI or Alaska Native	1 (2)	0 (0)
Asian or PI	2 (5)	2 (9)

Hamann HA et al. Pyscho oncol, 2014

High frequency of stigma explains mal-adaptative consequences



Hamann HA et al. Pyscho oncol, 2014

PTSD in patients and significant others facing diagnosis of lung cancer

- to determine the level of PTSD by means of IES in patients for whom lung cancer has been diagnosed ; control group: COPD
- to compare PTSD in patients and their significant others
- to determine whether or not IES and GHQ-28 correlate

Pujol JL, Psychology 2013. Vol.4, No.6A1, 1-7

Participants' demography and social positioning

	Lung cancer pts n (%)	Relatives n (%)	COPD n (%)	$P^{\dagger}$
N	41	16	19	
Age (median)	59	60.5	57	0.54
Women	18 (43.90)	12 (75.00)	9 (47.37)	0.69
Marital status				0.39
Knowledge of cancer				0.004
Personal experience	31 (75.61)	1 (6.25)	1 (5.26)*	
Relative affected	8 (19.51)	13 (81.25)	11 (57.89)	
None of the above	2 (4.88)	2 (12.50)	5 (26.32)	
Smoking habits				0.004
Never smoker	3 (7.32)	6 (37.50)	10 (52.63)	
Former smoker	30 (73.17)	5 (31.25)	8 (42.11)	
Active smoker	8 (19.51)	5 (31.25)	1 (5.26)	
Educational degree				0.18
A level or less	24 (58.54)	6 (37.50)	8 (42.11)	
Bachelor or higher	16 (39.02)	10 (62.50)	11 (57.89)	
Missing data	1 (2.44)			

†Statistical comparison between the three groups: Mann and Whitney U test for age; comparisons using χ^2 tests for all others; *protocol violation.

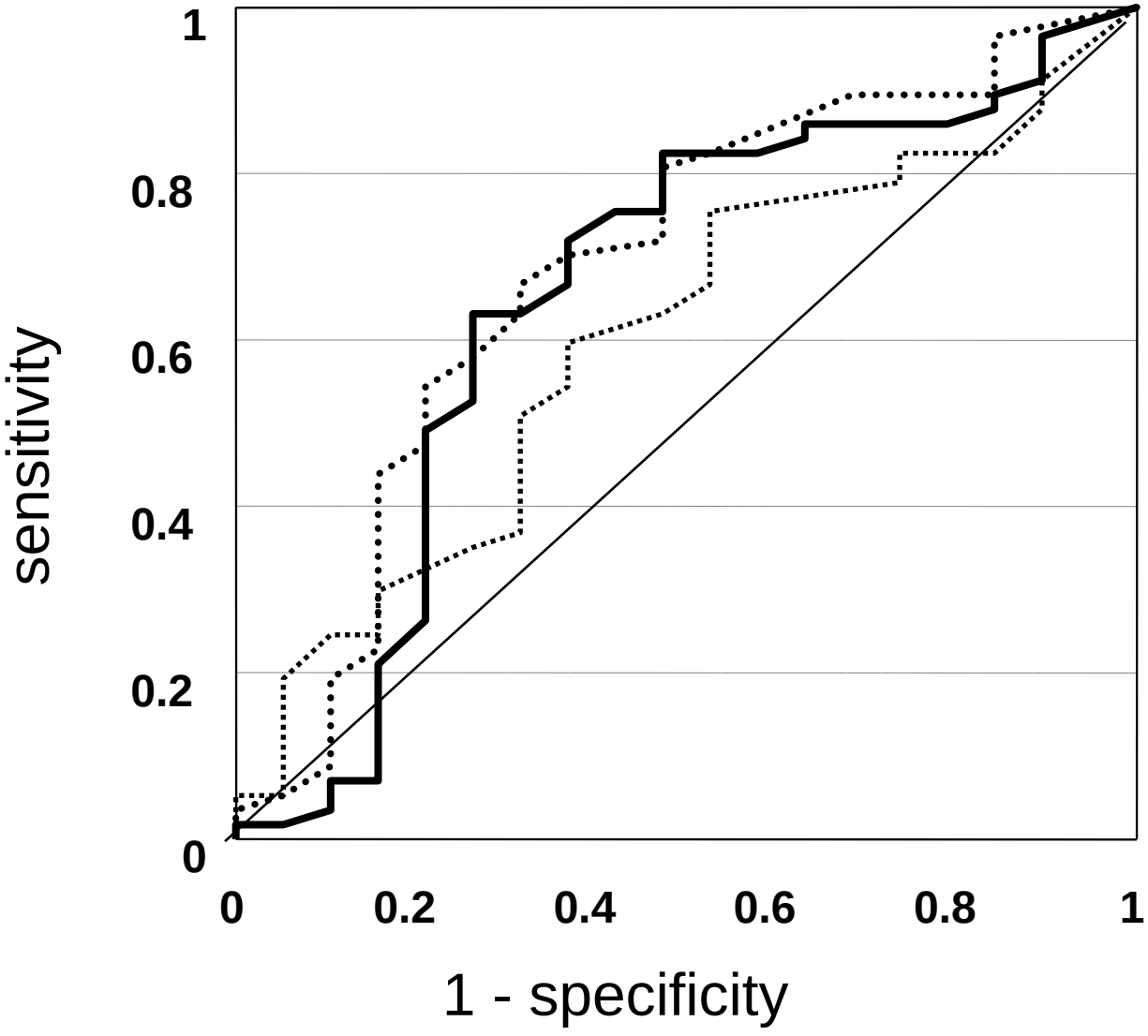
Pujol JL, Psychology 2013.
Vol.4, No.6A1, 1-7

ROC comparing specificity in lung cancer versus COPD

— total IES

··· Intrusion subscale

···· Avoidance subscale



Pujol JL, Psychology 2013.
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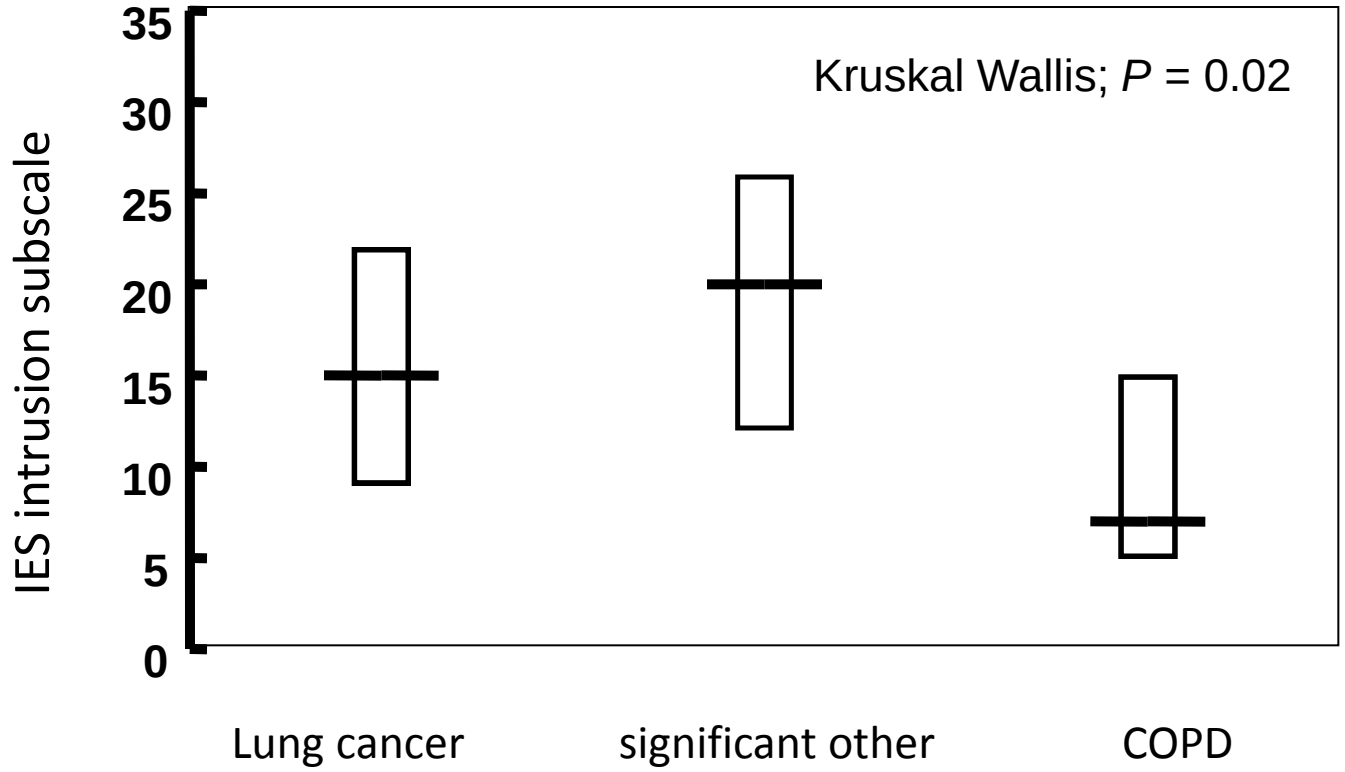
Intrusion subscale



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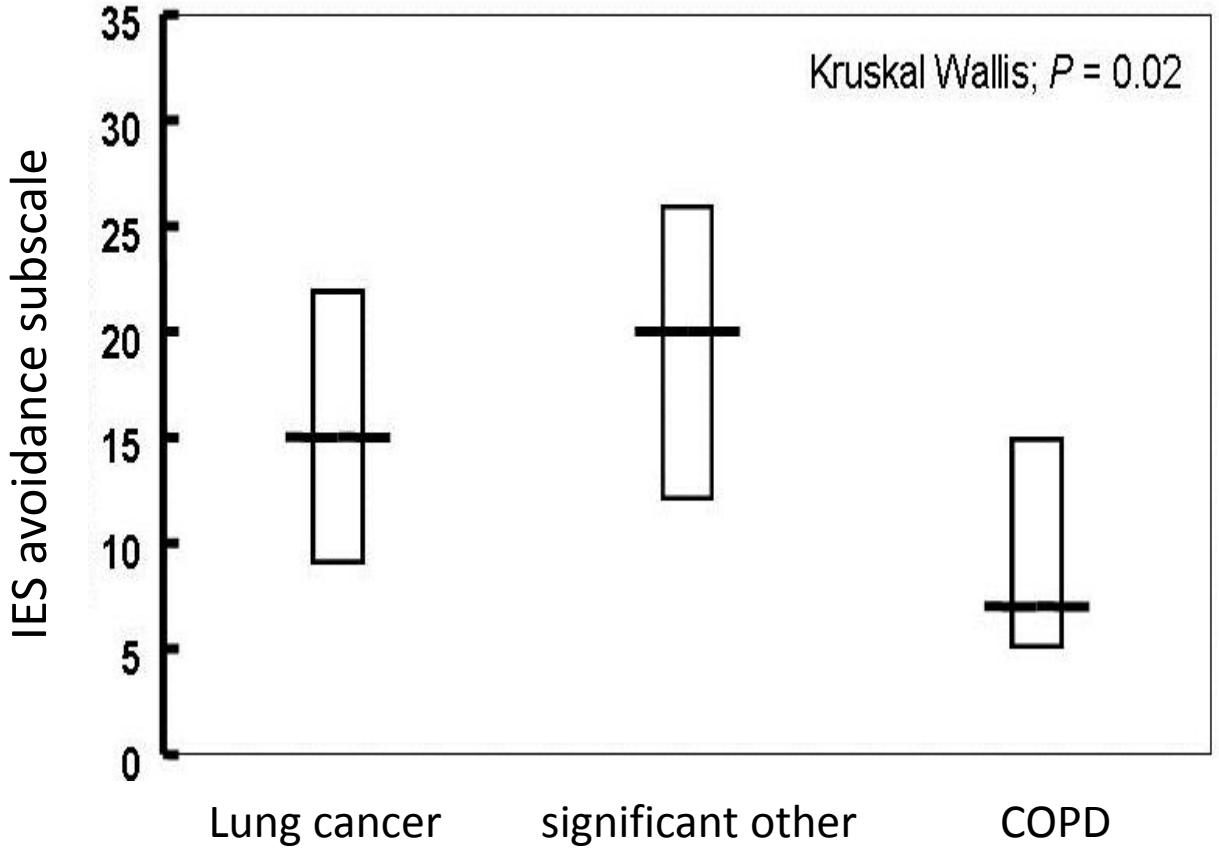
Avoidance subscale



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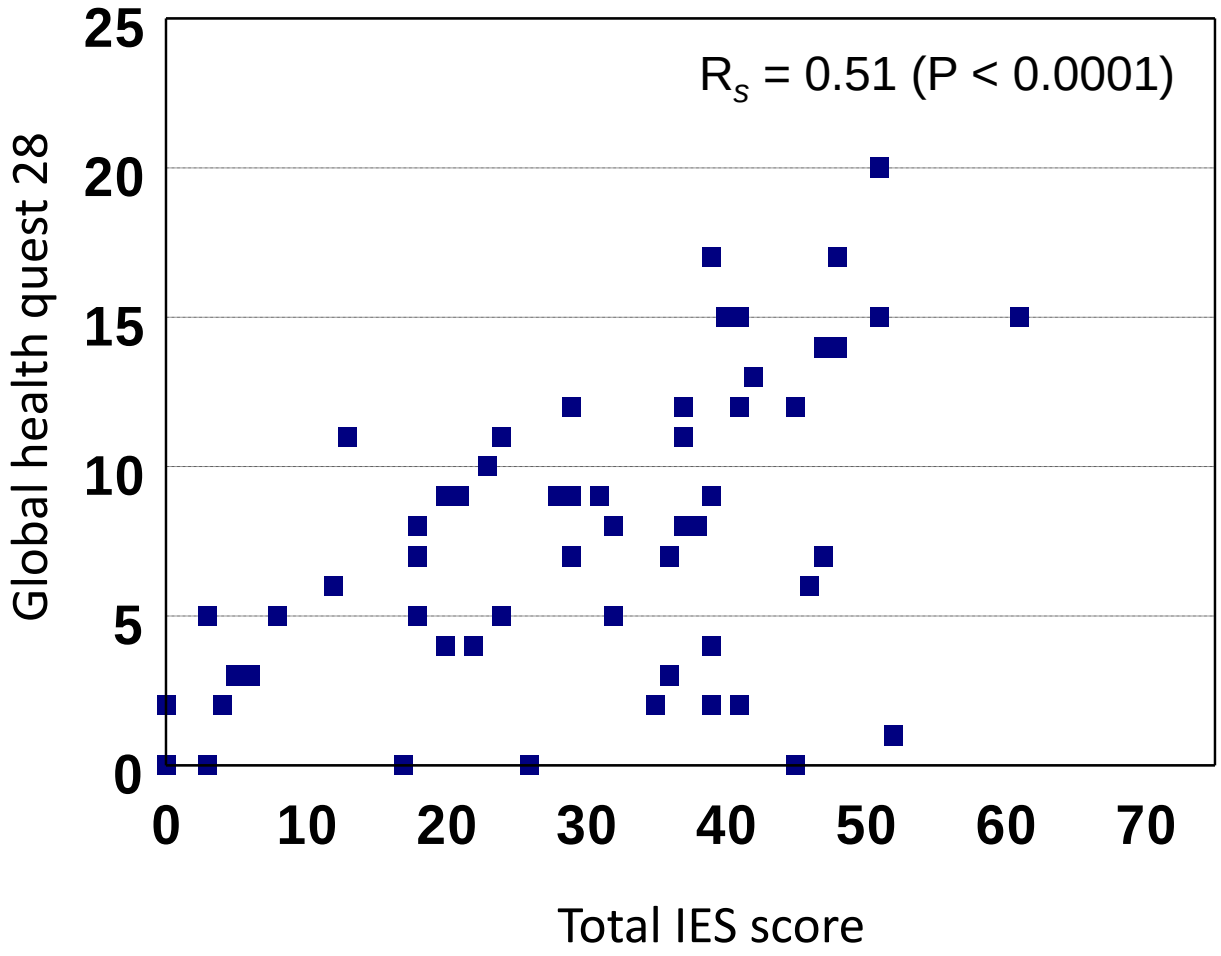
Vol.4, No.6A1, 1-7

Patients and signifi-cant others facing a diagnosis of lung cancer are at high risk of PTSD. The level of IES intrusion in persons facing lung cancer increases emotional distress that in turn affects quality of life.



Pujol JL, Psychology 2013.
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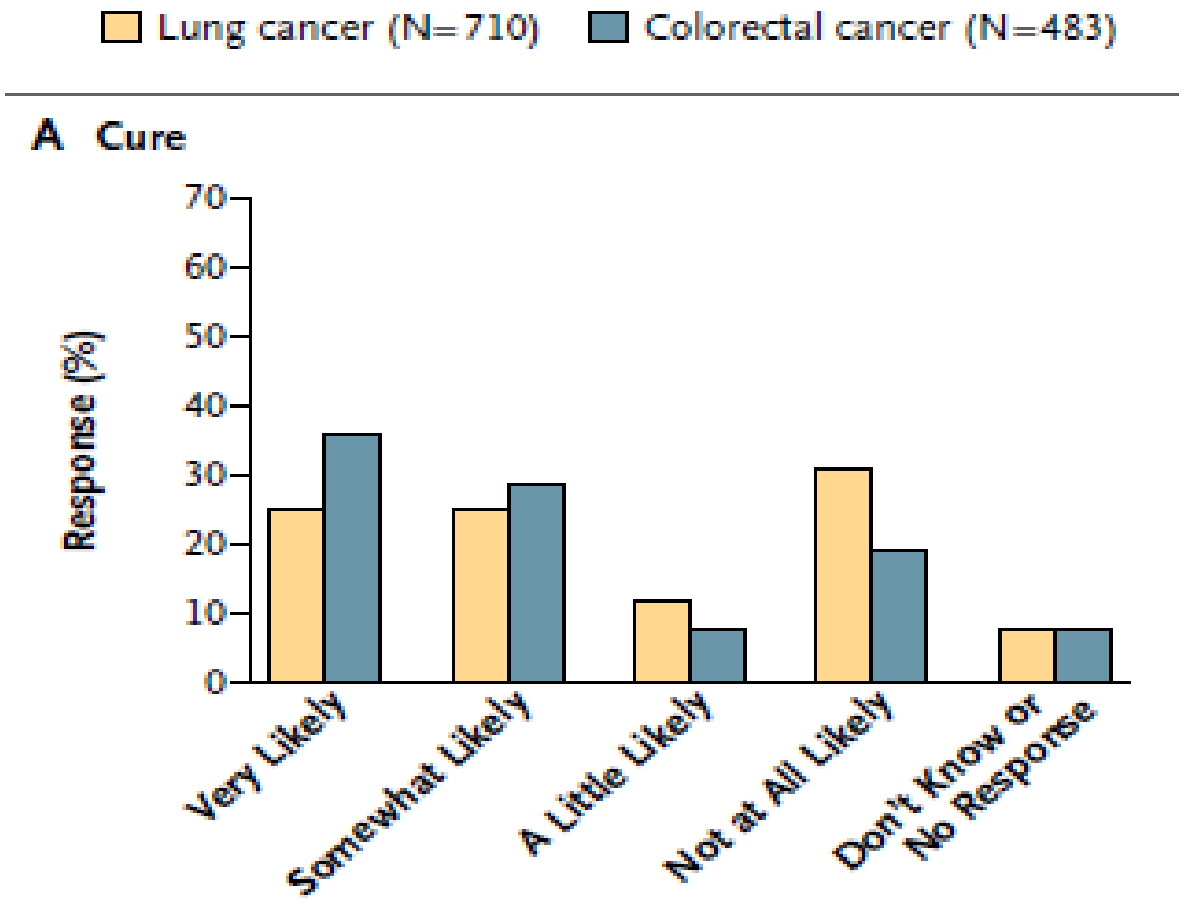
The multiple meanings of the word “cancer”

Cancer	Setting	Character	goal
Scientific material	Research	Searcher	Knowledge
Disease	Biology	MD, caregiver	Treatment
Ilness	Experience	Patient	To circumvent Biographic disruption
Sickness	Culture	Social, public	General meaning Attribution theory

Patient's expectation about cure



Weeks, N Engl J Med 2012

Patient’s expectations about chemotherapy

- Advanced lung cancer is an incurable disease
- 69% patients overestimate the expected effectiveness of CT.
- Belief in the CT is twice as high in patients with empathic relationship with the oncologist .
- This belief encourages patients to accept the CT

Weeks, N Engl J Med 2012

Physician’s expectation about chemotherapy?

- 30 key opinion leaders in thoracic oncology (22 have answered)
- Online survey consisting of five different fictive patient case reports who are expected to receive CT according to guidelines.

SITUATION a (1/5)

Patient in clinical conditions that fit with planned treatment.
Mucinous adenocarcinoma, metastases to the seventh rib and clavicle.
EGF-R negative, ALK negative,K-RAS mutation exon 2 codon 13.
Treatment planned: CISPLATIN - PEMETREXED chemotherapy.

» * Champs obligatoires

* **1 - How likely in your opinion will chemotherapy be curative?**		-2	-1	0	1	2	
	not at all likely	○	○	○	○	○	Very likely
* **2 - How likely in your opinion will chemotherapy prolong survival?**		-2	-1	0	1	2	
	not at all likely	○	○	○	○	○	very likely
* **3 - How likely in your opinion will chemotherapy allow symptom alleviation?**		-2	-1	0	1	2	
	not at all likely	○	○	○	○	○	very likely

SITUATION d: (4/5)

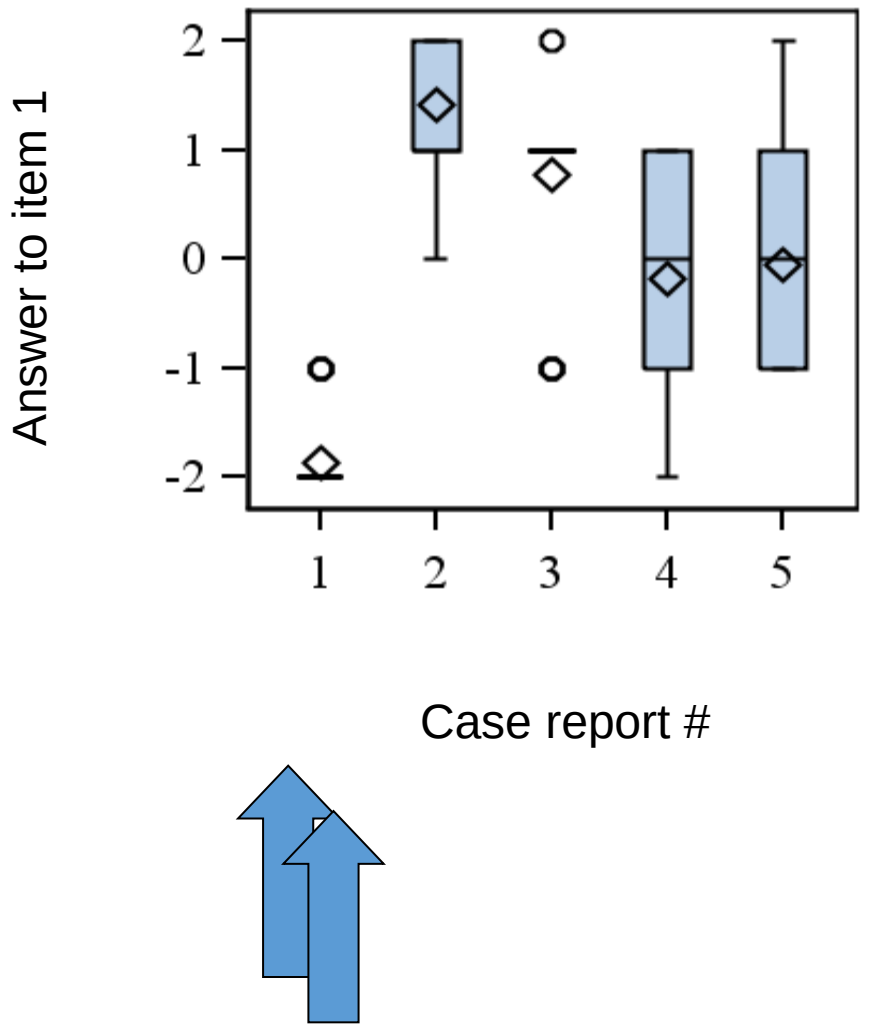
Patient in clinical conditions that fit with planned treatment.
Acinar adenocarcinoma of the lung, T2N1M1 : solitary left adrenal metastasis
Treatment planned:
Chemotherapy, four cycles with CISPLATIN - PEMETREXED combination.
next step decision is postponed at the end of four cycle program according to tumour assessment.

» * Champs obligatoires

		-2	-1	0	1	2	
* **1 - How likely in your opinion will chemotherapy be curative?**	not at all likely	○	○	○	○	○	Very likely
		-2	-1	0	1	2	
* **2 - How likely in your opinion will chemotherapy prolong survival?**	not at all likely	○	○	○	○	○	very likely
		-2	-1	0	1	2	
* **3 - How likely in your opinion will chemotherapy allow symptom alleviation?**	not at all likely	○	○	○	○	○	very likely

Valider

“How likely in your opinion will chemotherapy be curative?”



Pujol JL, submitted

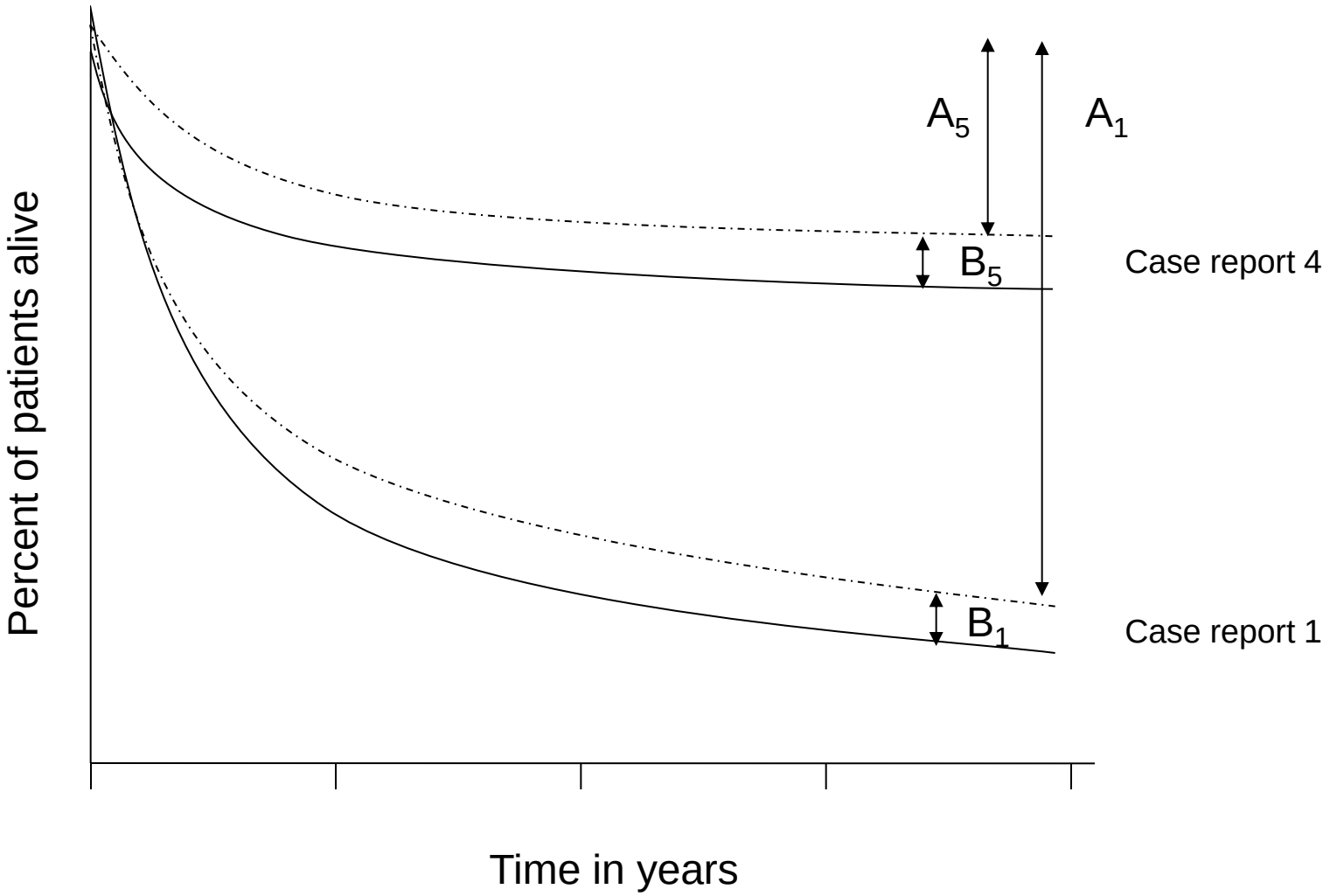
"How likely in your opinion will chemotherapy be curative?"

	Case report #				
Réponses (n) %	1	2	3	4	5
Not at all likely (-2)	(19) 86.3	(0) 0.00	(0) 0.00	(4) 18.1	(0) 0.00
Other answers	(3) 13.6	(22) 100	(22) 100	(18) 81.8	(22) 100

Fischer: P < 0.0001; ddl: 4

Pujol JL, submitted

area B is the perceived zone of traitement effectiveness;
Curability concept is the subtle relationship of HR to the area A + B;
Curability concept is a ratio of the percentage of lifes actually saved to the percentage of life that treatment should save it was absolutely effective.



Pujol JL, submitted

Conclusions

- Traumatic atmosphere of lung cancer diagnosis, and mainly the anguish it generates, creates a biographical disruption.
- This dissension reveals the cultural system of reference and the social representations in which the subject is trapped.
- The therapeutic response consists in helping the patient build up new grids of references.