

Feelings of Disenfranchisement and Support Needs Among Patients With Thyroid Cancer

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PURPOSE: To offer a better understanding of the experiences, preferences, and needs of patients with thyroid cancer.

PARTICIPANTS & SETTING: 17 patients with thyroid cancer receiving treatment at a university-affiliated hospital in Montreal, Québec, Canada.

METHODOLOGIC APPROACH: Interviews were conducted with patients, and descriptive phenomenology was used to explore patients' lived experience.

FINDINGS: Coping with uncertainty was a major theme that emerged from interviews, with some of the main concerns being difficult treatment decisions, long surgery wait times, and fears about surgical complications, potential metastases, and death. Study participants reported that without a nurse and an interprofessional team, they would be lost in a system they believed minimized their illness and offered few resources to support them in a time of crisis.

IMPLICATIONS FOR NURSING: Nurses must understand how the needs of individuals with thyroid cancer are often overlooked because of the good prognosis associated with the disease and should work to meet these information and support needs.

KEYWORDS thyroid cancer; interprofessional team; interprofessional care; phenomenology

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Thyroid cancer has been identified as the most rapidly growing form of cancer and is particularly prevalent in women aged 15–29 years (American Cancer Society, 2018; Canadian Cancer Society, 2012). Generally associated with a favorable prognosis, thyroid cancer usually involves medically focused treatment with hemithyroidectomy or total thyroidectomy, with or without adjuvant radioactive iodine treatments (nuclear medicine), and is followed by levothyroxine thyroid hormone replacement therapy and lifelong follow-up (Haugen et al., 2016).

A systematic review by Husson et al. (2011) reported conflicting results regarding quality-of-life impairments in the survivorship period; some studies reported persistent health problems and lower quality of life in thyroid cancer survivors compared to the general population, whereas others noted a tendency for quality of life to resume to baseline levels. In addition, a large study of 518 post-treatment individuals with thyroid cancer found that 65% continue to experience neurologic, musculoskeletal, and psychological symptoms, and 25% experience thyroid hormone imbalance (Schultz, Stava, & Vassilopoulou-Sellin, 2003). Other studies reveal the long-term impact of thyroid cancer on patients' sense of vitality, mental health, and social functioning (Crevenna et al., 2003; Tan, Nan, Thumboo, Sundram, & Tan, 2007).

The only two qualitative studies on this topic conducted previous to the current study concern the experiences of people with thyroid cancer receiving radioactive iodine treatment (I-131) (Sawka et al., 2009; Stajduhar et al., 2000). These studies highlight certain features of the thyroid cancer experience as