

Shared Decision Making in Ovarian Cancer

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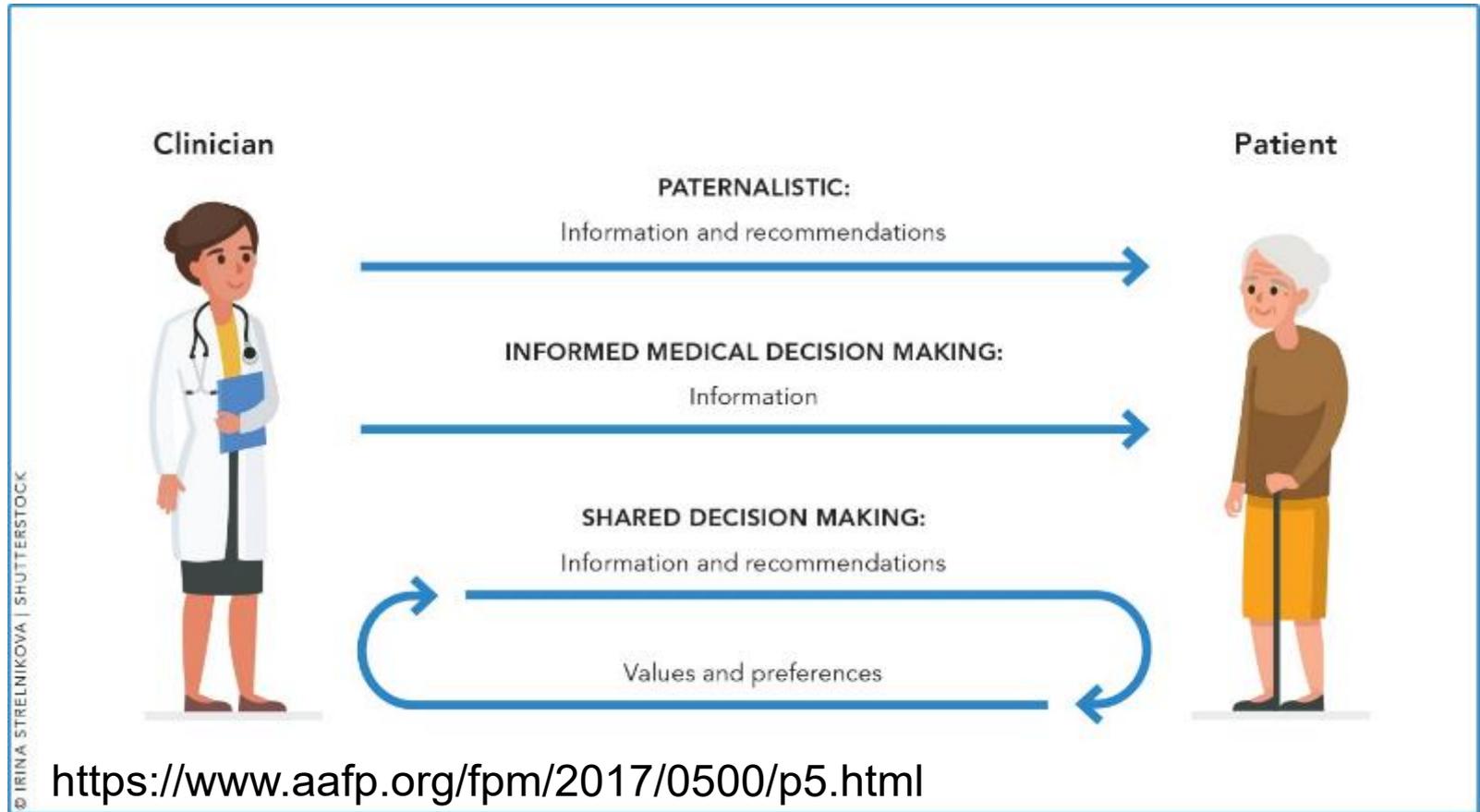
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Outline

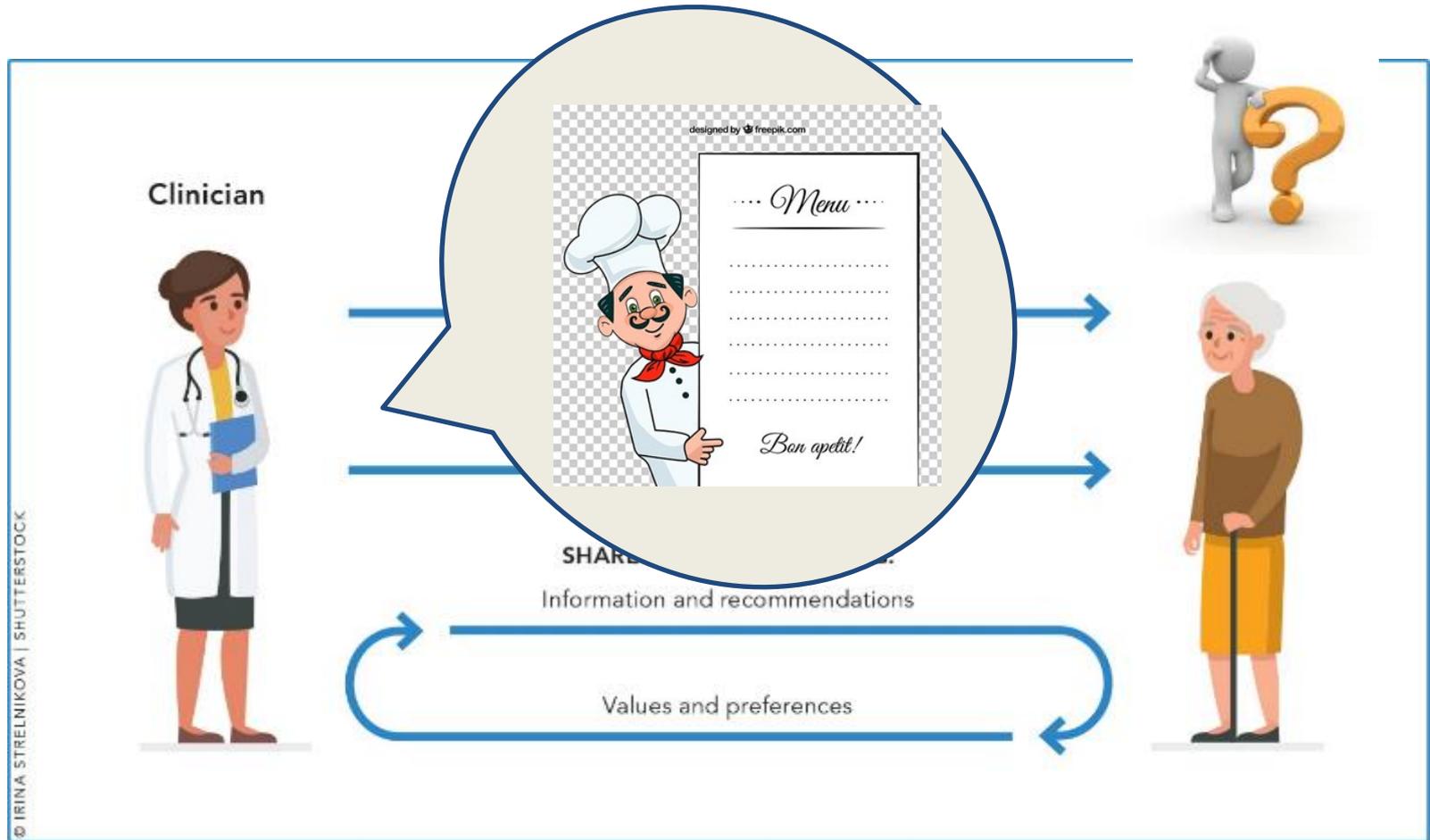
- Introductions
- Understand models for shared decision making
- Review focus on patient centered care
- Apply Shared Decision Making Model to the continuum of care in ovarian cancer
 - New Diagnosis
 - Surveillance and Survivorship
 - Facing Recurrent Disease
 - Making treatment decisions

What is Shared Decision Making?

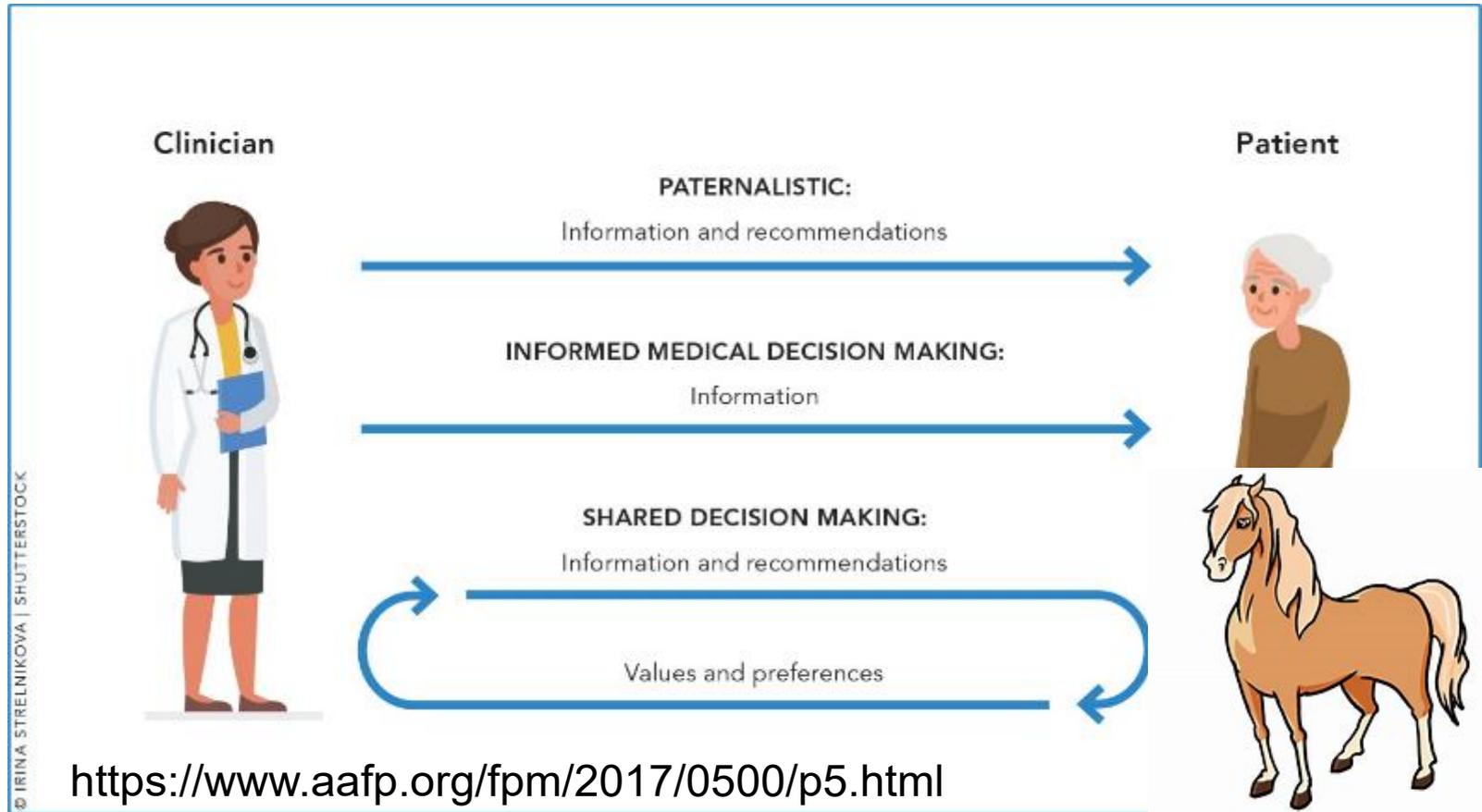


“conversation that happens between a patient and their health professional to reach a healthcare choice together”

What is Shared Decision Making?



What is Shared Decision Making?



Collaborative process that allows patients and their providers to make health care decisions together, taking into account the best scientific evidence available, as well as the patient's values and preferences.

Person-Centered Care

- Tenet of person-centered care concerns putting people and their families at the center of clinical decisions.
- Each patient brings his/her own unique preferences, concerns and expectations to a clinical encounter and these values should be integrated into decisions if they are to serve the patient.

Marie Ennis-O'Connor. A Person Centered Approach To The Care of Chronic Illness
Patient Empowerment Network.

Shared Decision Making

Shared decision making provides a patient-centered approach to care.

(1) patients are fully informed of the treatment options and the trade-offs between risks and benefits

(2) patient values and preferences are incorporated into treatment decisions.

Why promote Shared Decision Making?

1. ethical responsibility of clinicians to facilitate patient autonomy
2. more engaged patients are more informed, they are more likely to fully deliberate about the risks and benefits trade-offs
3. Patients are more satisfied with the clinical encounter.
4. Patients may have better psychosocial, and in some cases physical, outcomes

Challenges for SDM for Newly Diagnosed

- Complex decision context with no prior experience to guide them forward
- Mismatch of information they need and have access to; information sources
- Steep difference in knowledge and experience between provider and patient
- Brief face to face time
- Anxiety, fear
- Emotional time for patient, family, caregiver

Other Barriers to SDM

- Power imbalance
- Limited health literacy
- Self-efficacy
- Trust
- Fear/denial
- Normative beliefs

Framework for Patients to express and understand their preferences

Multiple Models for SDM

Common Themes: Bidirectional and Open Communication

The **SHARE** Approach

**Essential Steps of
Shared Decisionmaking**



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The **SHARE** Approach

Essential Steps of Shared Decisionmaking

Step 1: **S**eek your
patient's participation

Step 2: **H**elp your patient
explore and compare
treatment options

Step 3: **A**ssess your patient's
values and preferences

Step 4: **R**each a decision with
your patient

Step 5: **E**valuate your
patient's decision

Purposeful SDM: A problem-based approach to caring for patients with shared decision making

Example	Purpose: To resolve	SDM Method	Situation
 <p>Birth control alternatives</p>	Which alternative is best?	Weighing	It is uncertain what the harmful and beneficial outcomes of alternative interventions will be for a patient and their preferences
 <p>How to give birth</p>	What do we want, and can agree on?	Negotiating	Desires are ambiguous or in conflict between or within parties
 <p>Complex or chronic care</p>	How do we manage and resolve the current situation?	Problem solving	The problematic human situation and what to do about it is intellectually, practically, and emotionally fraught
 <p>End of life</p>	What ultimately matters?	Developing insight	The humanity of an individual or community is compromised or in existential transition

Shared Decision Making when Facing a New Diagnosis of Ovarian Cancer

- Surgery
- Types of Chemotherapy
- Clinical Trials

Challenges:

Shock of new diagnosis

Fear

Learning a new language of oncology/cancer care

Lack of knowledge about cancer

 Meeting a new provider
Foundation
for Women's Cancer

Shared Decision Making during Surveillance for Ovarian Cancer

- Checking CA125
- Role of imaging (CT Scan, PET/CT, when? How often?)
- Managing fear of recurrence

Challenges:

Shared Decision Making during a recurrence of ovarian cancer

- Choosing a therapy
- Considering quality of life priorities
 - Hair loss, neuropathy, travel...
- Considering clinical trial

Challenges:

- Disappointment and fear
- Anxiety
- Many options – how to choose which is “best”
- Patient may not feel her best due to physical symptoms

How patients can make shared decision making happen?

1 – Ask

2 – consider taking time to review and articulate your own priorities ahead of time.

Your experience as a patient and priorities are part of the information needed

SDM Domains: The 3 Ds

