PhD Research Study: 2020-2023.

'The psychosocial experiences and needs of oropharyngeal (HPV+ve) cancer patients and their primary informal caregivers following radical (chemo)radiotherapy'.

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Summary of planned research

Background

Oropharyngeal cancer incidence continues to increase in the UK, commonly linked to the prevalent human papillomavirus (HPV) and typically occurring in middle age (40-55 years). Although often locally advanced at diagnosis it is responsive to (chemo)radiotherapy but quality of life after treatment is frequently poor due to the complex clustering and interplay of physical and psychosocial consequences (e.g., pre-treatment dental extraction, changes to saliva, difficulty swallowing and feeding tube placement). A lack of awareness surrounding HPV and an individual's knowledge of their own HPV status and its meaning, contribute to distinct psychosocial needs.

Research Aim

This research study will explore the psychosocial experiences and unmet needs of oropharyngeal cancer patients and their primary informal caregivers following (chemo)radiotherapy. During the early recovery phase, the daily support from the radiotherapy department is no longer available whilst acute side effects peak and patients anxiously await a response assessment PET-CT scan. The experiences described will be used to inform the development of a supportive intervention.

PPI work, alongside clinical collaboration, has confirmed the need for this research and provided valuable guidance in the study's development. A meta-ethnography of oropharyngeal cancer patients' psychosocial experiences following (chemo)radiotherapy is on-going.

Method:

A qualitative, interpretivist approach using semi-structured interviews will enable an in depth understanding of the separate experiences of patients and their caregivers and identify the self-management strategies used. Socio-demographic data will be collected, and 'Quality-of-life' will be measured using a validated tool.

Thematic analysis of transcribed interviews will inform the Co-design of a potential support intervention for self-management following treatment with past patients, caregivers and healthcare professionals.