

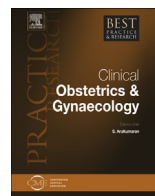


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Counselling pregnant women with cancer



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Cancer during pregnancy represents a psychological and biological dilemma, as treatment should be directed to save two lives: the mother and the foetus. As a result of diagnosis and treatment, each patient will experience a range of practical, psychological and emotional challenges. Using a multidisciplinary approach, health professionals trained with communication skills can help reduce patient and family distress. It is essential that the obstetrician, oncologist and psychotherapist take leading roles. The patient and the family should be actively involved in the decision-making process. This will enhance confidence and support.

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Introduction

Counselling can be considered as a method of psychotherapy that addresses the emotional behaviour and certain specific concerns about an event or a process. The fundamental principle of counselling in medical practice is that it should be patient centred [1] giving due consideration to the patient's concerns, ideas, suggestions and wishes. Counselling is always challenging, and counsellors need special training in communication skills to perform this task.

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Diagnosis of cancer during pregnancy is an unexpected traumatic event for the patient and her family. During this overwhelming situation, it is vital to remain hopeful [2]. In this context, a multi-disciplinary team of experts should conduct counselling including obstetricians, oncologists and paediatricians. The team should offer sufficient reassurance about the optimal treatment from the respective disciplines.

Studies do not substantiate the common belief that pregnancy shortly before, during or soon after the diagnosis of cancer worsens the prognosis or chances of recurrence [3,4]. Despite the lack of scientific evidence, the fear that pregnancy could cause a recurrence is common among women with cancer, regardless of the cancer type [5,6].

The treatment for cancer during pregnancy is complicated, and it must take into account potential risks to the foetus through surgery, chemotherapy or radiation.

Incidence

Approximately one in every 1000 pregnancies are complicated by a malignancy. This includes women who are already pregnant, and those who have delivered within 12 months of diagnosis.

The incidence of cancers of the cervix, breast and thyroid are higher because of its association with young age, and women are delaying childbearing. Metastasis of maternal cancer to the placenta and foetus is extremely rare [7]. The foeto-placental unit is thought to serve as an anatomical and functional barrier. Melanoma is the only tumour whose growth appears to be enhanced by pregnancy.

Management

Breaking bad news

Receiving bad news is painful to any patient. Table 1 summarises the essential steps in breaking bad news [8].

The physician's dilemma in this situation is challenging as the management involves two persons: the mother and the foetus. Although treatment modalities and timing are individualised, the obstetrician and oncologist should offer optimal maternal therapy while maintaining the foetal well-being [9]. Breaking bad news should always include information on the ongoing pregnancy and impact of the disease on the mother and the baby [10]. This helps to relativise possible unrealistic concepts.

Coping with the diagnosis

Experiencing conflicting emotions of happiness being pregnant and fear of life can be very challenging at the time of diagnosis. Questions that are emotionally based are sometimes difficult to answer. Assistance from the family including the partner is vital. In this context, it is vital to consider

Table 1
Guidelines for breaking bad news.

Assess the mentality of the patient
Ensure privacy
Take adequate time to assess the situation
Be honest
Provide accurate information
Show empathy
Arrange family members to be present
Provide evidence-based treatment options
Inform about other supportive services
Clearly indicate that the patient has the final decision regarding their care
Briefly explain the process by which the diagnosis was reached
Provide varied methods to convey the information, for example, written material, video

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