



## Delay in seeking medical evaluations and predictors of self-efficacy among women with newly diagnosed breast cancer: A longitudinal study



Hsiu-Ju Chang<sup>a,1</sup>, Wen-Xiang Chen<sup>b,2</sup>, Esther Ching-Lan Lin<sup>c,3</sup>,  
Yuk-Ying Tung<sup>d,4</sup>, Susan Fetzer<sup>e,5</sup>, Mei-Feng Lin<sup>c,\*</sup>

<sup>a</sup> College of Nursing, Taipei Medical University, No. 250, Wu-Hsing Street, Taipei 110, Taiwan, ROC

<sup>b</sup> Department of Nursing, St. Mary's Medicine, Nursing and Management College, No. 100, Lane 265, Sec. 2, Sanxing Rd., Sanxing Township, Yilan County 26644, Taiwan, ROC

<sup>c</sup> Department of Nursing, National Cheng Kung University, No. 1, Tai-Hsueh Road, Tainan City 701, Taiwan, ROC

<sup>d</sup> Institute of Education, National Cheng Kung University, No. 1, Tai-Hsueh Road, Tainan City 701, Taiwan, ROC

<sup>e</sup> Department of Nursing, University of New Hampshire, Durham, New Hampshire, 217 Hewitt Hall, 4 Library Way, Durham, NH 03824, United States

### ARTICLE INFO

#### Article history:

Received 20 December 2012

Received in revised form 31 October 2013

Accepted 31 October 2013

#### Keywords:

Breast cancer

Patient delay

Longitudinal study

Spiritual support

Psychological distress

Self-efficacy

### ABSTRACT

**Background:** Delaying a diagnosis of breast cancer directly and positively impacts survival. Self-efficacy has been shown to be a causal mechanism in a wide range of health behaviors, a measurable trait that predicts behavior across domains, which is strong associated with psychological variables. However, factors predicting self-efficacy of women with suspected breast cancer who delayed or did not delay seeking a breast cancer diagnosis over time have not been identified.

**Objectives:** To examine the differences between women who delay and women who did not delay seeking a cancer diagnosis, and key factors predicting self-efficacy over time among women with newly-diagnosed breast cancer.

**Design:** Descriptive, longitudinal design over 2 months following breast cancer diagnostic evaluation.

**Setting:** A medical center is located in southern Taiwan.

**Participants:** Eighty women with suspected breast cancer were approached and 67 subjects with a positive diagnosis of breast cancer were recruited.

**Methods:** Subjects were categorized into women who delayed their diagnosis and women who did not delay their diagnosis. A battery of 5 standardized questionnaires including self-efficacy, anxiety and depression, personality, spiritual support and hope was completed at the first three clinic visits.

**Results:** Stage of cancer, trait extroversion/neuroticism and spiritual support were significantly different between groups ( $p < 0.05$ ). Subjects who did not delay ( $\beta = -1.613$ ,  $p < 0.05$ ), and time that histology results were provided ( $\beta = -2.4333$ ,  $p < 0.001$ ) had a significantly predicted negative change in self-efficacy compared to the group that

\* Corresponding author. Tel.: +886 6 2353535x5035.

E-mail addresses: [hsiju@tmu.edu.tw](mailto:hsiju@tmu.edu.tw) (H.-J. Chang), [wenxiang@smc.edu.tw](mailto:wenxiang@smc.edu.tw) (W.-X. Chen), [chinglan@mail.ncku.edu.tw](mailto:chinglan@mail.ncku.edu.tw) (E.-L. Lin), [l30mf@mail.ncku.edu.tw](mailto:l30mf@mail.ncku.edu.tw), [z8108220@email.ncku.edu.tw](mailto:z8108220@email.ncku.edu.tw) (M.-F. Lin).

<sup>1</sup> Tel.: +886 2 27361661x6309.

<sup>2</sup> Tel.: +886 3 9897396x600.

<sup>3</sup> Tel.: +886 6 2353535x5038.

<sup>4</sup> Tel.: +886 6 2757575x56229.

<sup>5</sup> Tel.: +1 603 428 7153.

delayed. Hope at the first clinic visit contributed to the change in self-efficacy over time ( $\beta = 0.391, p < 0.001$ ).

**Conclusions:** Personal factors affecting a woman's delay in obtaining medical assessment of breast cancer confirmation. Hope impacts self-efficacy of women with suspected breast cancer and interventions to enhance hope during the early stages of breast cancer evaluation require further study.

© 2013 Elsevier Ltd. All rights reserved.

### What is already known about this topic?

- Delaying the diagnosis of breast cancer directly and positively impacts survival.
- Women who have difficulty facing the possibility of a cancer diagnosis following discovery of breast abnormality.
- Self-efficacy has been shown to be a causal mechanism in a wide range of health behaviors that predicts behavior across domains.

### What this paper adds

- Findings provide directions to nurses when evaluating patients' self-efficacy during the period from suspected breast cancer to a confirmed cancer.
- Taiwanese women who delay a breast cancer evaluation have a decreased self-efficacy after surgery while women who do not delay have an increased self-efficacy after surgery.
- Hope at the first physician visit is a key factor that predicts the change of self-efficacy. Anxiety negatively impacts self-efficacy, particularly in those that do not delay.
- Spiritual support and personality trait are key variables in the delay of Taiwanese women to confirm a breast cancer abnormality. Healthcare avoidance may reflect the spiritual belief and medical-seeking with cultural differences between the East and West.

## 1. Introduction

The crisis level in the worldwide breast cancer incident rate is indicative of a severe problem. Breast cancer has been recognized as the most commonly diagnosed cancer in the U.S. and the second leading cause of cancer deaths (American Cancer Society, 2007). Similarly, in Taiwan, breast cancer has been ranked as the fourth leading cause of cancer-related deaths. Twenty-two women are diagnosed and 5 women die of breast cancer every day in Taiwan (Bureau of Health Promotion, 2009).

The enormous psychological impact of suspicious signs of breast cancer in women has been extensively explored. A series of examinations including mammography, fine-needle biopsy, and core-needle biopsy are performed and require approximately 1–2 weeks in Taiwan's healthcare system. Once the physician has confirmed the breast cancer diagnosis and stage, further surgery is scheduled, and the treatment regimen is arranged. However, fear of painful or invasive procedures, high anxiety and distorted perceptions are barriers to the completion of mammography for women with breast abnormalities (Wujcik and Fair, 2008).

The international definition of health care “delay” is not consistent; Unger-Saldana and Infante-Castaneda (2009) categorized conceptual definitions and reasons presented in prior studies including delay by patients and delay by providers. Diagnostic delay was defined as the elapsed time interval between the first symptom and the medical diagnosis. Patient delay in seeking a cancer diagnosis, which describes patients who wait to obtain medical care between the time the breast abnormality was identified and the time initial care was sought, is the focus of the present study.

Fear of finding cancer has been mentioned by both breast cancer survivors and cervical cancer survivors as a significant barrier to seeking diagnostic care (Ashing-Giwa et al., 2010). The average delay in breast cancer diagnosis between the first visit for breast cancer-related symptoms and the time of diagnosis was 27.8 days in a sample from central Taiwan (Shieh et al., 2013). However, few studies have addressed the factors affecting the delay in seeking diagnostic evaluation from the first medical visit to the confirmation of cancer stage.

Approximately 84% of Taiwan's women with a breast lump or suspicion of breast cancer discovered by mammography are married (Liao et al., 2008). Women with confirmed breast cancer in Taiwan think about their significant others first (Fang et al., 2011) and believe that fate is predetermined with the principle of maintaining harmony between personal and family needs. Before seeking medical care, the obligations of childbearing and family care must be maintained, as married women view themselves as a member of their spouse's family (Kagawa-Singer and Wellisch, 2003). As such opinions of others are crucial considerations and may contribute to the ambivalence that many women with suspected breast care in Taiwan have about whether and when to seek diagnostic evaluation.

Although numerous studies have addressed the diagnostic delay among women with breast cancer, most have aimed to examine the factors related to diagnostic delay, including pathological, psychological and personal attributes, using cross-sectional designs. Relatively little research has explored specific factors related to delay in seeking cancer evaluation using a longitudinal design. In those studies that do explore specific factors, diagnosis delay has been associated with older age, milder symptoms, fear of informing anyone, negative attitudes toward medical practitioners (Bish et al., 2005), positive lymph nodes, high incidence of late-stage and metastatic disease (Ermiah et al., 2012), and less knowledge or education (Eaker et al., 2009). Therefore, the earlier the cancer is detected, the better the prognosis and the higher the survival.

Download English Version:

<https://daneshyari.com/en/article/1076354>

Download Persian Version:

<https://daneshyari.com/article/1076354>

[Daneshyari.com](https://daneshyari.com)