

Original Article

Patients' Sense of Security During Palliative Care—What Are the Influencing Factors?

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Abstract

Context. Having a sense of security is vitally important to patients who have a limited life expectancy.

Objectives. We sought to identify the factors associated with patients' sense of security during the palliative care period.

Methods. We recruited 174 adult patients (65% of those eligible) from six palliative home care units. The relationship between the patients' sense of security during palliative care and individual factors was evaluated in a stepwise procedure using the generalized linear model (ordinal multinomial distribution and logit link).

Results. Respondents' ratings of their sense of security ranged from 1 (never) to 6 (always), with a mean value of 4.6 (SD 1.19). Patients with lower feelings of security experienced higher stress; more worry about personal finances; lower feelings of self-efficacy; a lower sense of security with the palliative care provided (lower ratings on subscales of care interaction); mastery; prevailed own identity; higher symptom intensity (especially depression, anxiety, and lack of well-being); lower health-related quality of life; lower attachment anxiety and avoidance; less support from family, relatives, and friends; lower comfort for those closest to them; and more often had gynecological cancer. Six variables (mastery, nervousness and stress, gynecological cancer, self-efficacy, worrying about personal finances, and avoidance) were selected in building the stepwise model.

Conclusion. These findings stress the importance of palliative care services in supporting dying patients' sense of security through symptom management with a wide scope and through supporting the patients' sense of mastery, identity, and perception of a secure care interaction and also through attention to the family members' situation. *J Pain Symptom Manage* 2014;48:45–55. © 2014 U.S. Cancer Pain Relief Committee. Published by Elsevier Inc. All rights reserved.

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Accepted for publication: August 31, 2013.

Key Words

Sense of security, palliative, patient, mastery, stress, attachment, social support, quality of life

Introduction

Death and dying are situations that cause suffering, and there is robust evidence that having a sense of security is vitally important to patients with a limited time left to live.^{1–5} Patients' sense of security in palliative care actually has been recommended as a vital endpoint of cancer care,⁶ and research has indicated that this sense of security can be facilitated in palliative care, for example, by patients trusting the staff's availability and competence to provide symptom relief;^{2,3,5,7} when patients feel recognized as individuals and welcome to contact the team in times of need;⁵ by patients being informed;^{5,7} and when patients can remain at home and continue with everyday life despite severe illness.^{3,5} The patient's perception of the care interaction (with the palliative care team) and the patient's feelings of mastery and maintained identity despite severe illness also seem important: these aspects constitute the three-factor solution that presented the best model of fit for patients' sense of security with palliative care in the development of an instrument designed to measure this.⁸

Despite a growing focus on the importance of patients having a sense of security and research suggesting that palliative care teams can foster this,^{2,7} there is a lack of quantitative studies reporting aspects associated with patients' sense of security during palliative care. To further improve palliative care and help reduce patient suffering, it is important to determine what aspects are associated with patients feeling secure or insecure to help practitioners identify individuals at risk for feeling insecure and plan a course of action. We wanted to determine what made patients feel secure or insecure during palliative care.

The goal of the present analyses was to study what variables are associated with patients' feelings of security during the palliative care period and develop a model to predict patients' sense of security during this period of care. We hypothesized that the sense of security in patients receiving palliative care, who

were considered to be dying during the coming months, would be related to their demographic characteristics (e.g., female gender, older age), diagnosis (e.g., cancer), health-related quality of life, perceived support from family and friends, coping, self-efficacy, and attachment security and would be inversely related to symptom intensity and perceived levels of stress.

These hypotheses were based on previous findings in the literature suggesting that patients' sense of security in palliative care or in advanced cancer care settings is associated with female gender,⁶ older age,⁶ having cancer,⁶ comfort and symptom relief,^{4,7} perceived quality of the palliative care received,^{3,5,7} and patients' perceptions of their relatives' situations.⁵ We also hypothesized that social support, stress, coping, and attachment security would be associated with patients' sense of security because these aspects have been reported as important to patients in palliative care.^{9–11}

Methods*Participants and Eligibility*

Participants were recruited from six palliative home care units. Three of the units were advanced palliative home care teams (with a multidisciplinary team including a physician, 24-hour services, and access to a back-up ward) and three were primary care-based teams with a palliative care consultant and a specialist nurse available during the daytime.

The patients were all in a palliative stage of their disease. They had been diagnosed with a non-curable disease with an expected short survival, such as patients with disseminated cancer or a nonmalignant diagnosis (e.g., severe heart failure, severe lung disease, or fatal neurological diseases). All patients were older than 18 years. Patients were excluded if they had cognitive failure/confusion, were too weak to participate, had speech and/or hearing problems, or were not able to speak and understand Swedish.

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