

OVERVIEW: Following the roll out of previous MILC initiatives, it was identified that many specific needs of patients with ABC/mBC were not being met. This standardised psychoeducational intervention was developed to assess and improve patient understanding of their disease, allowing them to actively participate in decision-making processes and ultimately improve QoL.



Area of focus:

Educating patients & HCPs about ABC/mBC



Target population:

Mexican women ≥ 18 years with de novo or recurrent ABC/mBC

Objectives: Improve patient-physician communication, resulting in better patient understanding of their disease. Promote the use of supportive and integrative care services to enhance QoL of patients with ABC/mBC and incorporate the intervention systematically into routine ABC/mBC care in Mexico

Unmet needs addressed:

- Communication challenges between HCPs and patients (difficult finding the balance of honesty & hope)
- Suboptimal patient understanding of their disease stage, treatment goals and prognosis
- No standardised model of care to increase patient knowledge and participation in decision making

Key components:

- Assessment of patient understanding and desire for information on prognosis, followed by education and with an oncologist and psycho-oncologist (with the aid of a specially-designed video). Finally, a repeat of the self-efficacy and knowledge questionnaire to assess learnings

Challenges: Ensuring the initiative was useful for patients, as well as convenient/ helpful for oncologists

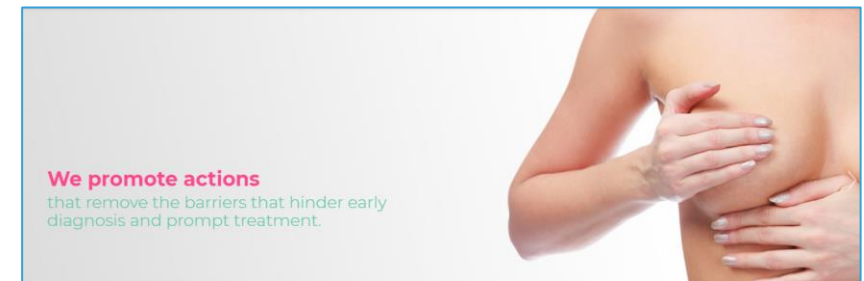
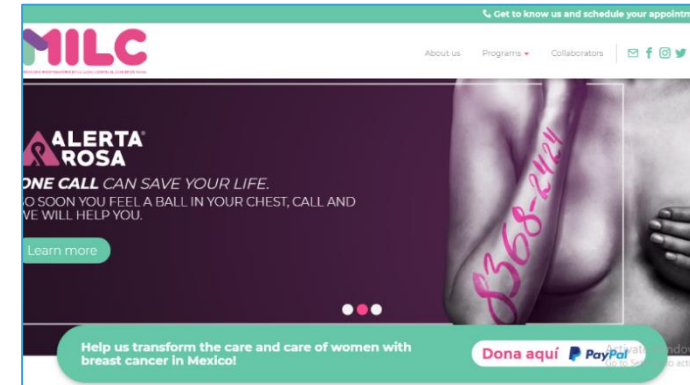
Outcomes: This initiative has reached ~50 patients and resulted in increased awareness of their disease stage, treatment options and objectives, with high levels of patient-reported satisfaction

Development: The initiative was developed by a team of medical oncologists, 2 psycho-oncologists and 2 research assistants, as well as a production team to develop the video

Cost: €10,000–€30,000 (video production funded by SPARC mBC grant and top-up grant)

Timeline: 10 months (2019–2020)

Targeted to reach: 150–300 patients



For more information:

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Ethnic, religious, indigenous/native population and/or other minorities



Low income patients



Older patients



Rural patients



Low health knowledge patients