The Role of Oncology Nurses in Discussing Clinical Trials

Susan A. Flocke, PhD, Elizabeth Antognoli, PhD, MPH, Barbara J. Daly, PhD, RN, FAAN, Brigid Jackson, MA, Sarah E. Fulton, MA, Tasnuva M. Liu, BS, Jessica Surdam, MPH, Sharon Manne, PhD, and Neal J. Meropol

Purpose/Objectives: To describe oncology nurses’ experiences discussing clinical trials with their patients, and to assess barriers to these discussions.

Research Approach: A qualitative study designed to elicit narratives from oncology nurses.

Setting: Community- and academic-based oncology clinics throughout the United States.

Participants: 33 oncology nurses involved in direct patient care in community-based and large hospital-based settings. The sample was drawn from members of the Oncology Nursing Society.

Methodologic Approach: In-depth interviews were conducted and analyzed using an immersion/crystallization approach to identify themes and patterns. The analyses highlight specific issues, examples, and contexts that present challenges to clinical trial discussions with patients.

Findings: Oncology nurses view their roles as patient educators and advocates to be inclusive of discussion of clinical trials. Barriers to such discussions include lack of knowledge and strategies for addressing patients’ common misconceptions and uncertainty about the timing of discussions.

Interpretation: These data indicate that enabling nurses to actively engage patients in discussions of clinical trials requires educational interventions to build self-efficacy and close knowledge gaps.

Implications for Nursing: Oncology nurses can play a critical role in advancing cancer care by supporting patients in decision making about clinical trial participation. This will require training and education to build their knowledge, reduce barriers, and increase their self-efficacy to fulfill this responsibility in various clinical settings.

Cancer clinical trials (CTs) reveal new ways to prevent, diagnose, and treat patients with cancer, and provide effective supportive interventions for patients and their families. In addition, studies of new treatment regimens can provide participants with early access to promising interventions. Although CTs provide the evidence base for clinical practice, less than 10% of patients with cancer participate in them (Al-Refaie et al., 2011; Institute of Medicine, 2010; Murthy, Krumholz, & Gross, 2004; Unger et al., 2013). Various reasons explain why enrollment in trials is so low, but a common reason is because patients do not know the studies were an option for them (American Cancer Society, 2016). In addition, a variety of patient knowledge gaps and attitudes exist, including concerns about risks that may impede participation (Manne et al., 2015; Meropol et al., 2007, 2016).

A National Cancer Institute and American Society of Clinical Oncology symposium that focused on CT accrual revealed that improving provider communication with patients was an effective way of increasing patient participation.