FACTORS ASSOCIATED WITH TREATMENT AND CONTROL SUSTAINABILITY AMONG PATIENTS WITH LUNG CANCER

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ABSTRACT

Background: Treatment and control program for patients faces a mutual challenge like non-adherence. Non-adherence is a multifaceted concept. The focus may be not only on taking drugs but also on timing, discontinuation, and persistence. Non-adherence is also affected by patient–provider relationship as well as systemic-organizational factors. This study aimed to explore factors associated with the sustainability of treatment and control program among patients with lung cancer, using Uncertainty Management Theory (UMT).

Subjects and Method: This was a qualitative study with phenomenology approach carried out at RA. Kartini Hospital, Jepara, Central Java. A sample of 22 patients who were diagnosed with lung cancer was selected for this study. The dependent variable was treatment and control sustainability. The independent variables were doctor's response, clarity about treatment, waiting time, consultation time, consistency of information, bureaucracy, distance, and income. The data were collected by in-depth interview and analyzed by thematic analysis.

Results: Overall, patients were satisfied with the doctor's response to questions, clarity about treatment options, length of time spent with each physician, and consistency of information clinicians. The complexity of bureaucracy, long waiting time, dimension of interval, and the distance traveled to complete each stage of treatment, affected the sustainability of treatment and control program. These things were trigger the uncertainty of the patient. This study also found that patients who were uncertain about their illness chose to avoid treatment and control, and thereby tended to be non-compliant with the clinical guideline. Patients were also concerned with the travel cost to get treatment and examination. The health insurance also has limited coverage of the costs.

Conclusions: Patients diagnosed with lung cancer decide not to continue treatment because of the complexity of bureaucracy, distance, long waiting time, prolonged treatment procedure, and travel cost.

Keywords: lung cancer, treatment and control program, sustainability, patients

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