

Role of Caregiver Support in Head and Neck Cancer Patients Undergoing Surgery

Introduction

- Head and neck cancer is associated with significant morbidity given the tumor location and treatment involved, often associated with morbidity and overall quality of life.
- Informal caregiver support is known to have implications on seeking treatment and a patient's long-term outcomes.
- The purpose of this study is to identify the impact of caregiver support in patients undergoing surgical treatment for head and neck cancer, in order to raise awareness and enable early engagement of additional resources in a patient centric manor.

Methods

- A retrospective review of patients with head and neck cancer undergoing surgical treatment was performed.
- Patients who were seen by social work for an initial assessment following surgery were included in the analysis and separated into two groups based on the presence of a caregiver other than self.
- Patients with precancerous lesions or incomplete records were excluded from the study.
- Clinical information including tumor and surgery type, demographic information and social history was obtained and a descriptive analysis was performed.

Results

- 91 patients: 78 (85.7%) patients in the caregiver present group and 13 (14.3%) patients in the caregiver absent group.
- No significant difference in terms of age or race between groups ($p > 0.05$).
- For patients where staging information was available, 75.0% of patients ($n=6$) without a caregiver presented with stage III/IV disease compared to 51.0% of patients ($n=28$) with a caregiver. (**Figure 1**)
- Distribution of cancer sites is detailed in **Figure 2** and type of caregiver in **Figure 3**.
- Average hospital length of stay for patients after surgery in the caregiver absent group was 19.8 (SD=25.3) compared to 11.6 (SD= 12.4) for the caregiver present group.
- 23.1% ($n=3$) of patients in the caregiver absent group were being treated for recurrent disease compared to 8.9% ($n=7$) in the caregiver present group.

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Figure 1. Cancer Staging Based on Caregiver Status.

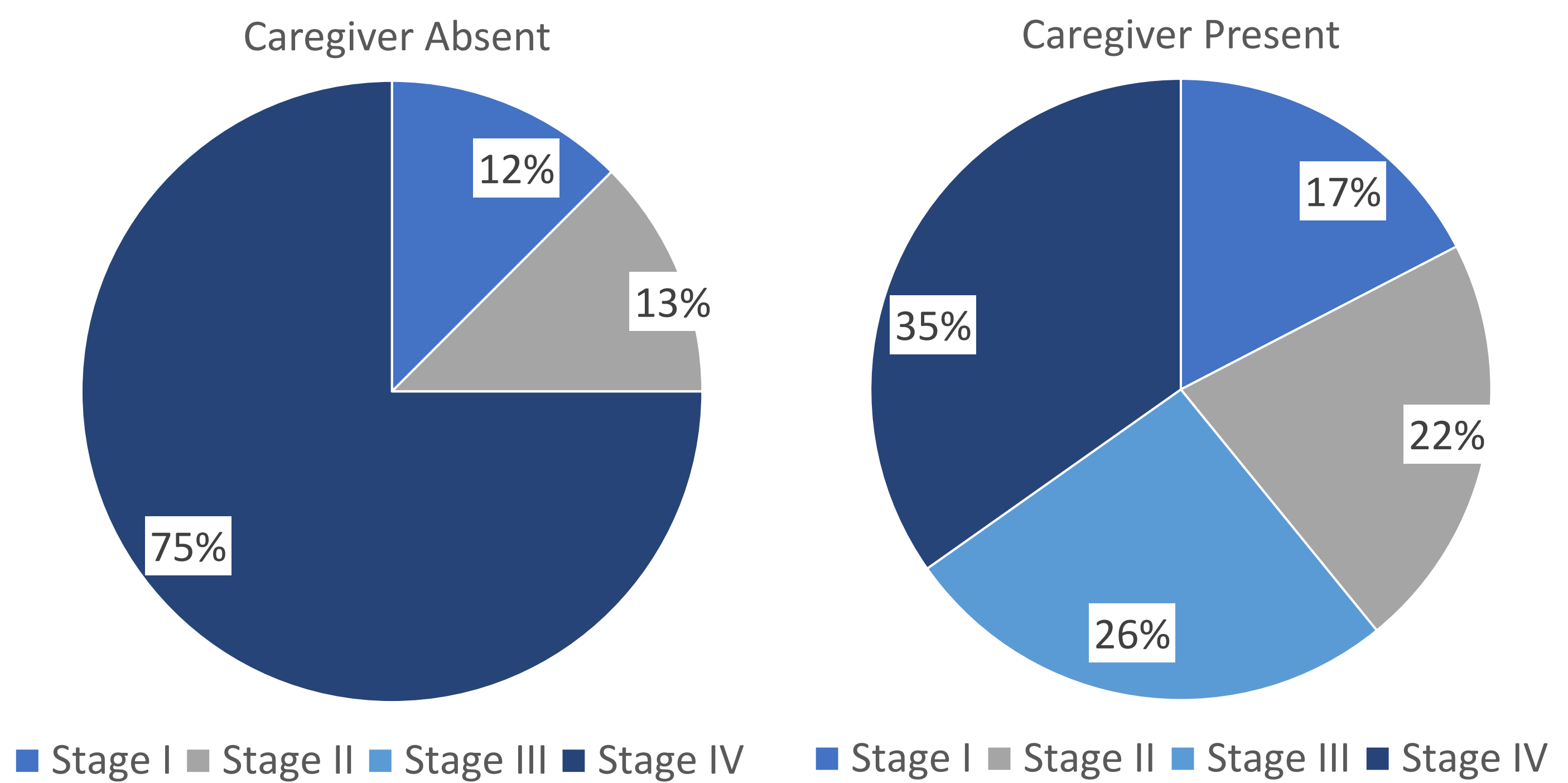


Figure 2. Distribution of cancer sites.

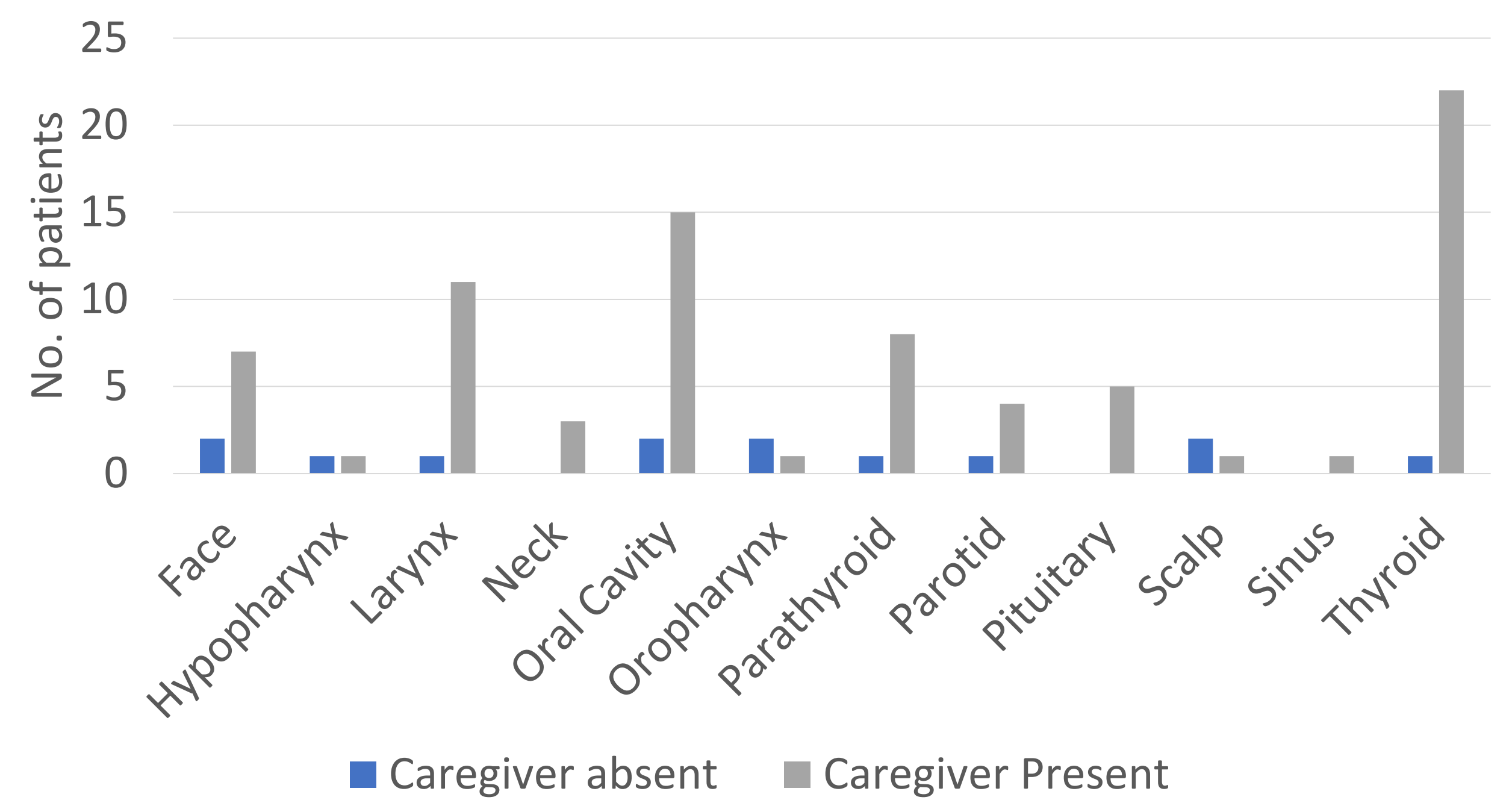
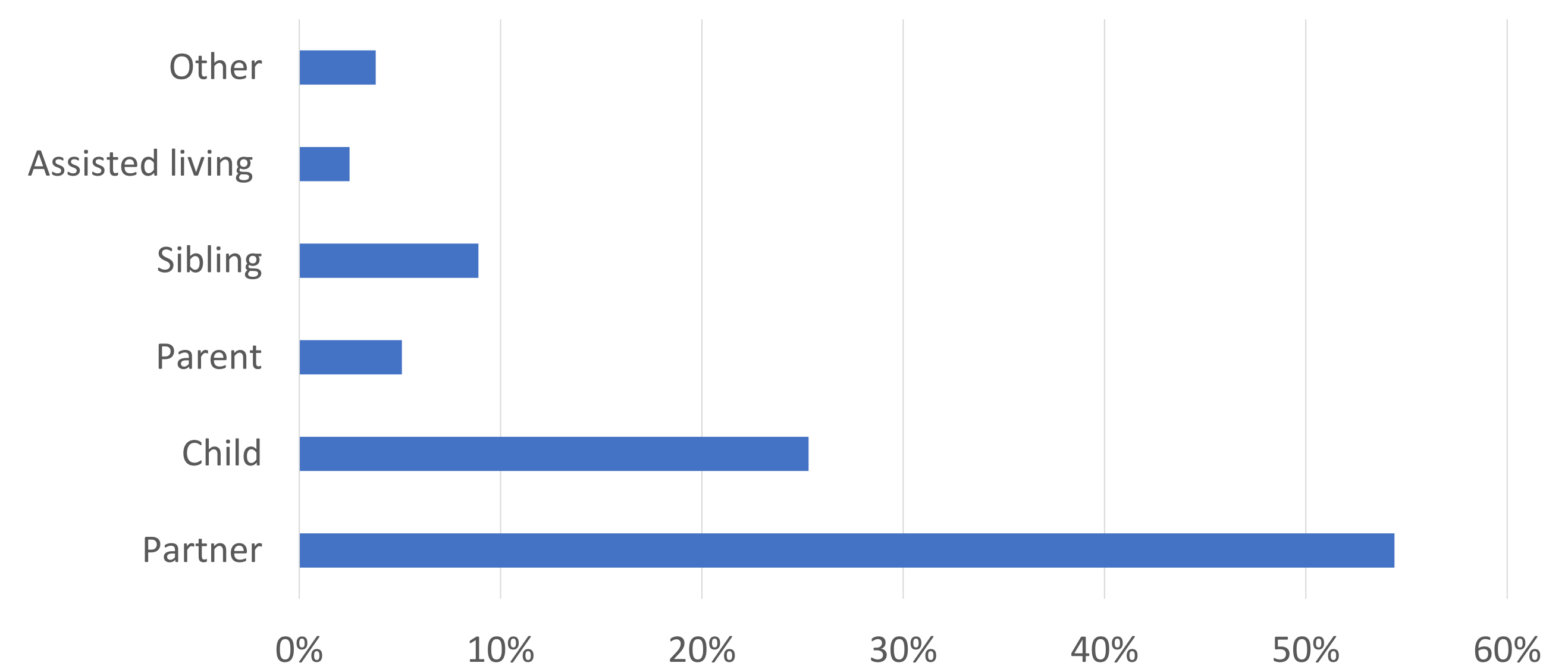


Figure 3. Caregiver Identity.



Conclusions

- Lack of caregiver support may be associated with presentation at an advanced stage of head and neck cancer and with a history of comorbid or recurrent disease, signifying that care for these patients needs to be further optimized.
- Further study is needed to analyze the role of proactive caregiver education, and screening strategies for at-risk groups that are without caregiver support.

References

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