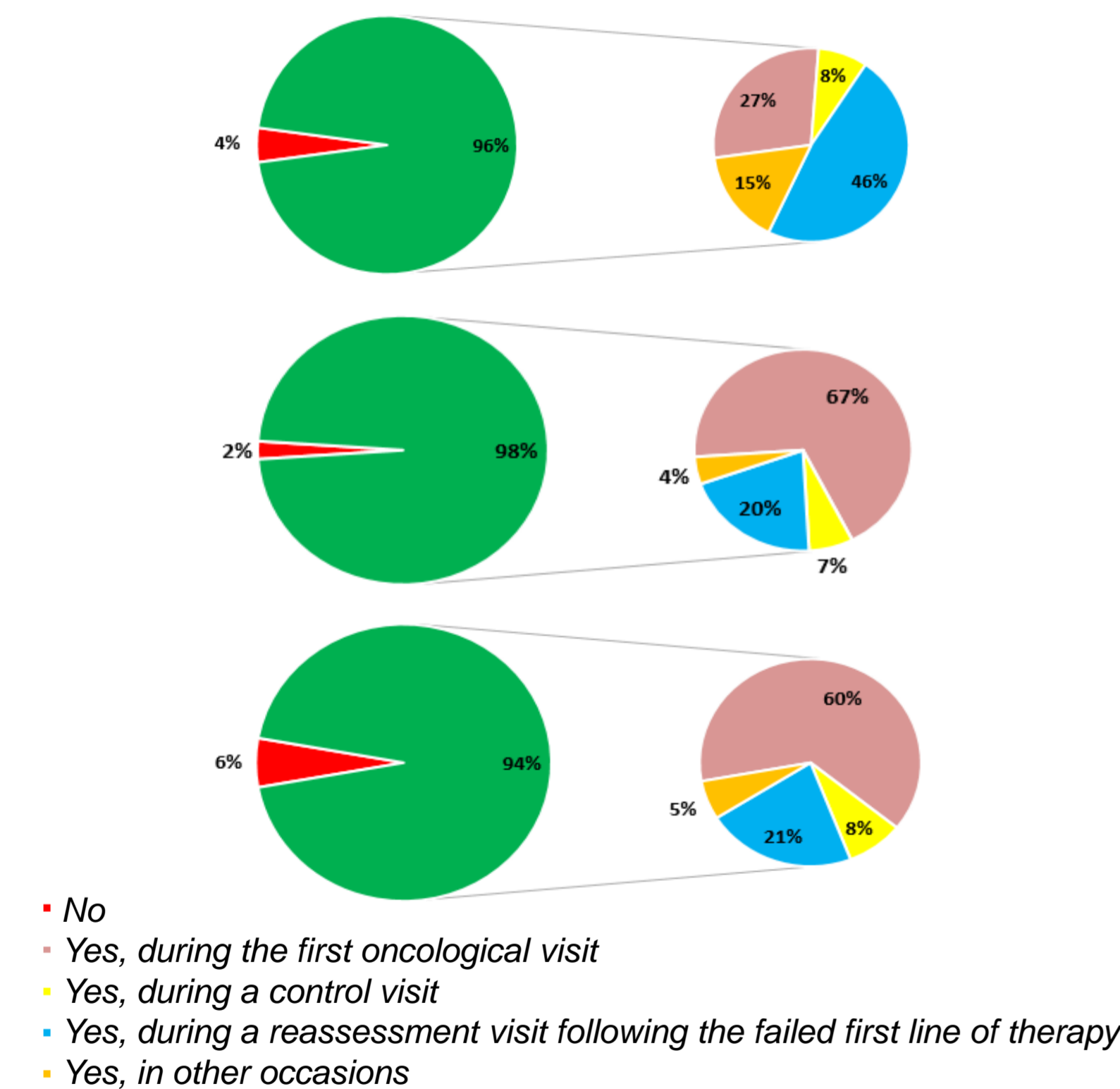


FPN: 458P

## Background

Communication is a complex process (1); an effective communication requires a two-way relationship between patients (pts) and healthcare providers (hp) (2). The areas of communication concern diagnosis, prognosis and treatment. In this context, a tailored communication approach is suggested to keep pts involved in the clinical decision-making process (3).

Figure 2. The discussion of patients' prognosis



## References

1. MA. Annunziata et al, Ann N Y Acad Sci 1997
2. A. Costantini et al, J Cancer Educ 2009
3. L. Grassi et al, Adv Psychosom Med 2015

No conflict of interest that could have influenced the study can be declared for any of the authors

## Methods

Between 21 June and 4 October 2022, a 38-question web survey, promoted by the IncontraDonna Foundation and carried out in collaboration with both the Italian Society of Psycho-Oncology (SIPO) and the Italian Association of Medical Oncology (AIOM), was sent to oncologists members of AIOM. The aim of this study was both to investigate how and how much oncologists communicate with metastatic breast cancer pts (mBCp) and to probe clinicians' opinions and needs.

Figure 3. The presence of a caregiver

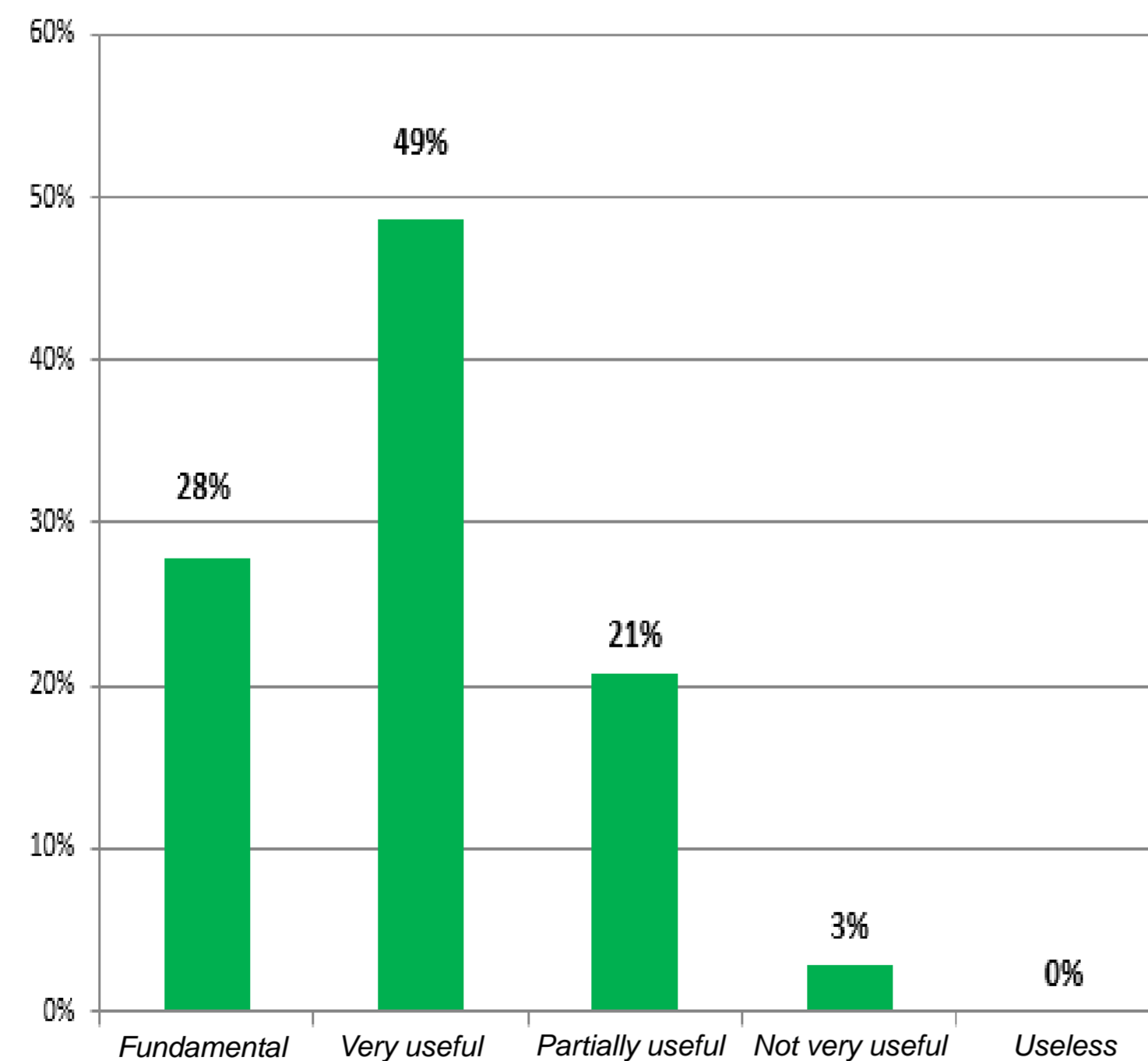


Figure 1. Geographic distribution of responders

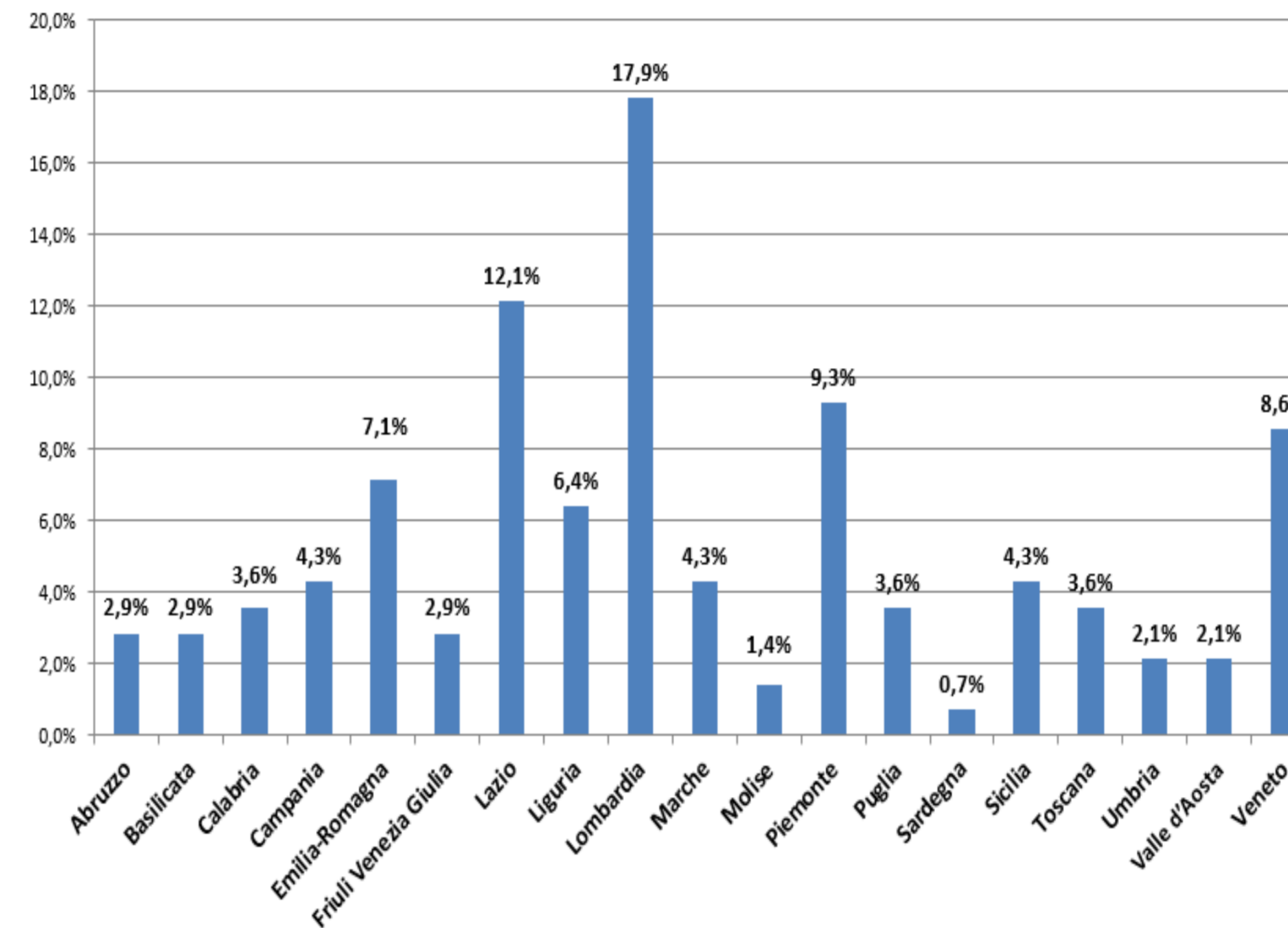
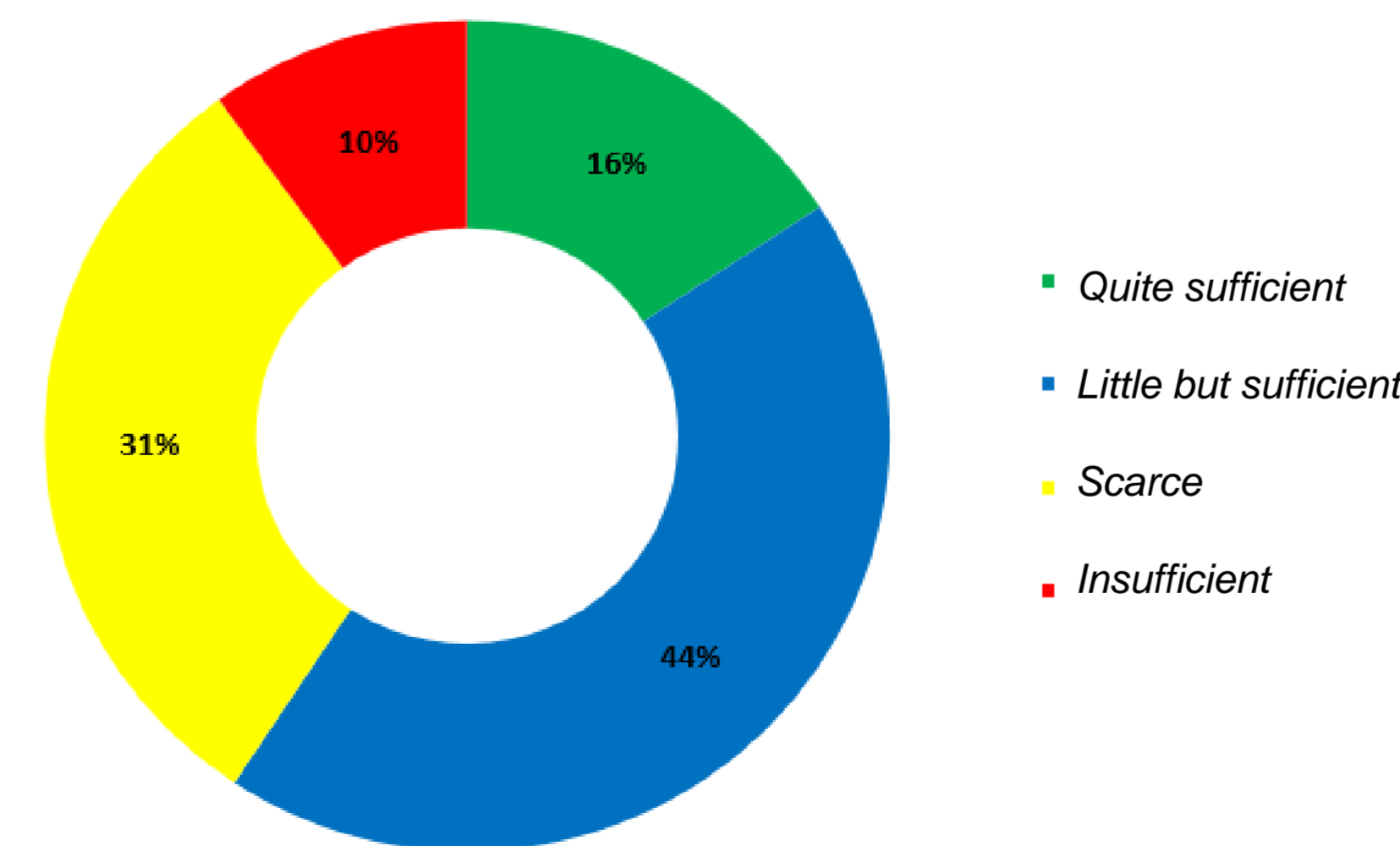


Figure 4. The time dedicated to doctor-patient communication



## Results

140 oncologists from 19 Italian regions participated in the survey (Figure 1).

Responders reported discussing prognosis (Figure 2) with their mBCp both in terms of (a) residual life (96%), (b) goals of care (98%) and chance of (c) treatment response (94%), in the last two cases especially at the time of the first oncological visit (67% and 60%, respectively).

As many as 93% of responders stated that they investigate the degree of understanding of the information provided.

In communicating the prognosis, 49% of responders considered the presence of a caregiver "very useful" and 61% considered her/his absence "very disadvantageous" (Figure 3).

About the organization of one's department, the time dedicated to doctor-patient communication was considered "quite sufficient" in 16%, "little but sufficient" in 44%, "scarce" in 31% and "insufficient" in 10% of cases (Figure 4).

In 89% of cases the presence of a psycho-oncology service was reported, to which mBCp would be referred regularly in only 14% of cases.

Specific training courses for hp (69%) and periodic meetings with expert psycho-oncologists (59%) are the improvement actions most requested by clinicians.

## Conclusions

The results of this survey highlighted heterogeneity in the management of communication in mBCp across the Italian country. Although the figure of the psycho-oncologist is considered important, its integration into the therapeutic process still appears complex.

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