

XVIII CONGRESSO NAZIONALE AIOM

Roma, 28-30 ottobre 2016
Marriott Park Hotel



13/05/2016 12.15.51

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Area tematica

Miscellanea

Titolo

Narrative Medicine: a multidisciplinary study on knowledge and application in oncology.

Testo

Background: Narrative-based Medicine (NM) is gradually entering into clinical practice. NM improves the relationships with the patients (P), enhances patients' adherence to the treatment and strengthens the alliance among health care professionals (HP).

Objectives: 1) to promote the NM knowledge in HP; 2) to improve mutual listening skills (LS) by encouraging HP, patients (P) and caregivers (C) to write their own experience with the disease and by sharing the stories.

Patients and Methods: target population were HP, P and C at the "Regina Elena" National Cancer Institute, Rome. From March to December 2015 the following were conducted: a) a survey on MN knowledge and attitude in HP; b) MN training courses for HP; c) promote writing about experience in HP, P, C (by posters, brochures, mail); d) collection and analysis of the stories; f) presenting results and story-sharing meeting. Text analysis: a mixed qualitative and quantitative method was used. Three oncologists, 1 nurse, 3 librarians independently analyzed each story by active reading. Themes (Ts), emotions (Es), metaphors (M), key (meaningful) words (KW) were extracted based on a standard schedule. All the Ts and Es were compared and grouped into categories.

Results: Scarce knowledge in NM, but a high interest in improving LS emerged. Thirty-two participants P (25), C (3), HP (4) (F/M:2.6; median age 56 yrs, range 33-83 yrs) provided 33 stories (tales, poetries, novels, diaries, letters). Phases of disease were: therapy (35%), diagnosis/symptoms (34%), follow-up (13%). Twenty-five T and 45 E categories were identified. Disease acceptance and life changes (19%), affections (16%), communication (9%), future (8%), cure acceptance (7%), cure relationships (5%), organization and social perspective (4%), were the prevalent Ts. Fear (14%), loneliness (9%), pain (8%), anger (6%), anxiety (6%), trust (6%), strength (5%), hope (5%), gratitude (5%), serenity (4%), refusal (3%) were the more common Es. KW/M: darkness, unknown, fighting, difficult journey, life on hold and uncertainty. Logistical/organizational flaws also emerged. The active meeting participation, careful listening, positive reactions showed the power of storytelling in reinforcing alliance.

Conclusions: Storytelling by improving LS and awareness of the difficulties of each other create community and reinforce therapeutic alliances. NM approach in oncology deserves to be adequately explored in order to be integrated in the routine clinical practice.

Parole Chiave

1. Narrative-based Medicine
2. Storytelling
3. Therapeutic adherence

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