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Background
• Lung cancer (LC) is the second leading cause of death & leading cause of cancer death in the U.S.
• Support & care is often provided by informal caregivers
• The extent and diversity of the caregiving experience may jeopardize psychological well-being
• Complementary and alternative medicine (CAM) approaches have been used in other populations to improve psychological well-being with promising outcomes.

Purpose
• Describe, examine relationships, and identify independent predictors of caregivers characteristics, and CAM attitudes and use in caregivers of patient with LC.

Methods
• Cross-sectional
• Descriptive, exploratory
• Inclusion:
  • ≥ 18 years old
  • Self-identified primary caregiver of patient diagnosed with LC
  • Patient has received treatment (chemo, radiation, surgery) in the past 12 months
  • Able to speak, read, and understand English
• Convenience sample
  • Word of Mouth (Los Angeles & Orange County)
  • Cancer Center: Social Worker Recruitment
  • Social Media
• 128 Questions Survey (Online)
• 25 Minutes
  • Demographics
  • Holistic and Complementary and Alternative questionnaire
  • Complementary and Alternative Medicine Usage Survey
  • $25.00 Gift Card
  • Descriptive, associations, and regression statistical analysis (SPSS)

Results
• 62 Participants
• Demographics
  • Mean age 37.9 (9.1), 53.2% Female, 54.8% White, 73.8% College Graduates, 71% Employed Full-Time, and 71% income ≥ $76,000
• Caregiver Characteristics
  • 40.3% Spouse, 85% live with patient, 90.3% cared for patient > 6 months, and 72.1% provided care > 4 hours/day
• CAM Use & CAM Attitudes
  • 93% used at least 1 CAM modality
    • Mean of 4.8 Modalities used per participant
    • 85.5% had positive attitudes toward CAM
• Associations
  • ↑ in CAM use & attitudes was associated with education, employment, & income.
  • ↑ CAM attitudes was associated with living with the patient
  • ↑ CAM use & ↑ attitudes associated
• Regression Analysis
  • Working full-time and living with the patient was positively associated with CAM attitudes (beta = -4.898, p = .003; beta = -6.048, p = .002), respectively. Age ≤ 39 years were negatively associated with CAM attitudes (beta = 3.173, p = .032).
  • Being a spouse to the patient and having an income ≥ $76,000 were positively associated with CAM use (beta = 2.179, p = .001; beta = 1.342, p = .041), respectively.

Discussion/Implications
• Study indicates that caregivers of patients with LC are using CAM and having positive attitudes towards CAM
• CAM resources should be provided as an option to caregivers
• Future research should explore CAM modalities as predictors of psychological well-being
• Studies that measure and test the effectiveness of CAM modalities
• Studies that measure duration and frequency of CAM use

References available upon request