

# 学位論文の要旨

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学位論文名 Cancer Care for People With Mental Disorders: A Qualitative Survey Among Cancer Care and Psychiatric Care Professionals in Japan

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## 論文内容の要旨

### INTRODUCTION

It is widely assumed that there are multiple levels (from individual to policy level) of problems involving disparities in cancer care for people with mental disorders. However, few studies have comprehensively investigated specific issues as perceived by medical professionals. The purpose of the present study was to identify a wide range of issues in cancer care for people with mental disorders and corresponding solutions for both cancer care professionals and psychiatric care professionals.

### MATERIALS AND METHODS

The present study used a qualitative design with an open-ended questionnaire. The study was approved by the institutional ethics committee of Okayama University, Japan (KEN 1901 - 023). The survey was conducted among medical/welfare professionals at both urban and rural institutions in Okayama Prefecture.

Participants were asked to describe issues in cancer care for people with mental disorders. We distributed open-ended questionnaires to 754 health care professionals in various medical facilities including designated cancer hospitals, psychiatric hospitals, and other local healthcare/welfare facilities.

Content analysis was performed on the descriptions in the questionnaire. The researchers first carefully reviewed the descriptions of issues, then divided them into basic blocks containing one opinion. Two researchers then coded a basic block containing the same content. Next, the researchers independently aggregated codes containing similar content as items. Three researchers, including the supervisor, discussed the items created until they agreed on the classification. Finally, the three researchers discussed and categorized the items. Subsequently, we analyzed the participants' descriptions of proposed solutions to cancer care disparities in a similar manner.

## **RESULTS AND DISCUSSION**

Of the 754 recruited professionals, 439 (58.2%) responded to the questionnaire. Sixty-one issues were extracted and categorized into 10 categories: patient factors; isolation and lack of support; obstacles to transport; socioeconomic factors; attitudes of psychiatric professionals; medical system of psychiatric hospitals; attitudes of cancer care professionals; medical system of designated cancer hospitals; regional cancer medical systems; and lack of coordination among multidisciplinary healthcare professionals. Forty-eight specific solutions were summarized into 12 goals.

The present study widely identified issues currently causing disparities in cancer care for patients with mental disorders in Japan. The results indicate that the issues extend from patient level to system level. The reported individual issues were highly diverse, suggesting the need for psychiatric assessment and individualized support for cancer care.

Several issues related to the stigma associated with mental disorders were identified in this study as issues among cancer care professionals. In addition, cancer care professionals have difficulty assessing/supporting patients' decision-making capacities and self-care abilities. However, cancer care professionals also face challenges that make it difficult to resolve the above issues, namely, finding time to communicate with patients and sharing information and coordinating with the patient's primary psychiatric care/welfare services.

The present study, the following attitudes were identified as challenges for psychiatric care professionals: lack of providing education for cancer prevention, and lack of encouraging to participate in cancer screening. The need for educating psychiatric care providers in physical health has been pointed out in previous reports. To change these attitudes, insufficient interest in and knowledge about cancer, which were also challenges identified in the present study, should first be addressed.

The present study identified the following issues broadly related to lack of social support: isolation and lack of support, obstacles to transport, and socioeconomic factors that limit opportunities to improve health and pose obstacles to receiving health care. These issues can be barriers in a variety of care settings, from cancer prevention to treatment. In

addition, several issues related to the fragmentation of mental and physical health care were identified. However, Japan lags in deinstitutionalization and community psychiatric services, and there are few general hospitals with psychiatric beds. Therefore, the issues related to fragmentation may be a particular challenge in cancer care of people with severe mental disorders in Japan. These points suggest the need for efforts not only at the level of individual medical professionals, but also at the level of medical facilities and policies, including the strengthening of collaboration among medical professionals.

A variety of solutions were proposed by participants in the present study to address cancer care disparities at the provider, system, or public policy level. For example, proposed efforts at the level of cancer care professionals included the early identification of cancer patients with comorbid mental disorders and the provision of cancer treatment through collaboration among family physicians, multi-disciplinary professionals, and family members. To provide such support, the current findings suggest the necessity of utilizing and expanding the roles of nurses/social workers and liaison psychiatrists. In addition to providing direct support for patients' cancer care, these staff members are expected to play a role in educating cancer care professionals about mental disorders to improve the quality of care for people with mental disorders. Meanwhile, the current results showed that primary psychiatric care professionals are expected to support patients in cancer prevention, early detection, and continuation of cancer treatment. To achieve these goals, cancer education for psychiatric care professionals and the development of methods to encourage cancer screening are required.

Although various interventions from the provider level to public policy level have been proposed, few interventions have been proven effective in improving cancer disparities in people with mental disorders. As revealed in the current study, it is important to conduct further research to improve these disparities.

The results of this study suggest that both cancer and psychiatric care professionals need to address the gap in cancer care for people with mental disorders. Healthcare professionals should understand the impact of a person's mental disorder on their cancer care and prognosis, and, ideally, should provide person-centered collaborative care for cancer prevention and treatment.

## **CONCLUSION**

The present study widely identified issues causing disparities in cancer care for patients with mental disorders. We found that the issues extended from the patient level to the public-policy level. Our findings suggest the need for a multidisciplinary approach that includes both cancer and psychiatric care professionals to address the gap in cancer care for people with mental disorders.