

The attitudes of health care providers towards online information about head and neck cancer.



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The number of head and neck cancer (HNC) patients who seek information about their disease on the Internet is rising. Clinicians believe that online health information can help patients to become more knowledgeable about their illness and its treatment and encourages them to participate in clinical decision-making. Consultation time can be used more efficiently, provided that the information found online is accurate and relevant. However, clinicians also express their concerns about the quality of online health information and the relevance to the personal situation of the patient.

I did a qualitative research study to explore the views of head and neck clinicians towards online information aimed at their patients and their reasons to refer or not refer their patients to the Internet. I also explored the views of HNC clinicians about the information needs of their patients.

I conducted semi-structured interviews with nine clinicians from University Hospital Bristol: four registrars in oral and maxillofacial surgery, three specialist head and neck cancer nurses and two consultant oral and maxillofacial surgeons. I found that clinicians preferred to not always reveal the whole truth about the patient's course of disease because some of the information could be confusing or distressing. Some clinicians shielded their patients of such information by not referring them to the Internet.

Clinicians gave several reasons for 'shielding' their patients from the truth:

- Information about surgery could scare patients.
- Patients might find information that is not applicable to their type of cancer.
- Looking up treatment options before a treatment plan is devised could be confusing.

The clinicians were poorly informed about websites with information for HNC patients. Being unaware of suitable websites was the main reason for not referring patients to online information. Clinicians thought that the internet has the potential to misinform patients and that patients might be concerned about pursuing their treatment after reading about other peoples' negative outcomes. All clinicians expressed the need for a peer-reviewed website with information about quality of life and treatment aimed at patients treated in the department of oral and maxillofacial surgery of University Hospitals Bristol Trust.

The finding that clinicians had insufficient knowledge to comment on accuracy, reliability and accessibility of patient-oriented online health information about head and neck cancer was somewhat surprising, because internet use among head and neck cancer patients is increasing and studies have shown that cancer patients want to be referred to quality online information. There is evidence that contradicts the clinical assumption that cancer patients do not want to receive negative information. A large study amongst 2231 cancer patients in 2001 reported that most wanted to have as much information as possible - positive or negative.

In conclusion, my findings suggest some applications in the light of education of HNC patients. Potentially the development of a patient-centred website with rigorous and robust information about quality of life could encourage HNC clinicians to refer their patients to online information.