Communication of Diagnosis in Elderly Lung Cancer Patients: Who is Informed, What Information is Given and What Patients Know and Want to Know

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Keywords:

Introduction

Methods

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A 2006 2008.

Information data collection:

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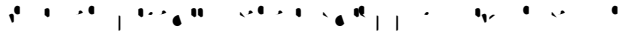
Doctors' communicative behavior:

Family's communicative behavior:

Areas investigated	N(%)
Autonomy (ADL)	
Independent	43 (51.8%)
Dependent	40 (48.2%)
Autonomy (IADL)	
Independent	25 (30.1%)
Dependent	58 (69.9%)
Comorbidities	
Mean Charlson (range)	3 (0-9)
0	4 (5%)
1	10 (12%)
2	2 (2,7%)
≥3	64 (80.3%)
Comorbidities	
Mean SCS (range)	9 (4-19)
≤9	44 (53%)
>9	39 (47%)
Cognitive function (MMSE)	
>21/30	61 (73.6%)
≤21/30	22 (26.4%)
State of mind (GDS)	
<3	57 (68.7%)
≥3	26 (31.3%)
Nutritional status: weight loss	
No	37 (44.6%)
Yes	46 (55.4%)
Mean % weight loss (range)	8.2% (1-21%)
Mean time (range)	3 months (1-8)
Nutritional status: albuminemia (g/l)	
Mean (range)	26 (20-59)
≤35	29 (34.9%)
Social situation	
Place of residence:	
Home	79 (95.2%)
Institution	4 (4.8%)
Person in charge:	
Spouse	51 (61.5%)
Children	29 (34.9%)
Others	3 (3.6%)
Transport:	
Own car	14 (16.9%)
Children's car	56 (67.5%)
Public transport	2 (2.4%)
Ambulance	11 (13.3%)
Geriatric syndromes	
Yes	40 (48.2%)
No	43 (51.8%)

Table 3: Results of geriatric assessm1.711T(Ambulance)Tjn5dren's car Public transport

Physicians' attitudes



Family attitudes

Patients 'attitudes

Study limitations

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