

Efficient Differentiation: Detecting The Ones Clinically Distressed And Most In Need For Help With The Distress Thermometer

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BACKGROUND

Screening for distress as 'the sixth vital sign' is recommended and promoted in national and international campaigns. Health care professionals fear this would lead to increasing workload. However, not everyone experiencing problems or distress wants help. In the context of a more efficient organization of cancer care, the question is: **Are we able to detect patients who desire for help the most when screening for distress?** Distress and needs assessment results were studied to answer this question.

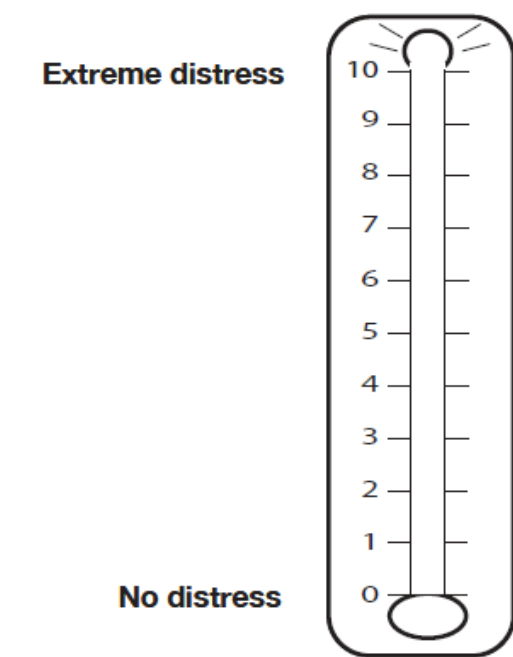
METHODS

172 adult oncology patients



- Socio-demographic and medical data
- Distress Thermometer (DT)**

Instructions: First please circle the number (0-10) that best describes how much distress you have been experiencing in the past week including today.



A cut-off of 5 was used to identify distressed patients.

- Cancer Rehabilitation Evaluation System (CARES)**
Example items

How much does it apply to you?	0	1	2	3	4	Do you want help?
1. I have difficulty walking	0	1	2	3	4	Y (N)
2. I find that food tastes bad	0	1	2	3	4	(Y) (N)

- ✓ 139 items (min.93-max.132).
- ✓ 6 summary scales: physical, medical interaction, psychosocial, marital, sexual, miscellaneous.
- ✓ a total-score and 6 summary scale scores can be computed

RESULTS

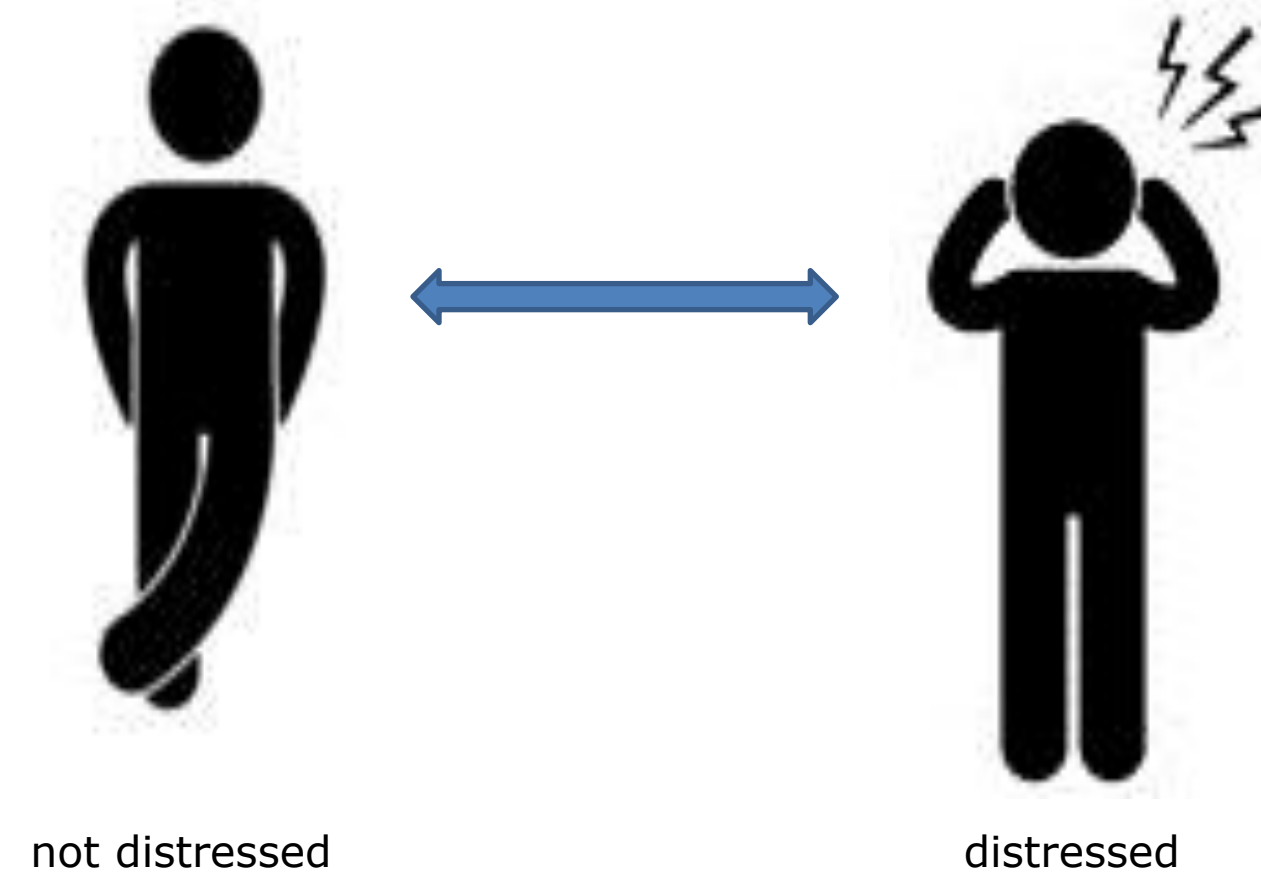
Participants (N=172) were 50.54 years of age (SD= 7.21) on average, female (69.20%) and in a significant relationship (87.20%).

CARES

TABLE 1. Mean CARES scores of all participants (N=172)

CARES scores	# Problems		Severity of problems		# Problems with desire for help	
	M	SD	M	SD	M	SD
CARES Total	43.66	21.36	1.69	0.48	4.82	11.85
Physical	11.27	6.32	1.73	0.53	1.40	3.72
Medical Interaction	1.84	2.55	1.32	0.62	0.24	0.90
Marital	4.27	4.59	1.49	0.62	0.37	1.66
Psychosocial	17.77	9.09	1.61	0.57	1.78	5.00
Sexual	3.70	2.59	1.98	0.93	0.29	1.10
Miscellaneous	4.81	4.15	1.77	0.7	0.75	2.33

DT Mean score 3.99 (SD2.50)
78 participants 'moderately or highly distressed' (45.30%)



Experience more problems
Experience larger severity of problems
Experience more desire for help
(all p between 0.000-0.048)

CONCLUSION

- all participants experience problems on several life domains in a greater or lesser degree.
- only for a minority of these problems patients want help.
- the DT differentiates between patients with low distress and higher distress.
- patients most in need for help can be detected when screening for distress with the DT.

RESEARCH AND PRACTICE IMPLICATIONS

Internationally a lot of research is done on the validation of the DT and its cut-off-values. This study adds insights about the distinctive ability of the DT, that likewise has the ability to detect patients with more desire for help. Since resources in health care are limited efficiently tailoring of psychosocial care is needed. The DT seems to be a suitable screening instrument for a stepped-care approach, to detect distressed patients most in need for psychosocial care.

ACKNOWLEDGEMENTS Limburg Sterk Merk (LSM) provided funding for this study.