

A clinical evaluation of psychological screening for distress in patients undergoing prostatectomy surgery

Background

Research shows those diagnosed with prostate cancer experience significant psychological distress, however supportive care within the health care system for such distress remains poor.

80% of men report unmet needs related to sexuality, psychology, health system and information issues¹. At 15 years post diagnosis, over 1/3 of these men continued to report unfulfilled needs. Risk factors for this include younger age, lack of partner support, hormone therapy young partners, new relationships, and expectations of minimal post-op comorbidities.

Why we did this

At Women's & Men's Health Physiotherapy we take a biopsychosocial approach to the assessment and management of all pelvic health conditions. To ensure we do not rely on intuition, we collect objective individual psychosocial information through validated questionnaires appropriate for the specific condition.

Annually, over 300 patients undergoing prostate cancer surgery are referred to our physiotherapy private practice by their Urological surgeon. They attend for pre- and post-operative assessment and management of post-prostatectomy incontinence.

In 2018 we questioned the degree of distress experienced in our cohort prior to surgery and if we should address the distress. To achieve this, we introduced a validated screening tool, the Prostate Cancer Distress Screen (PCDS).

In 2019 we decided to perform an evaluation of the clinical utility of this tool in our physiotherapy practice.

Hypothesis

We hypothesised our cohort would not be experiencing significant distress due to their Urological surgeon, multi-disciplinary health care and support team, positive prognosis and socio-economic status.

We wanted to ensure that the increased burden on patients and physiotherapists by the introduction of a screening tool (PCDS) would identify distress and lead to improved support for the psychological impact of prostate cancer and prostatectomy.

Method

Over a 16 month period, consecutive patients undergoing prostatectomy surgery attending WMHP were asked to complete the PCDS at 2 time points:

- Prior to attending their 1st pre-operative appointment, and
- 1st post-operative appointment.

All 13 physiotherapists recorded data on: date of surgery, PCDS score, age, Gleason score, and if relevant, was referral suggested for psychological support.

PCDS Score: a score of 4 or higher should lead to further assessment & referral to an appropriate support service²

Data Collected

249 pts attended over 14/11/19 – 4/3/21

240 pre-operative scores

161 post-op scores

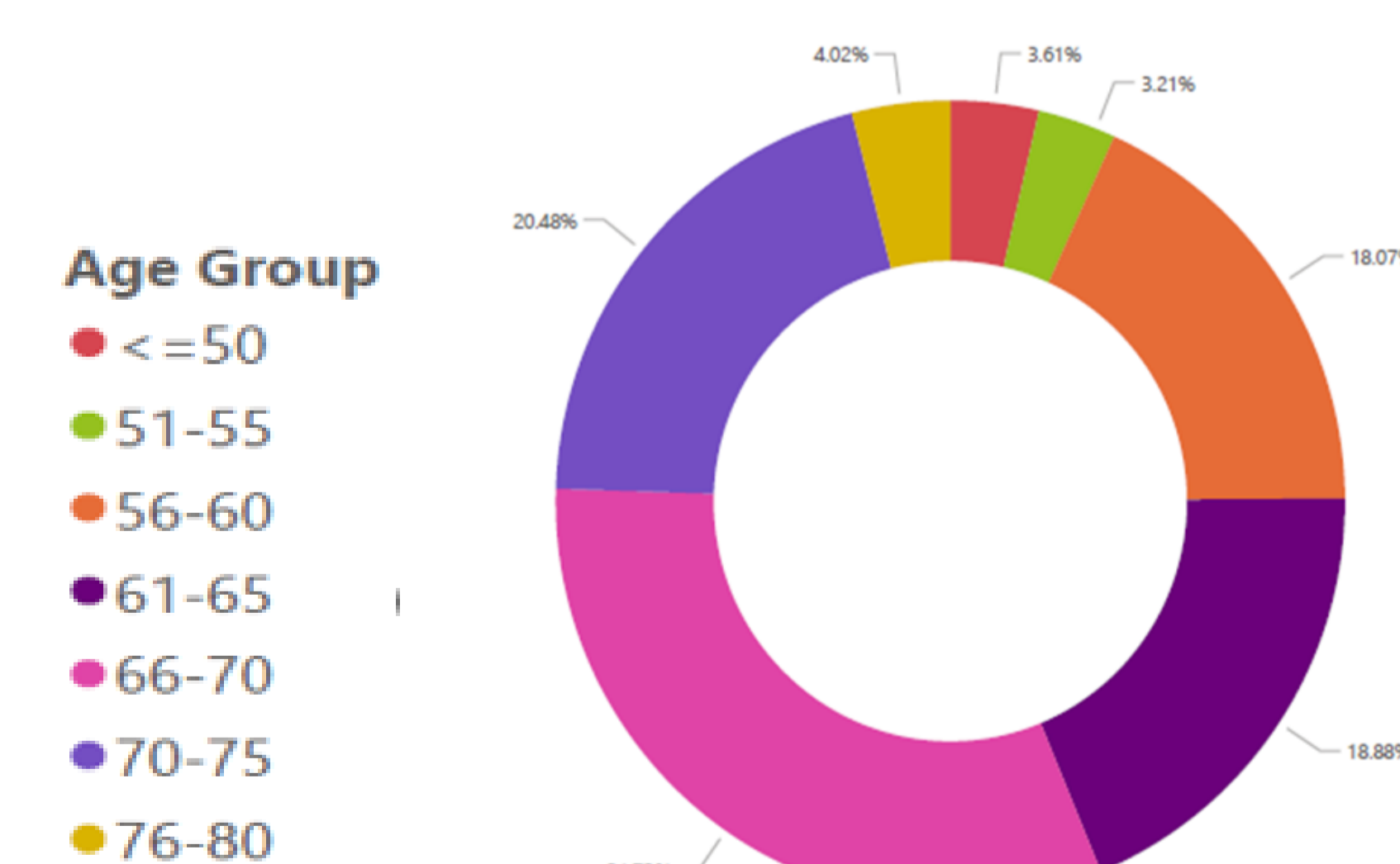
249 age scores between 47-79yrs

153 Gleason scores between 6-9

Results – 1 Age

44% of our cohort were 65 yrs or younger - proven at risk age group for experiencing distress^{3,4}

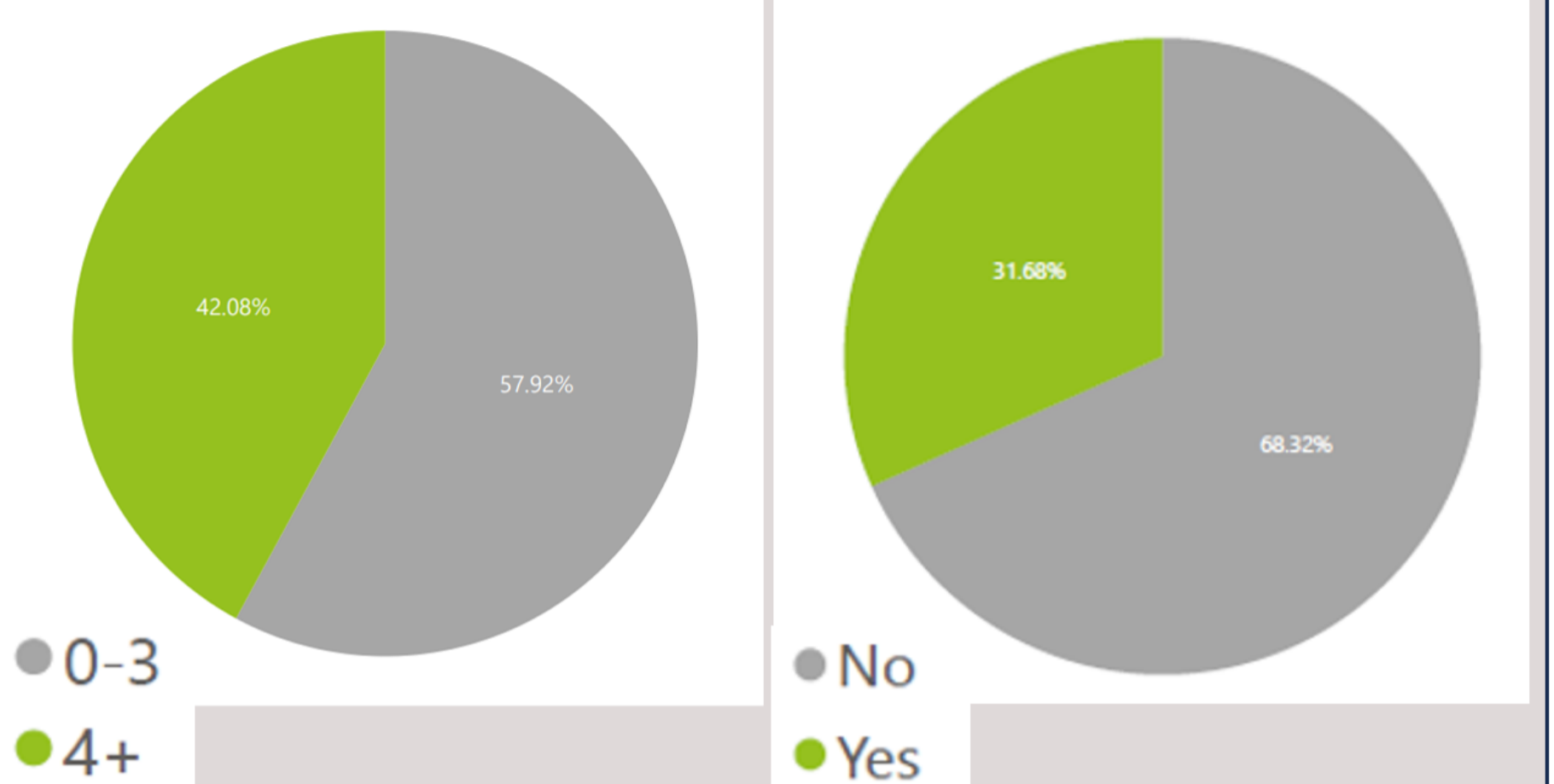
Age groups of men having a prostatectomy



Results – 2 Pre-Op PCDS

42% (101/240 pts) scored ≥ 4 on PCDS prior to prostate surgery

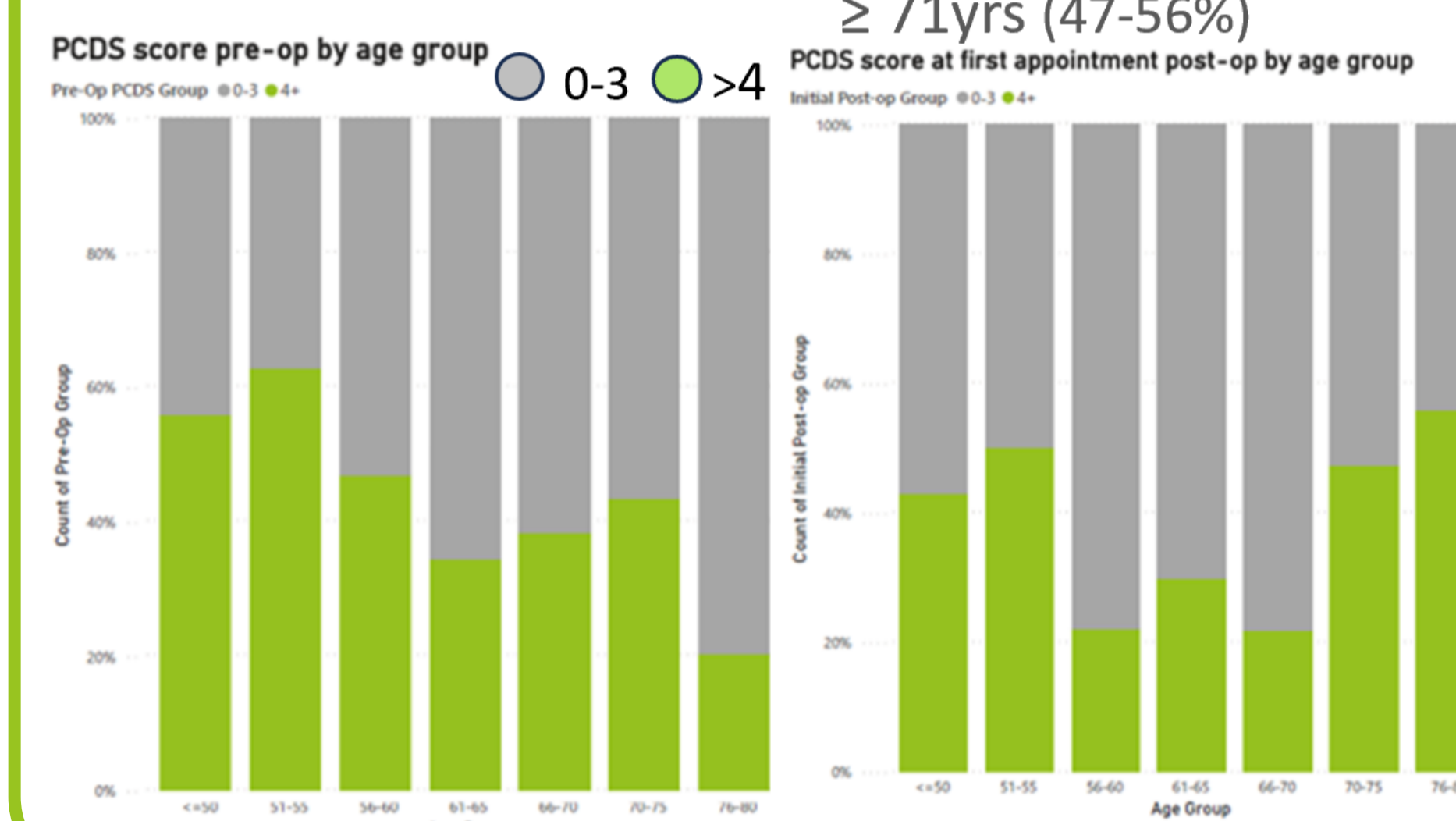
Of the 101 with distress 31.6% had Psychological referral discussed



Results – 3 Distress / Age

Pre-Op: 25-62% across all ages; highest in the younger age group

Post-Op: 32% all ages; highest in <55yrs (43-50%) and ≥ 71 yrs (47-56%)



Conclusions

1. Psychological distress of 4 or higher on PCDS was present in a high proportion of our cohort across all ages pre- and post-op prostatectomy.
2. The percentage of distress was higher than we hypothesised and demonstrates the importance of measuring this with a validated tool.
3. The percentage of distress reduced post-prostatectomy but was more evident in the younger and older cohorts.
4. The PCDS can be used as a tool to acknowledge the distress score, discuss the answers and encourage seeking professional psychological care.
5. Physiotherapists are in an ideal position to screen for and reduce distress as part of a person-centered care approach.^{5,6}

References

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- 3 Smith DP, Supramaniam R, King MT, Ward J, Berry M, Armstrong BK. Age, health, and education determine supportive care needs of men younger than 70 years with prostate cancer. *J Clin Oncol* 2007 Jun 20;25(18):2560-6
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