PATIENT’S PERSPECTIVES ON HYPERBARIC OXYGEN TREATMENT (HBOT) OF OSTEORADIONECROSIS (ORN): SIGNIFICANCE FOR MANAGEMENT OF THE TREATMENT

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PATIENT PERSPECTIVE

The objective was to elucidate patients’ acceptance of a transgressive technology and demanding treatment for which there at present is no solid evidence of a clinical effect.

OSTEORADIONECROSIS

While Osteoradionecrosis (ORN) is a rare (5–7% of radiated) complication to radiation therapy for head and neck cancer (mainly middle aged men) it constitutes a substantial burden for the individual patient including reduced ability of food intake, severe cosmetic problems and foul odor, thus leading to social deprivation.

HYPERBARIC OXYGEN THERAPY

Treatment might include dental surgery and reconstruction of the jawbone as well as Hyperbaric Oxygen Treatment (HBOT). HBOT takes place in a closed compartment where patients are breathing 100% oxygen under pressure. The two HBO facilities in Denmark differ in organisational set-up and capacity; one equipped with a multi-place chamber seating up to 7 persons and the other with a mono-place chamber. The daily treatment sessions for six weeks and far from home strains everyday life of patient and family.

METHODS

A literature study on patient perspectives on ORN and HBOT followed by a qualitative study including field observations and interviews with eight men treated at either one of two Danish HBO facilities. A double hermeneutic analysis (1) involving psychological theory (2) was conducted.

RESULTS & DISCUSSION

Observing two HBO facilities with a very different organization and in-depth interviews with patients gave an opportunity of discovering the importance of creating a feeling of attachment for the satisfaction with and acceptance of the treatment.

Acceptance of HBOT is influenced by previous health related experiences as well as current problems, and expectations of relief. Not being sure of an actual effect of the treatment made patients strive to be confirmed through high sensitivity for own improvements as well as improvements among fellow patients.

A confirmation that was hard to obtain at the small facility where the access to specialist staff as well as fellow patients was missing or sporadic at best. As signs of improvement are protracted, did patients with limited contact express an unfilled desire for dialog, and a feeling of distress and of being abandoned.

At the larger facility the daily access to a limited number of staff with specialist knowledge and fellow patients going through the same treatment created a feeling of togetherness and belonging. A feeling supported by the diver’s articulation of diving together that gave a sense of being part of something, of being a team during treatment session. The study has implications for the organisation of HBO treatment.

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Literature: