

A Family Experience of Decision-Making Home Care for the Cancer Elderly with In-Home Medical Care

○Mana Sakai¹⁾ Misae Ito²⁾ Kanako Yamamoto³⁾ Kazunori Nagasaki³⁾

1)Yodogawa Christian Hospital

2)Yamaguchi University Graduate School of Medicine

3)Kawasaki University of Medical Welfare

【Purpose】

The number one cause of death in Japan has been Cancer since 1981 as like other word regions, and over 300,000 deaths have been recently accounted annually. Over half of patients wished home care after the treatment at an acute care hospital with average 16.2 stay days (Ministry of Health, Labor, and Welfare, 2016), but about 80% of them were died at hospitals in Japan. A family feels difficulties for making a decision whether the acceptance of home care of a cancer elderly patient with in-home medical care or the place of recuperation for the patient instead of home at the time of discharge of an acute care setting.

This study aims to identify the process in which a family experiences about the decision-making of home care for the cancer elderly with in-home medical care at the discharge from an acute care hospital.

【Method】

Data were collected using semi-structured interviews of 13 subject(8 females and 5 males; 9 partners and 4 children) from 4 prefectures of the west part of Japan. The participants were agreed with the study participation orally and in writing after approving the ethical committees from an institution. The data of the obtained verbatim transcriptions were interpreted and analyzed by the continual comparative analysis method, a modified grounded theory approach.

【Result】

The results indicated that there were 18 different concepts generated in the family's decision-making process for the cancer elderly with in-home medical care.

“Unintentional care wish” formed from <The family ties> was clarified as being an essential first step, and “Switch on care” was clarified as the final step in the decision-making process. This process was explained by 4 categories in addition to <The family ties>: <Ruminated on see to everything at home her/himself >, <Hospital constrains>, and <support around from professional staff >.

【Conclusion】

To make decision on home care by a family with the cancer elderly to need medical care was identified to decide care by a family self as the essential point. This decision will of a family was influenced by a patient's feeling, recommendation from other family member, and professional staff's support.

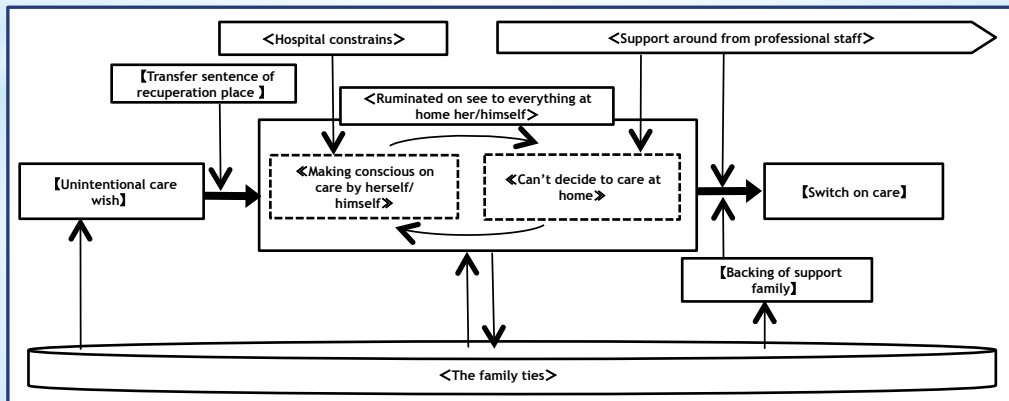


Figure 1 The family's decision-making process for the cancer elderly with in-home medical care