The Experience of a Diagnosis of Advanced Lung Cancer: Sleep Is Not a Priority When Living My Life

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Sleep is essential to physical health, cognitive functioning, memory, and quality of life (Banks & Dinges, 2007; Durmer & Dinges, 2005); however, the role of sleep in the lives of patients with lung cancer is relatively uninvestigated. Lung cancer is the second most common form of cancer and the leading cause of cancer death in the United States (Siegel, Ward, Brawley, & Jemal, 2011). Limited research indicates that, when compared to other types of cancer, patients with lung cancer have the poorest sleep quality, and 52%–79% of those patients experience sleep-wake disturbances compared to the general population (10%–15%) (Davidson, MacLean, Brundage, & Schulze, 2002; Ginsburg, Quirt, Ginsburg, & MacKillop, 1995; Silberfarb, Hauri, Oxman, & Schnurr, 1993; Vena et al., 2006). Silberfarb et al. (1993) used polysomnography to demonstrate that patients with lung cancer had more trouble falling asleep and staying asleep, napped longer and more frequently, and stayed in bed longer; however, they did not get more sleep compared to patients with breast cancer and normal sleepers. These studies found that those objective measures often did not correlate with subjective measures of sleep and that the participants did not recognize the significance of their sleep-wake disturbances. Therefore, little is known about patients' perceptions and experiences of problematic sleep and whether sleep disturbances were preexisting to the lung cancer diagnosis. Few qualitative studies were concerned with sleep disturbances except for one in which insomnia was one of the most distressing problems, along with pain and fatigue (Tishelman, Lövgren, Broberger, Hamberg, & Sprangers, 2010).

Minimal discussion has centered on the experiences of sleep disturbances that ultimately affect daily life. Disease- and treatment-related symptoms such as pain, dyspnea, and fatigue may interfere with sleep homeostasis and result in sleep-wake disturbances (Vena et al., 2006). When poor sleep is combined with any of those

Purpose/Objectives: To describe common practices and shared meanings of sleep-wake disturbances in individuals with newly diagnosed non-small cell lung cancer (NSCLC) before treatment and evaluate their preexisting sleep disturbances.

Research Approach: Open-ended interviews of patients newly diagnosed with lung cancer.

Setting: A Veterans Administration hospital and a comprehensive cancer center in the northeastern United States.

Participants: 26 patients newly diagnosed with NSCLC who chose chemotherapy treatment.

Methodologic Approach: Interpretive phenomenology based on Heideggarian hermeneutics.

Main Research Variables: Meaning of diagnosis on life experiences and sleep practices.

Findings: Participants described four related themes: (a) the diagnosis as devastating yet not surprising, (b) treatment as hope for more time, (c) keeping life normal, and (d) sleep patterns as long lived. The constitutive pattern that linked the themes was: sleep is not a priority when living life after a diagnosis of lung cancer.

Conclusions: Although participants did not complain about sleep difficulties, they described a history of sleep disturbances and poor sleep hygiene. Participants focused their trust on the treatment, giving them more time to follow their priorities and ignoring the effects of sleep deprivation on their quality of life.

Interpretation: Healthcare professionals may design interventions to encourage keeping life as normal as possible, focusing on improving sleep, which may ultimately prolong patients' lives.

symptoms, symptom distress increases significantly with a decline in functional status and quality of life (Given, Given, Azzouz, & Stommel, 2001). In fact, studies have shown that patients with lung cancer consider the combination of insomnia, fatigue, and pain the most distressing of all symptom clusters (Degner & Sloan, 1995; Portenoy et al., 1994; Sarna, 1993). In addition, higher symptom distress scores are predictive of decreased survival time in patients with lung cancer, regardless of age