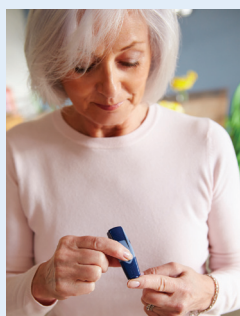


# Improving Coordination of Care Among Healthcare Professionals and Patients With Diabetes and Cancer

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**Background:** Patients with diabetes and cancer have higher mortality and morbidity rates, and are more likely to be hospitalized during treatment. In addition, they often prioritize cancer treatment over self-management of diabetes.

**Objectives:** This research aims to identify the issues regarding the management of diabetes in patients with cancer by examining the perspectives of oncology providers, nurses, and patients.

**Methods:** This study used six focus groups of oncology providers, nurses, and patients with preexisting diabetes who received chemotherapy for a solid tumor or lymphoma. Participants were recruited from two outpatient cancer centers in Michigan. All focus group discussions were audio recorded and transcribed, and thematic analysis was conducted to identify common themes.

**Findings:** Three overarching themes were identified by patients, nurses, and oncologists: prioritization and responsibility, care coordination, and health/self-management. This study highlighted areas for improvement in the management of patients with preexisting diabetes being treated with chemotherapy. Additional research is needed to test interventions that improve care coordination and self-management in this population.

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A 45-year-old woman with a history of diabetes is diagnosed with breast cancer. Her cancer team decides that her chemotherapy regimen will include docetaxel (Taxotere®) and cisplatin (Platinol®), including premedication with dexamethasone (Decadron®) to prevent chemotherapy-related nausea. Although dexamethasone may help with her nausea, it may also increase her blood glucose, unintentionally decreasing her control over her diabetes. This is just one of the many issues patients and caregivers must navigate while managing both diabetes and cancer treatment. Chemotherapy treatment and its associated symptoms can negatively affect diabetes self-management, increasing patient risk for adverse outcomes (Hershey, Tipton, Given, & Davis, 2012). The purpose of this study was to identify the concerns and challenges regarding the management of type

2 diabetes in patients with cancer receiving chemotherapy by examining the perspectives of oncology providers, nurses, and patients. Understanding the perspectives of patients, nurses, and providers can help clinicians develop interventions to improve outcomes for this unique population.

An estimated 21.9 million people in the United States currently have diabetes (Centers for Disease Control and Prevention, 2014). The American Cancer Society (2016) predicted that 1,685,210 people will be newly diagnosed with cancer in the United States in 2016. In addition, 8%–18% of newly diagnosed patients with cancer also have preexisting diabetes (Barone et al., 2010; Psarakis, 2006). Diabetes and cancer are two of the most common chronic conditions diagnosed in the United States. As the population ages, the co-occurrence of these two chronic conditions will also increase, and a growing