Feasibility of a Text Messaging Intervention to Promote Self-Management for Patients Prescribed Oral Anticancer Agents

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Oral anticancer agent (OA) use for cancer treatment is increasing (Soria et al., 2011). With more than 50 OAs on the market, 25% of cancer treatment is expected to be in pill form during the next decade (Bestvina et al., 2014). The therapeutic outcome of cancer treatment for patients taking OAs depends heavily on self-management (Spoelstra et al., 2013a, 2013b). However, research indicates that managing OAs is a significant problem (Bassan et al., 2014; Puts et al., 2013; Streeter, Schwartzberg, Husain, & Johnsrd, 2011).

Reviews of OA studies consistently demonstrate that adherence to regimens is less than 80% (Bassan et al., 2014; Puts et al., 2013). Studies of patients with cancer also indicate that patients interrupted or stopped treatment when symptoms from side effects of treatment became severe (Spoelstra et al., 2013a, 2013b). Difficulty with self-management of OAs has been reported in systematic reviews and further delineated in the National Comprehensive Cancer Network Task Force Report on OAs (Bassan et al., 2014; Puts et al., 2013; Weingart et al., 2008). Factors that seem to influence adherence include age, gender, race, health beliefs, side effects, self-efficacy, comorbidities, depression, cognitive ability, regimen complexity and cost, self-management knowledge, social support, and provider relations. Evidence also shows that, as the complexity of OA regimen increases, adherence decreases (Spoelstra et al., 2013a). Many OA dosing regimens require taking medication multiple times a day, cycling on and off, or taking multiple medications. In addition, 75% of people with cancer have comorbid conditions, which may interfere with the ability to self-manage (Ogle, Swanson, Woods, & Azzouz, 2000). The limited evidence available suggests that managing OAs is a significant problem that