"Just Living With Them": Symptom Management Experiences of Rural Residents With Advanced Cancer

Stephanie Gilbertson-White, PhD, APRN-BC, Chi Yeung, MA, and Karen E. Wickersham, PhD, RN

PURPOSE: To understand how rural residents with advanced cancer experience and manage their symptoms.

PARTICIPANTS & SETTING: 16 adult patients with a diagnosis of advanced cancer, who were receiving antineoplastic treatment and living in rural areas of southeastern lowa, participated in the study.

METHODOLOGIC APPROACH: Data were collected through semistructured, audio-recorded interviews using open-ended questions. Data were analyzed using content and dimensional analyses.

FINDINGS: Four themes were developed from the completed interviews, including (a) barriers and challenges associated with rural cancer care, (b) physical symptoms experienced from the time of diagnosis through the cancer trajectory, (c) symptom management strategies used to control physical symptoms, and (d) perceptions of having cancer and the use of technology in managing symptoms.

IMPLICATIONS FOR NURSING: Rural residents with advanced cancer experience a wide range of physical symptoms that may affect their quality of life. Although residents may develop self-management strategies to cope with symptoms, additional guidance on and interventions for how best to manage physical symptoms are needed.

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ural areas are experiencing a severe shortage of healthcare providers, with only one oncologist per 100,000 residents compared to five oncologists per 100,000 residents in urban and suburban areas (American Society of Clinical Oncology, 2017). Rural areas also often have reduced access to specialists, such as palliative care providers, psycho-oncologists, and oncology-certified staff (Hendren et al., 2011), which can lead to patients needing to travel long distances to see an oncologist (Baldwin et al., 2008). Patients with advanced cancer in rural areas are also more likely to receive highly aggressive treatment protocols (Moy et al., 2017; Singh, Williams, Siahpush, & Mulhollen, 2011). The combination of advanced disease and aggressive treatment can result in a high symptom burden among rural residents. According to previous studies, geographic rurality has contributed to a culture of stoicism and independence that can negatively influence the healthcare experiences of rural patients with cancer (Emery et al., 2013; Fischer et al., 2016).

Background

Patients with advanced cancer report an average of as many as 10 to 12 concurrent physical symptoms, which are associated with poorer functional status and quality of life and higher levels of distress (Eckerblad, Theander, Ekdahl, Jaarsma, & Hellstrom, 2015; Gilbertson-White et al., 2012). Symptom management interventions have largely been developed based on the experiences of people of all stages of disease (Berry et al., 2017; Cooley et al., 2017) or on cancer survivors who have completed treatment with curative intent (Freeman et al., 2015; Kapoor & Nambisan, 2018). In addition, the majority of published research on the symptom experience of patients with advanced cancer has primarily included urban and suburban residents who are receiving treatment at tertiary