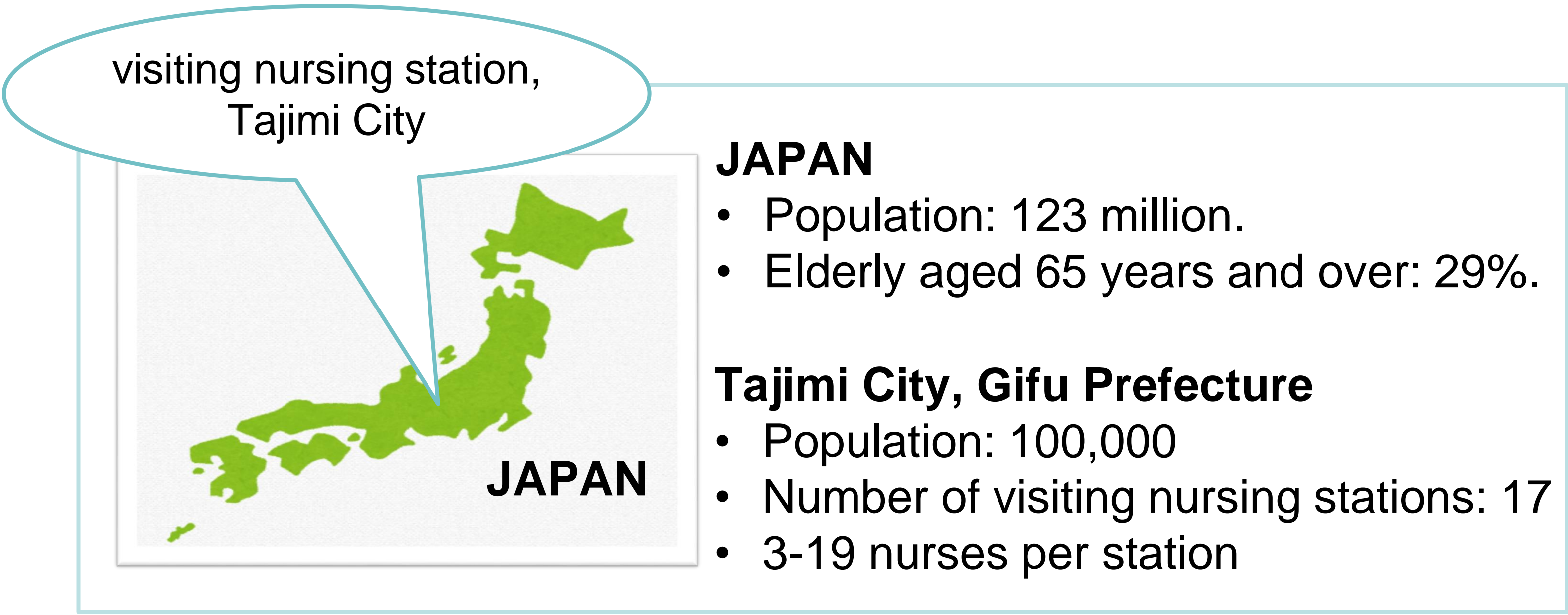


# A caregiver's coping process with the end-of-life care of a patient with cancer at home: a case study



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## Background

- Home medical care in Japan
  - Nearly 17% of people die at home.
  - Community-based “Integrated Care System” has been promoted.
  - There are about 17,000 visiting nursing stations in Japan.
  - Each station has an average of five full-time nurses.
- Patients with cancer in Japan
  - Cancer is the leading cause of death in Japan.
  - 55% of Japanese people would prefer to die at home.
  - Japan has a rapidly aging population.
- Characteristics of cancer patients
  - In the weeks before death, symptoms increase and ADLs decline.
  - Family caregivers have physical strain, anxiety, and depression.
  - The burden leads some caregivers to give up on home care.

## Study Aim

To clarify a home-based family caregiver’s process of coping with a patient with cancer at the end-of-life, in order to identify ways to help them both.

## Methods

Data were obtained from the field notes and group discussions of visiting nurses and were analyzed using the Trajectory Equifinality Approach. This study was conducted with the approval of the Ethics Committee.

## Results

The participant was in her 80s. She continued to work part-time while caring for her husband who had advanced cancer. Her husband was in his 80s and was sometimes hospitalized to the palliative care unit for his symptoms. The caregiver wanted her husband to stay hospitalized, but he wished to die at home. The nurses informed the caregiver of the patient's condition and prognosis at each visit. They also gave the caregiver a handbook which explains the monthly, weekly, and daily progress toward death. The caregiver observed the patient's condition and reported his distress to the nurses, which prompted them to administer continuous subcutaneous morphine injections. The patient wanted his wife to continue working, to which she obliged. The nurses visited twice a day and began long-term home-care visits. The patient died at home 4 days after starting morphine. 10 days later, the caregiver told the nurses that being able to care for the patient at home while working was wonderful. She also stated that she would assume her husband's domestic roles, such as taking out the trash and newspapers.

## Conclusion

The nurses informed the caregiver of the patient's condition, and helped her cope with her husband’s condition. Moreover, the nurses were able to appropriately relieve the patient's distress and increase the frequency of visits, allowing the caregiver to continue working. Such support may have helped the caregiver view the end-of-life care process positively and accept life without her husband.

