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Introduction
This presentation will focus on research which has examined the experience of relatives of people suffering from a low-grade tumour using interpretative phenomenological accounts. There is a plethora of information about cancer in general, the carer experience, and on adjustment to difficult situations (e.g. put here one or two references). There is also a wealth of information from the medical and oncology literature providing the factual context to the brain tumour experience (e.g. put here one or two references). However, hardly any work has been carried out on the experiences and adjustments of the family-members of brain tumour sufferers. Initial explorations have tended to examine patients and carers, and different types of brain tumours, as if they were universal phenomena. However, patients with brain tumours and their carers comprise a diverse group with a wide range of supportive care needs, depending on time since diagnosis and degree of malignancy. Therefore the purpose of this study was to explore the specific experience of relatives of individuals recently diagnosed with a low-grade brain tumour.

Method
A qualitative approach, based on Interpretative Phenomenological Analysis (IPA), was adopted. Semi-structured interviews were conducted with a purposive sample of three participants who were the spouse/partner of someone recently diagnosed with a low-grade brain tumour. Each interview was recorded and transcribed verbatim, and analysed in accordance with IPA (Smith, Flowers & Larkin, 2009)
Results
Four superordinate themes emerged from the data including: discovery; communication; emotional reactions; and contextual factors. Participants discussed the importance of discovering the tumour, both in terms of getting a diagnosis, and learning about the tumour. The practice of disclosure and non-disclosure to others about the tumour diagnosis were also significant in the early illness experience. An important theme to emerge involved the participants describing what is difficult for them in the experience, and how they coped with this difficulty. The final theme placed the brain tumour experience within a wider context, where factors such as the relationship with the patient, relationship with professionals, and the hospital environment were described as significant.

Conclusions
This research detailed the early tumour trajectory and the salient processes involved in this journey. A framework was proposed to help conceptualise the findings of the study and could be used to aid health professionals to reflect on, and better understand, parts of the early illness experience in order to improve the care of patients and their families.