

Health literacy of oncologic patients: a comparison between breast cancer and prostate cancer survivors

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Background

- Health literacy involves knowledge, motivation and skills to access, understand, evaluate and apply health information in order to improve health and quality of life (SØRENSEN et al., 2012).
- Patients with chronic diseases, including oncology ones, with low health literacy have difficulty understanding the disease's demands, medication and treatment.

Objective

- To evaluate health literacy of cancer survivors, comparing breast cancer survivors and prostate cancer survivors.

Brazilian Unified Health System

The city of Fortaleza – Ceará – Brazil



Methods

- Population group:** The convenience sample consisted of 309 patients; 201 breast cancer survivors and 108 prostate cancer survivors.
- Place:** Regional Integrated Oncology Center (CRIO), which is affiliated to the Brazilian **Unified Health System**, located in the city of Fortaleza – Ceará – Brazil (see map in the lower left)

Health Literacy Measurements

- Brazilian version of the Health Literacy Questionnaire (HLQ), HLQ-BR (MORAES, 2018).

Cut-off Points

- There is no cut-off point for interpretation
- Low scores indicate limitations in health literacy and high scores indicate a better health literacy.
- Scales 1-5 have a maximum score of 4 and scales 6-9 have a maximum of 5. (OSBORNE et al, 2013)

Statistical Analysis

- Central tendency measurements
- The normality of the indicators was tested by the Shapiro-Wilk test
- To compare the indicators: the Mann-Whitney test

Results

- Average Age (years old):** Breast cancer (BC): 50 (SD = 10.57); Prostate cancer (PC): 70 (SD=8.93).
- Breast cancer survivors had higher average scores on the scales, with significant difference on scales 3, 5, 8 and 9.
- Although these patients had a better health literacy, both groups did not show a very high performance.
- The older age of the prostate cancer survivors might have been an influence factor on the findings, which has already been mentioned by other authors (BO et al., 2014; TOÇI et al., 2014; SØRENSEN et al., 2015; HEIJMANS et al., 2015) who also found similar results comparing advanced age and low levels of schooling with health literacy.

HLQ-BR		MÉDIA	valor p
Feeling understood and supported by healthcare providers	BC	2,84	0,055 ¹
	PC	2,73	
Having sufficient information to manage my health	BC	2,55	0,107 ¹
	PC	2,39	
Actively managing my health	BC	2,79	0,044 ¹
	PC	2,64	
Social support for health	BC	3,17	0,562 ¹
	PC	3,13	
Appraisal of health information	BC	2,57	<0,001 ¹
	PC	2,24	
Ability to actively engage with healthcare providers	BC	3,46	0,076 ¹
	PC	3,23	
Navigating the healthcare system	BC	2,87	0,211 ¹
	PC	2,72	
Ability to find good health information	BC	2,89	<0,001 ¹
	PC	2,45	
Understand health information well enough to know what to do	BC	3,16	<0,001 ¹
	PC	2,47	

- The instrument that was used is multidimensional, making the identification of the most fragile points related to health literacy easier and, thus, allowing a better guidance of intervention actions.

Conclusions

- Intervention actions are necessary to improve health literacy in both groups, but the findings show that there is a greater vulnerability among the patients with prostate cancer in regards to a greater direct involvement of the health professional: the active healthcare and healthcare information, involving finding them, understanding them and evaluating them in order to know what to do with them.