Can the needs of carers of people with advanced cancer be met through their General Practitioner?

Family carers of patients with advanced cancer have substantial needs. Cancer services mostly focus on the cancer patient, and do not have the formal responsibility or resources to manage carers’ needs. The carer’s own GP is well suited for this role.

An intervention was developed for carers’ needs to be systematically identified and managed by their own GP. It comprised (a) a brief checklist of common concerns, the Needs Assessment Tool - Carers (NAT-C); and (b) a matching GP Toolkit of resources. Carers completed the NAT-C and used it to identify their concerns and needs to the GP. This would enable those concerns to be addressed and hopefully met.

A total of 392 patients were recruited in this trial to test the effectiveness of the intervention. Half received the intervention and half received usual care. Carers were surveyed by computer-aided telephone interviews 4 times in a six month period. The main outcomes were: number and intensity of needs, anxiety and depression, quality of life, and coping styles. Some carers and GPs were interviewed to explore their experiences qualitatively.

Overall, no significant differences were found in the number or intensity of need between groups. However, some people found benefit from using the NAT-C. These were people who had significant anxiety or depression at baseline. Physical well-being improved at one month for non-anxious carers. Carers who were looking after people with advanced disease found that they identified more needs, both physical and psychological, after using the NAT-C. The NAT-C made them more aware of the extent of the challenges they faced. However, using the NAT-C to discuss those needs with the carer’s GP may help the GP and carer work them through and provide more appropriate support.

The study showed that the NAT-C was acceptable to most carers and GPs. Using it required time and effort, but the participants felt it would be a worthwhile resource for all cancer carers, especially those who seek their GP’s support and those whose GP is oriented to supportive care. It is uncertain whether GPs would invite carers to complete a NAT-C, due to their lack of contact with their caregiving patients during the majority of the illness.

In summary, while not everyone would benefit from using the NAT-C, people with anxiety and/or depression got some benefit. Those caring for people with advanced illness became more aware of the nature and extent of their needs, which offers a chance for them to be addressed at a consultation with their GP.