

**TITLE: A quality improvement study of the factual information pertaining to anticipated post-operative course in mastectomy patients**

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**BACKGROUND:** Informed consent is a process in which a healthcare provider supplies a patient with the necessary information to allow the patient to decide whether to undergo a certain procedure. The provision of information leaflets has proven beneficial to patients' recall and understanding of surgical procedures and post-operative course, although shortcomings have been noted.

**OBJECTIVES:** To evaluate the process of informed consent as part of a quality improvement process by assessing whether patients undergoing a mastectomy are adequately informed in terms of the information pertaining to their surgical procedure and anticipated post-operative course.

**METHOD:** This was a mixed method study conducted at the Tygerberg Hospital Breast and Endocrine Unit. All patients scheduled to undergo a mastectomy receive an information leaflet detailing, amongst others, what a mastectomy entails and possible side effects. All females ( $\geq 18$  years) scheduled for a mastectomy for breast cancer between August 2022 and April 2023 were invited to participate (study delayed due to COVID-19). Exclusion criteria included patients receiving tumor excision or immediate reconstruction after a mastectomy, those unable to communicate in Afrikaans, English, isiXhosa or isiZulu, and those unable to provide consent independently. The pre-operative assessment (assessing recall of information leaflet details - quantitative data) formed the basis for this abstract. Ethics approval: N21/02/012.

**RESULTS:** In total, 46 patients were included in the study (mean age: 53.26 years, SD: 11.73, range: 27-83 years). Almost two-thirds (63%) had some form of secondary school education, while nine (19.6%) had some tertiary education. Most were unemployed (69.6%) and Afrikaans first language speakers (60.9%). Over half the sample was diagnosed with stage 2 disease (53.3%), with the remainder being stage 1 (11.1%) and stage 3 (35.6%). Prior to surgery, almost half received chemotherapy (47.8%) and thirteen (17.4%) received endocrine therapy for longer than four months. Most patients (78.3%) reported reading the information leaflet. Almost three quarters (73.9%) knew who to approach in the event of experiencing a problem and 50% knew the number to contact if they experienced any problems after discharge. Almost two thirds (62.2%) recalled knowing between one and five or more possible side effects. No significant associations were evident between checklist responses and age, level of education, or first language.

**CONCLUSION:** Findings suggest some benefit in providing patients with information leaflets detailing, amongst others, possible side effects of a procedure, as well as the contact number and person to contact in the event of experiencing post-operative problems. As only 50% of the patients recalled the number to contact in the event of a problem, we recommend including this number on patient appointment cards and in all patient communication. Recommendations for further research include the replication of the study in larger samples and the inclusion of a control group.