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Title: PEPS: Patient Experiences of Pancreatic cystic lesion Surveillance.

PhD in progress since September 2017

Expected completion November 2022

Summary

The drive for early detection of cancers such as pancreatic adenocarcinoma and the advancement of radiological imaging has resulted in an increasing number of patients with premalignant pancreatic cystic lesions (PCLs) under long term surveillance. Unlike other conditions under surveillance for the potential progression of cancer, pancreatic cancer has a significantly poor prognostic outcome. An in-depth understanding of patient experiences and needs undergoing surveillance for PCL has not been previously explored. The research presented within this PhD will contribute to the understanding of this under-researched population and identify any potential improvements to the existing pathway that these patients are navigating.

This qualitative PhD project is the result of multiple phases. Phase 1 involves the construction of a conceptual framework based on existing theoretical work developed in order to seek to understand the experiences of the PCL surveillance population. Phase 2 comprises of a qualitative literature review of experiences of patients under surveillance for premalignant and low risk cancers. The findings from this review was used to develop a wider contextual understanding of experiences of surveillance that were later explored in patient interviews. Phase 3, a mixed methods review of strategies to improve patient experience of surveillance was performed in order to raise awareness of potential areas of improvement used in similar populations that may be interrogated in participant interviews. Finally phase 4 sought to explore the experiences of individuals under surveillance with PCLs through qualitative interviews with patients where areas for improvement were also explored where appropriate.

Potential impact of the project

The findings from these phases will be combined to provide an insight prior to the development of an appropriate intervention in order to improve the experiences of patients under surveillance for premalignant pancreatic cystic lesions.