

Structured DVD Education

Impact on teaching satisfaction and anxiety among patients with leukemia and lymphoma and their family members

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BACKGROUND: Many factors can interfere with a patient's ability to cope with a new cancer diagnosis. The method of education delivery may improve satisfaction with teaching and reduce anxiety. Structured DVD education combined with other teaching methods has shown positive results. However, few such studies have included family members.

OBJECTIVES: The purpose of this study was to evaluate the impact of structured DVD education versus standard one-on-one education on satisfaction with teaching and on anxiety among patients newly diagnosed with leukemia and lymphoma and their families.

METHODS: A post-test randomized controlled trial study design evaluated the effects of structured DVD education compared to standard one-on-one education.

FINDINGS: Family members in the intervention group had higher satisfaction with teaching than those in the control group; this difference was found to be statistically significant.

KEYWORDS

teaching method; DVD education; oncology education; leukemia; lymphoma

DIGITAL OBJECT IDENTIFIER

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P**ATIENTS NEWLY DIAGNOSED WITH LEUKEMIA AND LYMPHOMA** have extensive education needs regarding diagnosis, treatment, procedures, and chemotherapy side effect management. Studies of hospitalized patients with cancer revealed low satisfaction with information provided by the healthcare team (Houlihan, 2015; Piredda, Migliozi, Biagioli, Carassiti, & De Marinis, 2016). Newly diagnosed patients with acute leukemia and lymphoma can be immediately hospitalized for acute conditions, and the hospitalization may last for several weeks. Anxiety is common in these patient populations and can be at its highest level when the patient is first hospitalized (Albrecht, 2014; Bryant et al., 2018; Lester, Stout, Crosthwaite, & Andersen, 2017).

Nurses can positively influence patient anxiety and satisfaction with teaching by educating them about the disease, treatment, and overall plan of care (Mann, 2011; Mueller & Glennon, 2007). The Oncology Nursing Society's *Statement on the Scope and Standards of Oncology Nursing Practice: Generalist and Advanced Practice* emphasizes the importance of comprehensive patient and family education and encourages nurses to participate in the development of patient education materials (Brant & Wickham, 2013).

The most common method of providing education to hospitalized patients and families before cancer treatment is one-on-one verbal teaching by members of the healthcare team (Frentsos, 2015). Although this method allows for flexibility based on patients' needs, lack of retention of information may be an issue (Valenti, 2014). Alternatively, patients may receive written information because of the time constraints on healthcare professionals (Piredda et al., 2016). Individuals with limited health literacy may not fully understand these written patient education materials (Protheroe & Rowlands, 2013). Studies have reported that patient education strategies using multiple methods are better than those using verbal, written, or video presentations alone (Fee-Schroeder et al., 2013; Potter, Pion, Klinkenberg, Kuhrik, & Kuhrik, 2014). Combining verbal teaching with structured DVD education increased patients' understanding of important and/or complex healthcare information more than providing only written or verbal information (Srisuk, Cameron, Ski, & Thompson, 2017). Audiovisuals provide a standard approach to teaching, consistent provision of information,