

Uncertainty After Treatment for Prostate Cancer: Definition, Assessment, and Management

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Prostate cancer is the second most common type of cancer in men living in the United States and the most common type of malignancy in Canadian men, accounting for 186,320 new cases in the United States and 24,700 in Canada in 2008. Uncertainty, a component of all illness experiences, influences how men perceive the processes of treatment and adaptation. The Reconceptualized Uncertainty in Illness Theory explains the chronic nature of uncertainty in cancer survivorship by describing a shift from an emergent acute phase of uncertainty in survivors to a new level of uncertainty that is no longer acute and becomes a part of daily life. Proper assessment of certainty and uncertainty may allow nurses to maximize the effectiveness of patient-provider communication, cognitive reframing, and problem-solving interventions to reduce uncertainty after cancer treatment.

Prostate cancer is the most common type of male-specific malignancy in the United States and Canada, with an estimated 186,320 Americans (American Cancer Society, 2008) and 24,700 Canadians (Canadian Cancer Society, 2008) being diagnosed in 2008. At some point of their illness, many men will experience uncertainty, which is believed to be a component of all illness experiences (Mishel, 1988, 1990). Uncertainty can negatively affect psychosocial adaptation and disease outcomes (McCormick, 2002). The fear of rising prostate-specific antigen levels, recurrence of cancer, and long-term side effects of prostate cancer treatment may mean that the condition becomes a chronic one for many patients.

Mishel (1990) defined uncertainty in chronic illness as the state of living with a debilitating condition in which the individual continuously questions the risks of recurrence or exacerbation and their unknown future. Consequently, uncertainty in chronic illness influences daily activities and routines (Cohen, 1993a; Weitz, 1989), negatively affects well-being (Clayton, Mishel, & Belyea, 2006), and is strongly related to mood disturbances (Taylor-Piliae & Molassiotis, 2001). This article aims to explore the concept, assessment, and management of uncertainty after treatment for prostate cancer.

The Uncertainty in Illness Theory

First proposed by Mishel (1981) as the Model of Perceived Uncertainty in Illness, the Uncertainty in Illness Theory (UIT) describes how patients cognitively process illness-related stimuli and assign meanings to events (Mishel, 1988). According to the

At a Glance

- ◆ Uncertainty affects many men even after successful completion of treatment for prostate cancer.
- ◆ Understanding the Reconceptualized Uncertainty in Illness Theory will allow nurses to better appreciate the concept of uncertainty after prostate cancer treatment.
- ◆ Proper assessment of the certainties and uncertainties of prostate cancer survivors will help nurses design effective interventions aimed at reducing uncertainty in men after treatment.

UIT, uncertainty is a consequence of the inability to allocate specific values to objects and events or accurately predict outcomes of clinical interventions (Mishel, 1988; Mishel & Braden, 1988). Although uncertainty often is associated with undesirable events (Mast, 1995), the concept in the UIT is seen as neither a preferred nor an undesired state until the implications of uncertainty are determined (Mishel, 1988, 1990). In contrast, Hilton (1994) concluded from her studies on women coping with breast cancer that uncertainty is a perceptual state accompanied by emotions

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Digital Object Identifier:10.1188/08.CJON.749-755