

Butterflies in the Stomach:

A qualitative study of patients' experiences during the diagnostic pathway for lung cancer

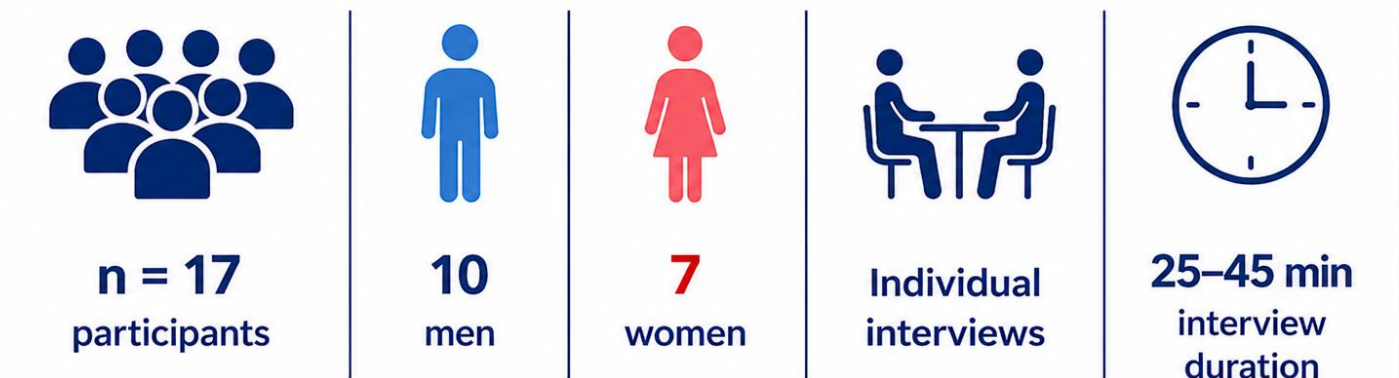
Siv Camela Rivera Pettersen ¹, Kjersti Johanne Østrem Fløtten ², **Kirill Neumann** (presenting author) ^{1,3},
¹Pulmonary Department, Akershus University Hospital, Norway ²Department of Integrated Care and Health Promotion, Akershus University Hospital, Norway ³Faculty of Medicine, University of Oslo, Norway
Correspondence: Kirill.Neumann@ahus.no

INTRODUCTION

During diagnostic fast-track pathway for suspected lung cancer, patients usually have to undergo several different diagnostic tests and procedures. This period of waiting for a potentially life-changing diagnosis can be extremely challenging.

Previous research in lung cancer has mainly focused on cancer treatment and survivorship, whereas patients' experiences during the diagnostic phase remain largely unexplored.

A better understanding of this phase may help identify unmet needs and improve patient-centered care.



METHODS

The aim of this qualitative study with exploratory descriptive design was to explore how our patients experience the diagnostic pathway for suspected lung cancer in a Norwegian healthcare setting.

Patients referred to the standardized fast-track diagnostic pathway for lung cancer at a Akershus University Hospital, Norway, between January 2024 and March 2024 were invited to participate.

Semi-structured individual interviews in-person or by phone. The interviews lasted 25 - 45 minutes, were audio-recorded and transcribed verbatim.

The data were analyzed using reflexive thematic analysis as described by Braun and Clarke. The analysis was conducted by the research team.

DISCUSSION AND CONCLUSION

- Rapid diagnostic pathways improve diagnostic efficiency, but patients may still experience profound emotional uncertainty during the waiting period.
- Families and close relatives often share the psychological burden of the diagnostic process.
- Honest and direct communication contributed to patients' sense of safety and trust.
- Empowerment, coping strategies and involvement of family members can play a key role in navigating this period.
- The findings suggest that psychosocial support should be a part of prehabilitation programs.

“I was walking around and feeling nervous all the time, every day. I was walking around with a bad feeling in my stomach. It affected me, but I had to make the days go by...”



REFERENCES & ACKNOWLEDGEMENTS





Artificial Intelligence Use Disclosure: The authors used ChatGPT, including its image-generation functionality (OpenAI, San Francisco, CA, USA), to develop illustrative graphics for this poster. No study data, analyses, or conclusions were generated or modified using artificial intelligence.

RESULTS

The analysis identified four main themes describing how patients experienced the diagnostic phase.



1. Honesty, trust and direct information

“I want to know everything exactly how it is.”



2. To be in a diagnostic pathway is a family project

“My wife was more shocked than me.”



3. To wait and see or do something active

“Life was put on hold.”



4. Everything happens so fast and not knowing what you get into

“It all went very quickly.”

Honesty, trust and direct information: Patients emphasized the importance of clear, direct and honest communication from healthcare professionals. Receiving understandable information and having the opportunity to ask questions contributed to feelings of safety and trust during an uncertain period. In contrast, fragmented communication or lack of information increased insecurity and anxiety.

To be in a diagnostic pathway is a family project: The diagnostic process affected not only the patients themselves, but also their families and close relatives. Many participants described relatives as an important source of support and practical help. At the same time, several patients expressed concern about the emotional impact on family members and tried to protect them from worry and distress.

Wait and see or do something active?: Participants described different coping strategies they used during the waiting period. Some attempted to maintain normal routines, continue working, exercise or stay socially active to “keep life going.” Others experienced the waiting period as emotionally exhausting, characterized by persistent uncertainty, nervousness and difficulty concentrating. Several participants described feeling that life was temporarily “on hold.”

Everything happens so fast: Patients often appreciated the rapid pace and efficiency of the fast-track diagnostic pathway. Quick access to investigations and appointments gave many participants a sense of being taken seriously by the healthcare system. At the same time, several participants felt completely overwhelmed by how quickly the process unfolded and felt insufficiently prepared for the possible implications of the investigations and a potential cancer diagnosis.