## Complementary and Alternative Medicine use in patients with breast cancer: Communication with healthcare professionals

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**Background** The use of complementary and alternative medicine (CAM) among patients with breast cancer is popular, in particular for treating adverse effects of adjuvant endocrine therapy. However, the use of CAM is rarely discussed during patient consultations.

**Purpose** The aim of this study was (1) to gain insight in current patterns in the communication about CAM use between patients and their healthcare professionals (HCPs), (2) to identify barriers for HCPs to adequate communication and counselling about CAM use, and (3) to explore patients? experiences in communication about CAM.

**Method** An inductive, qualitative approach was used. Semi-structured interviews with 9 patients and 36 HCPs from primary and secondary care (oncologists, oncological nurses, hospital pharmacists, general practitioners and community pharmacists) were conducted. Questions related to patients? and professionals? views, experiences and need s with regard to communication on CAM use. All interviews were thematically analyzed.

**Findings** Except from some oncologists, all HCPs indicated that they never ask their patients about CAM use. Most HCPs expect patients to spontaneously report the use of CAM. Other HCPs mentioned lack of time or focus on the conventional therapy as reasons for not discussing CAM. Therefore, communication about CAM is rare and mostly initiated by the patient. When patients disclose CAM use to their HCP, HCPs will take their time to openly communicate about it. Nevertheless, HCPs discourage CAM use in most cases, due to concerns about harmful interactions. HCPs from primary care usually refer the patient to the oncologist as they fear doing something wrong. However, all HCPs, including oncologists, experience a lack of knowledge about CAM and feel uncomfortable in discussing CAM with their patients. Patients seem to notice this uncertainty among HCPs and express their need for reliable advice about CAM.

**Conclusion** Communication about CAM between HCPs and patients with breast cancer seems non-existent or insufficient. Lack of knowledge among HCPs is mentioned as an important barrier. This implies a need for access to evidence-based information sources and integration of CAM in the education and training of HCPs.