

## **Factors influencing adherence to chemotherapy amongst breast cancer patients at a tertiary hospital in the Western Cape: Healthcare workers' perspectives**

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In South Africa, breast cancer is the most commonly-diagnosed cancer amongst women, with an estimated prevalence of one in 28 women affected. Adherence to cancer therapy such as chemotherapy is essential for cancer patients to receive the optimal benefits and ensure treatment efficacy. Patients undergoing treatment therefore need to receive 100% of their intravenous chemotherapy doses. However, various factors such as disease severity, beliefs regarding breast cancer, mental health issues, access to support and relationships with healthcare workers complicate adherence to intravenous chemotherapy. In contexts like South Africa, geographic and socio-economic disparities as well as cultural factors impact on adherence to cancer therapy, yet little is documented and understood about these factors in the South African literature. Given this gap, the aim of this qualitative study was to explore the barriers to and facilitators of adherence to chemotherapy amongst breast cancer patients, from the perspectives of healthcare workers at a tertiary hospital in the Western Cape. The inclusion criteria for this group were doctors or nurses who worked in the chemotherapy unit or the Breast Clinic and who were in regular contact with breast cancer patients. In addition, these healthcare workers should have been involved in the treatment regimen or administration of chemotherapy to breast cancer patients and should have worked at the clinic or chemotherapy unit for at least one year. The study received ethical approval from both Stellenbosch University's Health Research Ethics Committee (HREC) (Reference number: S19/07/130) as well as the Western Cape Department of Health. Participants were three doctors and five nurses. Data collection took place between December 2019 and May 2021. Interviews were guided by an interview schedule, were transcribed verbatim and analysed using thematic analysis and ATLAS.ti v8. The findings demonstrated that barriers and facilitators to adherence occurred at both an individual and structural level. At an individual level, the most salient barriers to adherence were limited patient knowledge and awareness regarding breast cancer. Facilitators at this level were patient self-motivation and support from significant others. Structural barriers to adherence were related to transport and finances, which impacted on patients' ability to get to the hospital to receive their treatment.

These findings highlight important factors that complicate adherence to chemotherapy amongst South African women. Further research should focus on interventions aimed at mitigating the impact of individual, and structural barriers to adherence to chemotherapy.