

Background

After treatment for head and neck cancer (HNC) up to 90% of patients have difficulties eating and drinking, with social eating reported as a challenge and loss. Extant interventions are not specific to support the social dimension of eating, nor replicable in modern-day clinical practice but have indicated some of the key characteristics and areas of social eating that need to be supported following HNC treatment (Patterson et al., 2018; Chen et al., 2019; Kristensen et al., 2019; Kristensen et al., 2020).

Aim

The aim of this research was to plan and develop an intervention to promote social eating for patients living with and beyond HNC.

Underpinning Theory

The adapted Engel (1978) diagram displayed here highlights the dynamic biopsychosocial losses associated with reduced social eating.

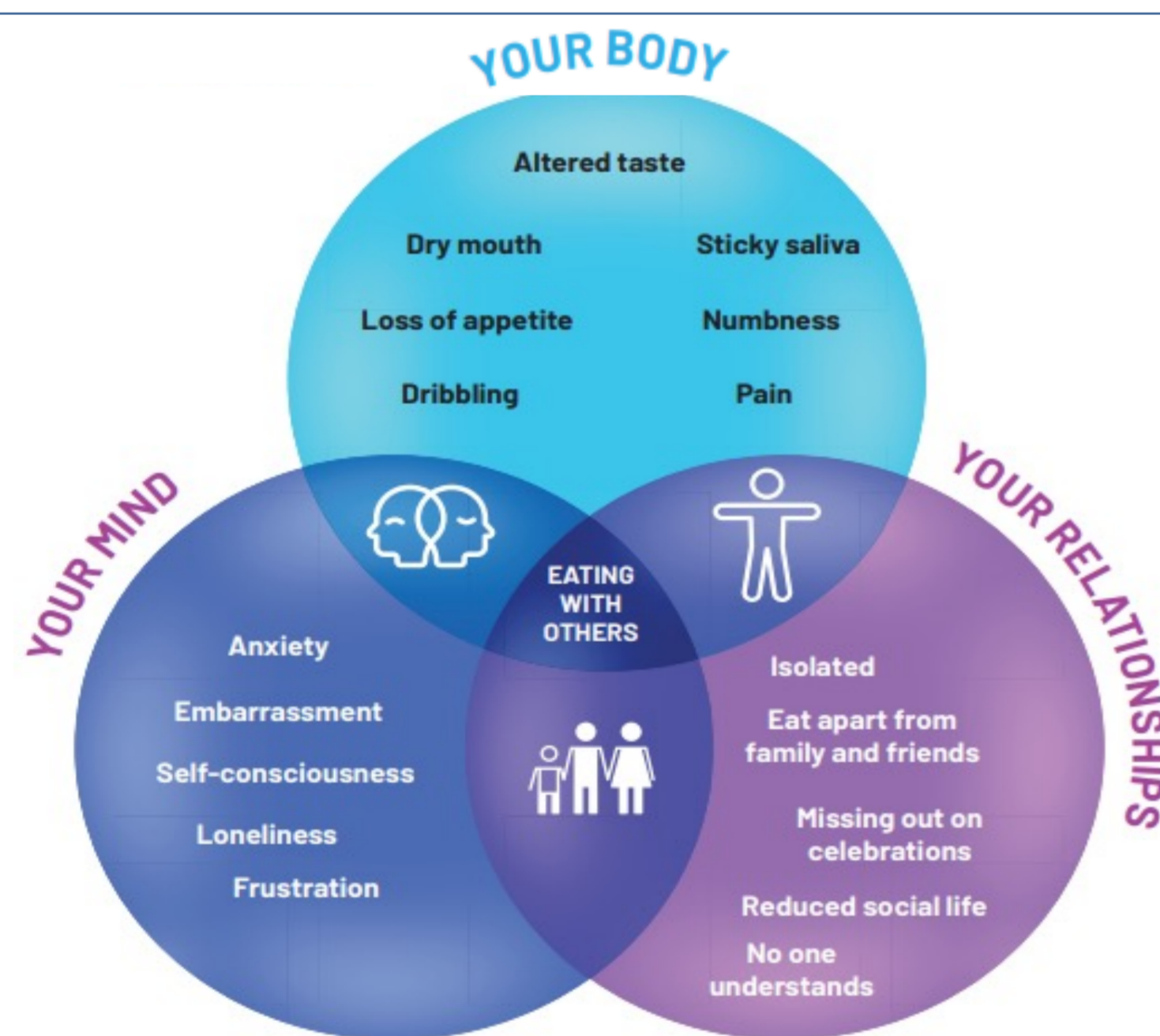


Figure 1: Adapted biopsychosocial model

Results

An evidenced-based and theory-driven self-management resource, entitled 'Eating with Others', was designed to promote social eating for patients with HNC. Sections included benefits of social eating, strategies and reflective activities to overcome social eating barriers, making a personal plan and use of social eating card. This is the first intervention, to the researchers' knowledge, that specifically seeks to provide support for patients living with social eating challenges after HNC treatment. User-testing demonstrated acceptability of 'Eating with Others'. Additional mixed-methods evaluation is required to determine the feasibility of this intervention in clinical practice.

Methods

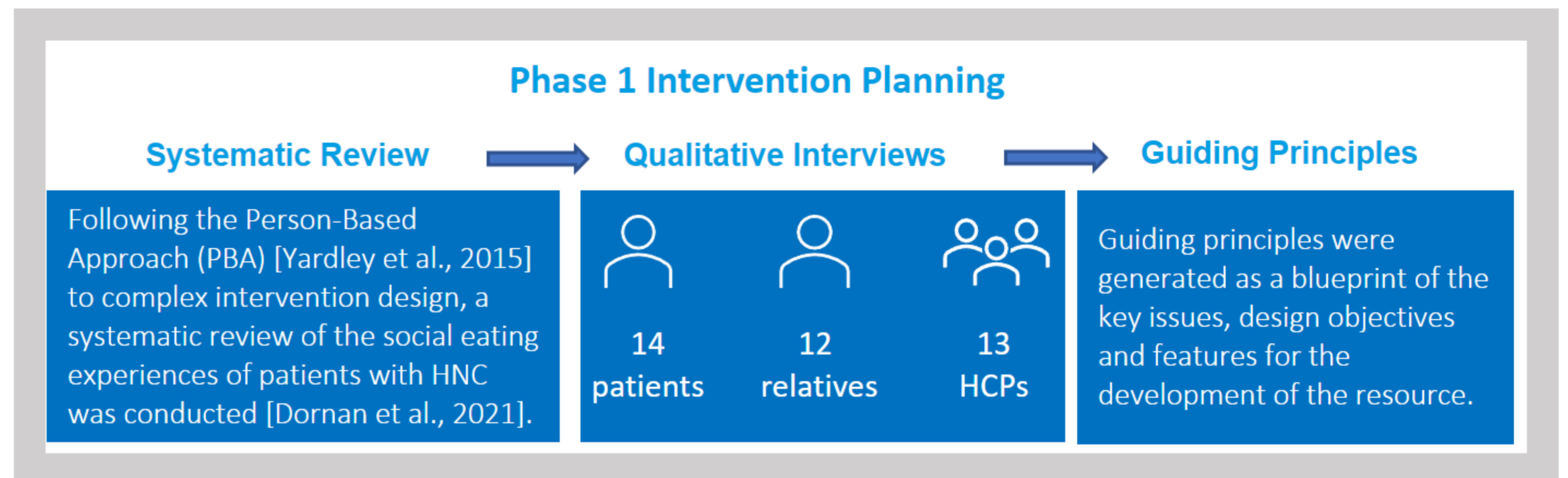


Figure 2: Phase 1 Methods

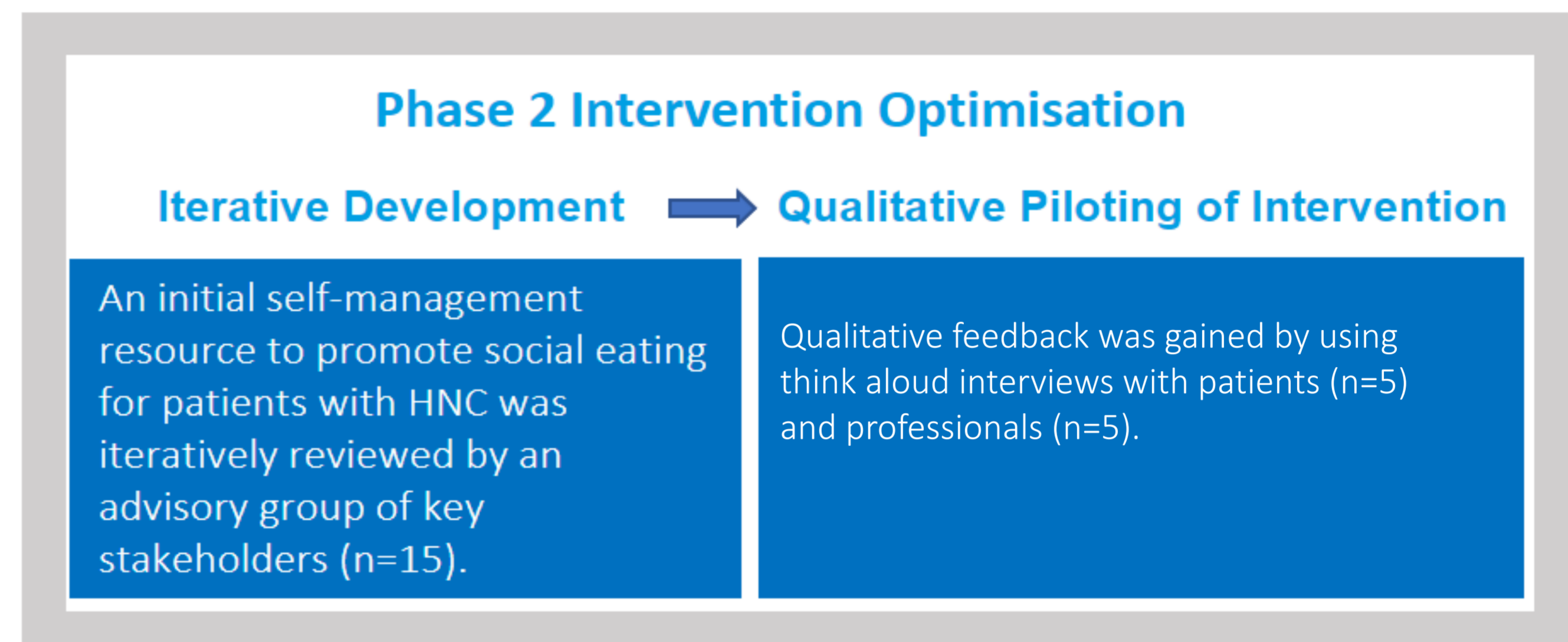


Figure 3: Phase 2 Methods

'Eating with Others' Intervention



Figure 4: Eating with Others Intervention

It can be common to experience changes when eating in front of other people, for example:



Figure 5: Psychological changes eating with others

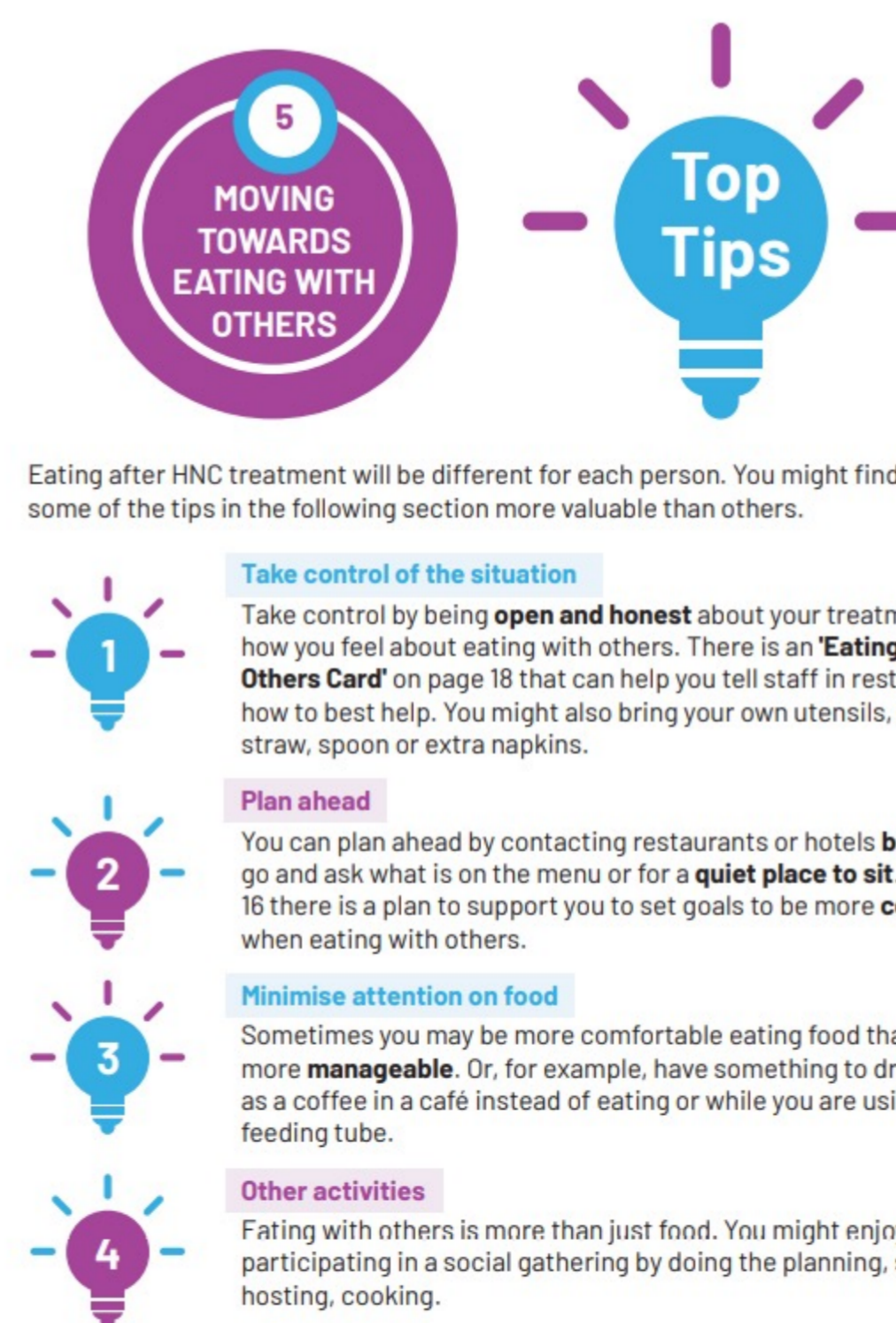


Figure 6: Top tips to eat with others after HNC treatment (1)

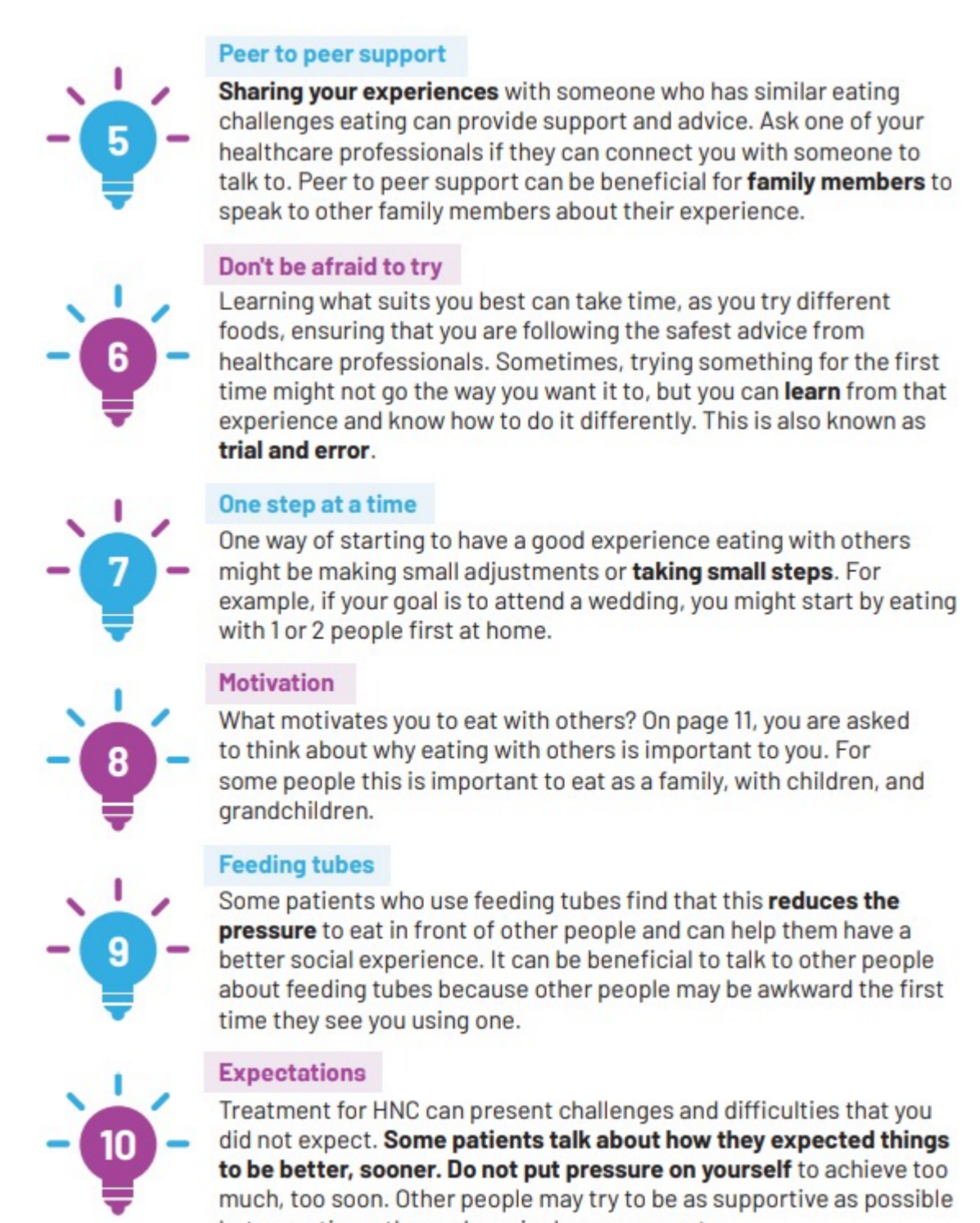


Figure 7: Top tips to eat with others after HNC treatment (2)

See our published work:

Dornan, M., Semple, C., Moorhead, A. & McCaughan E. (2021) A qualitative systematic review of the social eating and drinking experiences of patients following treatment for head and neck cancer. *Support Care Cancer* 29, 4899–4909.

Dornan, M., Semple, C. & Moorhead, A. (2022a) Experiences and perceptions of social eating for patients living with and beyond head and neck cancer: a qualitative study. *Support Care Cancer* 30, 4129–4137.

Dornan, M., Semple, C. & Moorhead, A. (2022b) "It's part of our life now": a qualitative exploration of the social eating experiences of family members of patients living with head and neck cancer. *Support Care Cancer* 30, 10159-10167.

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References

- Chen S, Huang B, Hung T, Lin C, Chang Y (2019) Impact of a behaviour change program and health education on social interactions in survivors of head and neck cancer: Randomized controlled trial. *Psychooncology* 28(2):293–300.
- Engel GL (1978) The Biopsychosocial model and the education of health professionals. *Ann N Y Acad Sci.* 310(1):169–181.
- Kristensen MB, Mikkelsen TB, Beck AM, Zwisler A, Wessel I, Diepernek KB. (2019) To eat is to practice – managing eating problems after head and neck cancer. *J Cancer Surviv* 13(5):792–803.
- Kristensen MB, Mikkelsen TB, Beck AM, Zwisler A, Wessel I, Diepernek KB. (2020). Effects of a Multidisciplinary Residential Nutritional Rehabilitation Program in Head and Neck Cancer Survivors—Results from the NUTRI-HAB Randomized Controlled Trial. *Nutrients* 12(7).
- Patterson JM, Fay M, Exley C, McColl E, Breckons M, Deary V (2018) Feasibility and acceptability of combining cognitive behavioural therapy techniques with swallowing therapy in head and neck cancer dysphagia. *BMC Cancer* 18(1):1–11.
- Yardley L, Morrison L, Bradbury K, Muller I (2015) The person-based approach to intervention development: application to digital health-related behavior change interventions. *J Med Internet Res* 17(1): e30.