



**Karolinska
Institutet**

Sickness absence and encounters with healthcare regarding work after breast- cancer surgery; a prospective cohort study

Mirkka Söderman, Friberg E, Alexanderson K, Wennman-Larsen A

Division of Insurance Medicine

Department of Clinical Neuroscience

Karolinska Institutet, Stockholm, Sweden

Published Supportive Care in Cancer, September 2018

Breast cancer (BC) and worklife

- Most common cancer among women
- 5-year survival rate 90%
- Paid work - a very important part of women's lives¹
- Long-term probability for return-to-work 43%-93%^{2,3}
- 71% some sickness absence the first year after diagnosis⁴
- Guidelines for sickness certification

1.Nilsson, 2013 2.Islam, 2014 3.Wang, 2018 4.Kvillemo, 2017

Previous research on patient's experiences of encounters regarding work

In general

→ Support, encourage, adequate information^{1,2,3}

→ Promoting or hindering return-to-work^{1,2,3}

Women with BC

→ Adequate information & guidance⁴, Attitudes from healthcare⁵, Advice and support⁶

The aim was to explore

- if women had experienced encounters regarding work from healthcare professionals during the first year after BC surgery and
- if this was associated with sickness absence during the second year

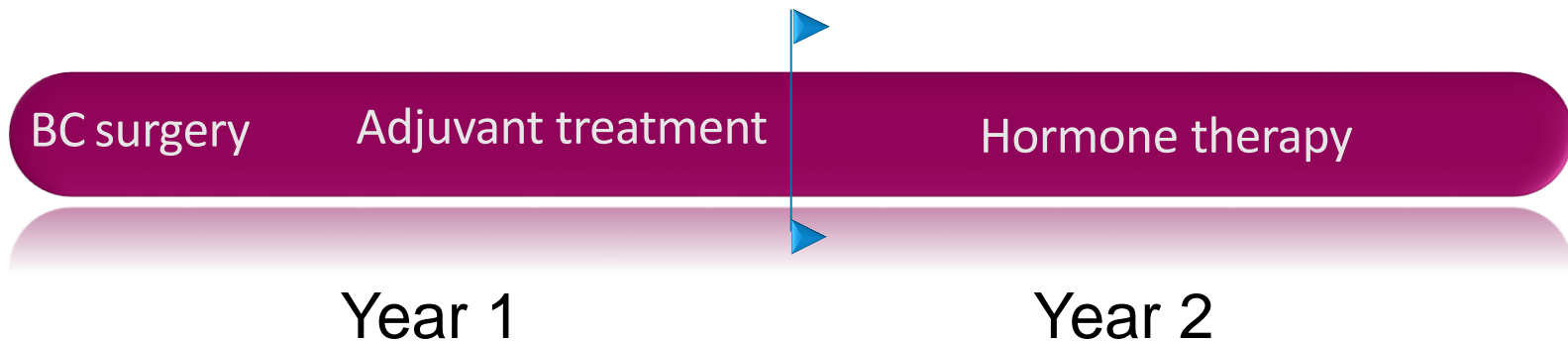
Study design

- Prospective cohort study
 - Two-year follow-up
 - Screened for eligibility June 2007 - November 2009
 - Inclusion at four weeks after BC surgery
 - Living in Stockholm county, Sweden
 - Literate in Swedish
 - With a first BC diagnosis, non-metastatic
 - In working age
-

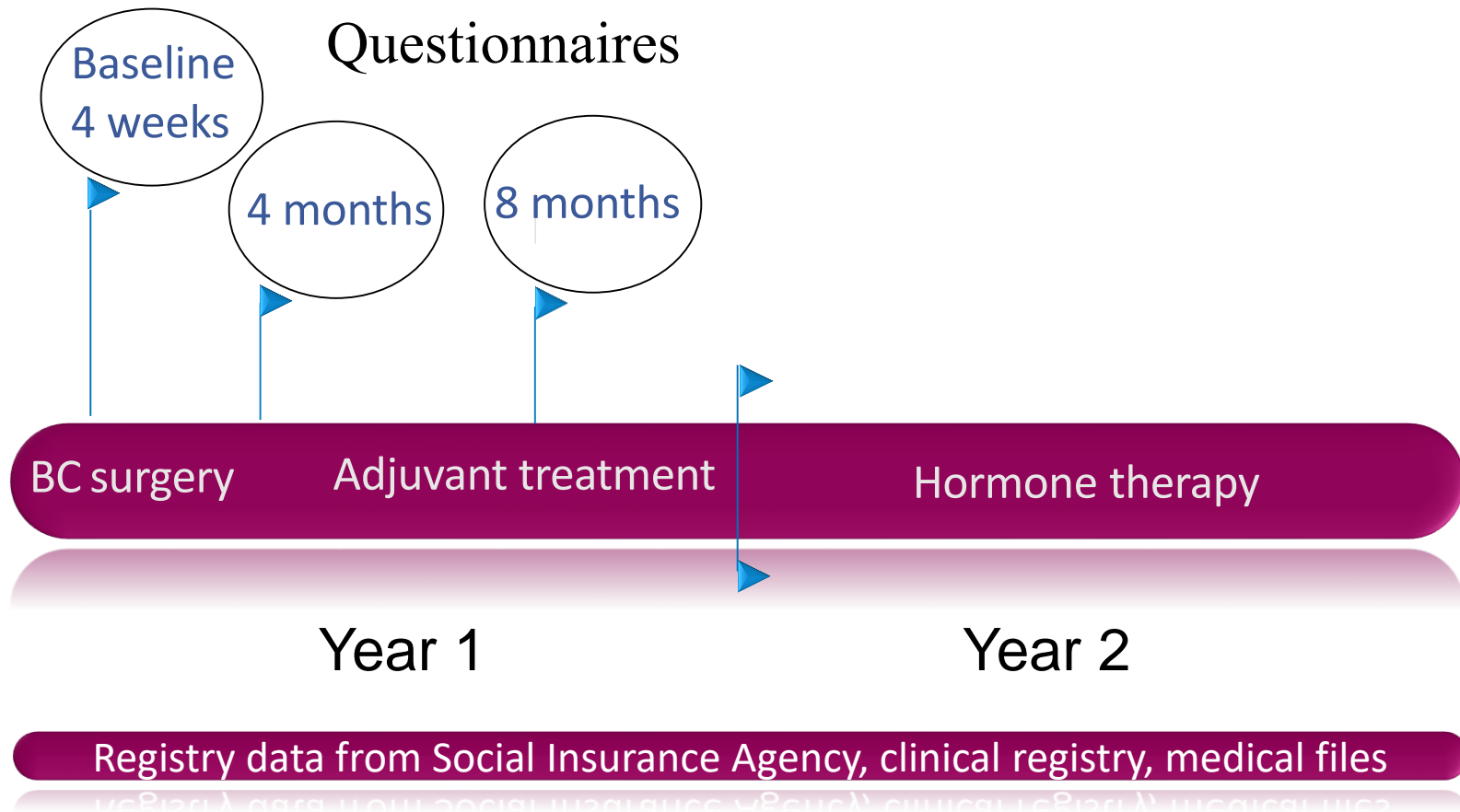
Material and method

- Study population
 - 690 women with primary breast cancer surgery, aged 24-63 year
 - Data from questionnaires, registers, medical files
 - Descriptive statistics
 - Logistic regression (OR and 95% CI adjusted for: sociodemographics, self-rated health, treatment)
-

Overview of treatment episodes in relation to follow-up



Overview of treatment episodes in relation to follow-up



Treatment after BC surgery

- 82% radiotherapy
 - 49% chemotherapy
 - 13% targeted therapy
 - 81% started hormone therapy

 - 5% relapse within study period
-

The cohort of 690 women with BC

- Age mean 51 years
 - 85% born in Sweden
 - 57% college/university education
 - 86% good to excellent health at baseline
-

The cohort of 690 women with BC

- 66% cancer stage 0-1, 34% cancer stage 2-3
 - 66% breast conserving surgery, 36% mastectomy
 - 56% sentinel lymph node biopsy, 43% axillary lymph node dissection
-

Results

36% sickness absence (SA) days
in the second year after surgery

Three types of encounters regarding work among women with BC surgery (n=690)

Type of encounter	Baseline n (%)	4 months n (%)	8 months n (%)	At least once within 8 months n (%)
Advice and support regarding work	404 (58.6)	364 (52.8)	376 (54.5)	555 (80.4)
Encouraged to be on SA	253 (36.7)	212 (30.7)	179 (25.9)	349 (50.6)
Encouraged to work	272 (39.4)	263 (38.1)	333 (48.3)	457 (66.2)

Three types of encounters regarding work among women with BC surgery (n=690)

Type of encounter	Baseline n (%)	4 months n (%)	8 months n (%)	At least once within 8 months n (%)
Advice and support regarding work	404 (58.6)	364 (52.8)	376 (54.5)	555 (80.4)
Encouraged to be on SA	253 (36.7)	212 (30.7)	179 (25.9)	349 (50.6)
Encouraged to work	272 (39.4)	263 (38.1)	333 (48.3)	457 (66.2)

The associations between encounter regarding work at least once within 8 months after the BC surgery and days of SA during year 2, among women with BC surgery

	Crude OR (95% CI)	Adjusted OR (95% CI)
Advice and support regarding work		
SA 0-14 days	Ref.	Ref.
SA 15-90 days	0.9 (0.5-1.5)	0.8 (0.5-1.4)
SA 91-365 days	0.6 (0.3-1.0)	0.5 (0.3-0.9)
Encouraged to be on SA		
SA 0-14 days	Ref.	Ref.
SA 15-90 days	1.6 (1.1-2.4)	1.1 (0.7-1.8)
SA 91-365 days	1.3 (0.8-2.0)	0.7 (0.4-1.1)
Encouraged to work		
SA 0-14 days	Ref.	Ref.
SA 15-90 days	1.0 (0.6-1.5)	1.1 (0.7-1.8)
SA 91-365 days	0.4 (0.3-0.7)	0.6 (0.3-0.9)

Adjusted for age, country of birth, educational level, type of breast surgery, type of axillar surgery, chemotherapy

The associations between encounter regarding work at least once within 8 months after the BC surgery and days of SA during year 2, among women with BC surgery

	Crude OR (95% CI)	Adjusted OR (95% CI)
Advice and support regarding work		
SA 0-14 days	Ref.	Ref.
SA 15-90 days	0.9 (0.5-1.5)	0.8 (0.5-1.4)
SA 91-365 days	0.6 (0.3-1.0)	0.5 (0.3-0.9)
Encouraged to be on SA		
SA 0-14 days	Ref.	Ref.
SA 15-90 days	1.6 (1.1-2.4)	1.1 (0.7-1.8)
SA 91-365 days	1.3 (0.8-2.0)	0.7 (0.4-1.1)
Encouraged to work		
SA 0-14 days	Ref.	Ref.
SA 15-90 days	1.0 (0.6-1.5)	1.1 (0.7-1.8)
SA 91-365 days	0.4 (0.3-0.7)	0.6 (0.3-0.9)

Adjusted for age, country of birth, educational level, type of breast surgery, type of axillar surgery, chemotherapy

The associations between encounter regarding work at least once within 8 months after the BC surgery and days of SA during year 2, among women with BC surgery

	Crude OR (95% CI)	Adjusted OR (95% CI)
Advice and support regarding work		
SA 0-14 days	Ref.	Ref.
SA 15-90 days	0.9 (0.5-1.5)	0.8 (0.5-1.4)
SA 91-365 days	0.6 (0.3-1.0)	0.5 (0.3-0.9)
Encouraged to be on SA		
SA 0-14 days	Ref.	Ref.
SA 15-90 days	1.6 (1.1-2.4)	1.1 (0.7-1.8)
SA 91-365 days	1.3 (0.8-2.0)	0.7 (0.4-1.1)
Encouraged to work		
SA 0-14 days	Ref.	Ref.
SA 15-90 days	1.0 (0.6-1.5)	1.1 (0.7-1.8)
SA 91-365 days	0.4 (0.3-0.7)	0.6 (0.3-0.9)

Adjusted for age, country of birth, educational level, type of breast surgery, type of axillar surgery, chemotherapy

Summary

- A majority had experienced encounters regarding work and SA during the first year after their surgery
 - Most had no SA during the second year after surgery
 - To experience advice and support regarding work and to be encouraged to work was associated with less days of SA
-

Conclusion

There seems to be an association between encounters from healthcare professionals regarding work issues and future sickness absence among women with BC.

Thank you!

mirkka.soderman@ki.se

