

This is a repository copy of P2.06-26 The military mesothelioma experience study (MiMES): initial findings and implications for practice.

White Rose Research Online URL for this paper: http://eprints.whiterose.ac.uk/153215/

Version: Accepted Version

Proceedings Paper:

Tod, A. orcid.org/0000-0001-6336-3747, Darlison, L., Ejegi-Memeh, S. et al. (1 more author) (2019) P2.06-26 The military mesothelioma experience study (MiMES): initial findings and implications for practice. In: Journal of Thoracic Oncology. 2019 IASLC World Conference on Lung Cancer, 07-10 Sep 2019, Barcelona, Spain. Elsevier, S765-S765.

https://doi.org/10.1016/j.jtho.2019.08.1644

Abstract available under the terms of the CC-BY-NC-ND licence (https://creativecommons.org/licenses/by-nc-nd/4.0/).

Reuse

This article is distributed under the terms of the Creative Commons Attribution-NonCommercial-NoDerivs (CC BY-NC-ND) licence. This licence only allows you to download this work and share it with others as long as you credit the authors, but you can't change the article in any way or use it commercially. More information and the full terms of the licence here: https://creativecommons.org/licenses/

Takedown

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.



The Military Mesothelioma Experience Study (MiMES): initial findings and implications for practice

Tod AM

Ejegi-Memeh S

Darlison L

IASLC Abstract 2019

Background

Mesothelioma is one of the most challenging of cancers; it is incurable, has a long latency period, and is associated with extreme symptom burden. Mesothelioma mostly affects men over 65 years of age. It is linked to asbestos exposure, normally 15-40 years prior to diagnosis.

Its industrial nature diagnosis can mean navigating complex health, legal and welfare systems. Clinical experience and anecdotal evidence from health professionals indicate that veterans encounter particular challenges in recognising and reporting early symptoms, getting a diagnosis and accessing care and support, including financial help.

Little is known about mesothelioma amongst UK military veterans. Research is required to better understand the mesothelioma experience amongst UK military veterans and know how better to meet their needs.

Methods

The Military Mesothelioma Experience Study (MiMES) is a qualitative interview based study that aims to identify the care and support needs of UK military veterans with mesothelioma from the perspective of veterans, family carers, and health professionals and support agency staff. This paper presents findings from the patient and carer data. Semi-structured interviews of up to 15 veterans with mesothelioma and 15 family carers are being conducted. Recruitment is via trusted charitable organisations including Mesothelioma UK and Asbestos Support Groups. Interviews are transcribed and analysed using Framework Analysis techniques. Interviews are being conducted between December 2018 and June 2019. 10 participants have been recruited to date (7 patients and 3 family carers).

Results

The findings provide unique insight into the nature of asbestos exposure whist in the armed forces, as well as participants' diagnostic experience. The impact of military culture on how people respond to the diagnosis and how they navigate services is considered. Valued sources of information and support included specialist mesothelioma medical and nursing staff as well as mesothelioma/asbestos charities. Participants reported feeling 'in the middle' when it came to understanding legal and financial implications of their disease and asbestos exposure in the military. Being

caught between civil and military claim systems and information services could create problems, especially when making a claim was time-pressured. This had an impact on people's quality of life over the patient pathway.

Conclusions

MiMES is the first study to explore the experiences of UK military veterans with mesothelioma. Implications for practice and collaborative working are considered.

376 words (400 words maximum)