

## [TRACK 3: SURVIVOR STORIES: TYPES OF DECISION MAKERS]

### Jim, 67 years old: Part I

[Jim]

I went to see my doctor for an annual checkup. After that he asked me to come back to the office—this time with Eve, to discuss the results of some blood tests. When we went to see him he told us that he noticed a rise in my PSA. He said PSA stands for Prostate Specific Antigen. The PSA test is a blood test that measures the amount of protein in the blood produced by the prostate gland. He was concerned about this change and said that I should get some more tests done by a urologist—a doctor who specializes in treating prostate problems.

[Narrator] The tests included a biopsy which turned out to be positive for cancer. And the urologist explained the treatment options to Jim and his wife. It came down to three choices that they were willing to consider: surgery to take out the entire prostate, limited surgery with radiation therapy, or watch and wait. These treatments have different side effects, some of which don't last long, like discomfort, pain and fatigue. But, other side effects, like some kinds of sexual problems, might be permanent. Initially, Jim and Eve felt that they needed to decide on the treatment right away.

[Jim]

So, I asked my urologist what he would do if he were in the same situation. He told me what he would do if he were diagnosed with prostate cancer, and urged me to do the same. So, I thought about it on the ride home from his office. Eve and I talked about my treatment options again. I wanted to do whatever the urologist recommended, to just get the whole thing over with. But, Eve reminded me of our neighbor, Bob, who had also recently been diagnosed with prostate cancer. She said, 'why not talk to Bob, see what he says.' 'I don't know,' I said, 'this is kind of hard to talk about.' But, this was serious, and I could see that Eve was maybe even more scared than I was, so I said I would talk with him.

[Narrator]

Before we hear what Jim did, let's talk more about how people make decisions about health and cancer. There are basically three types of decision-makers: The person who lets others make decisions about their health; The person who makes decisions about their health after talking with others; and, The person who makes their own decisions about their health. Each of these decision-making styles is neither better nor worse than the others. We will talk about them in more detail to help you better identify which of those types of decision-maker you are.

[Joan]

When I start working with a cancer survivor, I try to figure out which kind of decision-maker that person is. That helps me work better with them. The first group is people who let others make decisions about their health and are comfortable with having a doctor or a family member decide. An advantage to this type of decision-making style is that decisions are made rather quickly with little conflict because the person is ready to accept the expert's opinion. One disadvantage is that the doctor may not really know the person's preferences, habits, work, family, and lifestyle activities.

[Joan]

The second group of decision-makers is people who make their own decisions about health after talking it over with other people. They look for all of their possible options to treatment, both

standard treatment and treatment in clinical trials. They tend to balance the factor of time with available options in making their decisions. They look at the options provided by their doctors and decide if those options make sense for them. They choose to make decisions as a partner with their doctors and want a treatment plan that takes into account their habits and daily lifestyle choices. The disadvantage to being this type of decision-maker is that it takes time. This type of decision-maker can go back and forth about decisions until he or she selects the best option for them.

[Joan]

The third type of decision-maker is the person who likes to take complete charge and responsibility for making each and every decision. These people worry over each decision and may express lots of confusion and doubt even when they have made their decision. They choose to make all the decisions and can upset their doctors and others who are caring for them. These persons want as much control as possible over their illness and treatment. They develop plans of action taking into account as many choices as possible. A downside to this style of making decisions is that there is uncertainty about long-term results and this means that it will be hard to make final decisions.

[Narrator]

In our example with Jim, he seemed ready to let his doctor make the cancer treatment decision for him. But, is this the way in which he normally makes decisions? Or, did the news of his diagnosis overwhelm him at first and cause him to change the way he would normally approach a problem? What kind of decision-maker are you? And, might that change if you got unexpected news?