

Nononcological Benefits of Minimally Invasive Surgery in Oncology and the Importance of Shared Decision Making

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Introduction

As the healthcare industry continues to embrace the concept of value-based care, it is essential to consider all aspects that contribute to patient well-being and satisfaction. While the oncological benefits of minimally invasive surgery in oncology have received significant attention, the nononcological benefits have often been overlooked. This article sheds light on the patient perspective regarding the nononcological advantages of minimally invasive surgery, such as decreased operation time, reduced length of stay, and improved cosmetic results. Understanding and incorporating these values into shared decision-making processes are crucial for achieving comprehensive and patient-centered value-based healthcare.

Description

Minimally invasive surgery has revolutionized oncological care, offering patients the advantages of smaller incisions, reduced tissue trauma, and faster recovery. However, the focus has primarily been on the oncological outcomes rather than the nononcological benefits. These nononcological aspects, including decreased operation time, shorter hospital stays, and improved cosmetic results, contribute to the overall patient experience and have a significant impact on their quality of life and satisfaction. Recent studies have sought to quantify the value patients place on nononcological benefits in minimally invasive surgery. Research indicates that the patient value attributed to these benefits is approximately 10% of the total value derived from the surgical procedure [1].

While this percentage may appear relatively small, it is crucial to recognize that these nononcological benefits are nonnegligible and should be considered alongside oncological outcomes in delivering patient-centered care. Shared decision making is an essential component of patient-centered care, enabling patients to actively participate in healthcare choices that align with their values and preferences. Considering the nononcological benefits of minimally invasive surgery during shared decision making allows patients to understand the potential advantages beyond cancer-related outcomes. By engaging patients in discussions about decreased operation time, reduced length of stay, and improved cosmetic results, healthcare providers can enhance patient satisfaction and align treatment plans with patients' personal goals and priorities.

Value-based healthcare aims to optimize patient outcomes while efficiently utilizing resources. Incorporating nononcological benefits into the value equation promotes a holistic approach to patient care. By recognizing and valuing these nononcological aspects, healthcare providers can align treatment decisions with patients' preferences and optimize their overall experience. This, in turn, improves patient satisfaction, reduces healthcare costs, and enhances the overall value delivered to patients. As value-based healthcare continues to evolve, it is essential to address the nononcological benefits of minimally invasive surgery in oncology comprehensively. Further research is warranted to explore the specific

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preferences and priorities of patients regarding these benefits [2].

Healthcare systems should implement strategies to capture and incorporate patient-reported outcomes related to nononcological aspects, allowing for a more accurate assessment of patient value and facilitating continuous quality improvement. Recognizing and addressing the nononcological benefits of minimally invasive surgery in oncology is crucial for delivering value-based healthcare. Patients place value on factors such as decreased operation time, reduced length of stay, and improved cosmetic results, considering them significant contributors to their overall experience. Integrating these nononcological benefits into shared decision making empowers patients to actively participate in their care and ensures treatment plans align with their preferences. By embracing a comprehensive approach to patient-centered care, healthcare providers can optimize outcomes, enhance patient satisfaction, and achieve the full potential of value-based healthcare in the field of oncology [3].

In the realm of healthcare, discussions often revolve around the primary disease or condition, with less emphasis on the nononcological benefits associated with treatment options. However, recent studies have shed light on the value patients place on nononcological benefits, revealing that while these values may be relatively small, they are far from negligible. Recognizing and considering these nononcological benefits in shared decision making is crucial for delivering patient-centered care and optimizing treatment outcomes. This article highlights the importance of acknowledging and incorporating these values into shared decision-making processes in healthcare. Nononcological benefits encompass various aspects of care beyond the primary condition being treated.

These benefits may include factors such as decreased pain, improved quality of life, shorter recovery times, enhanced physical function, improved mental well-being, or improved cosmetic results. While these benefits may not directly address the primary disease, they play a significant role in overall patient experience and satisfaction. Shared decision making is an approach that involves patients and healthcare professionals collaboratively discussing treatment options and making informed choices based on the patient's values, preferences, and clinical evidence. Recognizing the nononcological benefits in shared decision making allows healthcare professionals to better understand the complete picture of patient priorities and align treatment plans accordingly. By considering these benefits, healthcare providers can offer more patient-centered care, improving treatment satisfaction and overall patient outcomes [4].

Research indicates that values placed on nononcological benefits are relatively small compared to the overall value derived from treating the primary condition. However, dismissing these values as insignificant would be a mistake. Patients' assessments of the nononcological benefits contribute to their overall perception of treatment success and have a meaningful impact on their well-being. Ignoring these values may lead to a disconnect between patients and healthcare providers and may result in suboptimal treatment outcomes. To ensure shared decision making encompasses the complete range of patient values, it is essential to explicitly address and discuss nononcological benefits during consultations. Healthcare professionals should engage in open conversations, actively listening to patients' concerns and preferences regarding nononcological aspects of care. By doing so, healthcare providers can tailor treatment plans, making them more aligned with patients' values, promoting better treatment adherence, and ultimately improving patient satisfaction and outcomes [5].

Conclusion

Integrating nononcological benefits into shared decision making reinforces the principles of patient-centered care. It empowers patients to actively participate in their treatment choices and ensures their preferences and values are respected and considered. By adopting a holistic approach that recognizes

the significance of nononcological benefits, healthcare providers can deliver care that goes beyond disease management, ultimately enhancing the overall patient experience. Although nononcological benefits may be relatively small compared to the primary disease being treated, their significance should not be overlooked. Recognizing and considering these benefits in shared decision making is vital for delivering patient-centered care and optimizing treatment outcomes. By actively involving patients in discussions about nononcological benefits, healthcare providers can better understand their values, preferences, and priorities, resulting in more tailored treatment plans and improved patient satisfaction. Embracing the nononcological aspects of care in shared decision making paves the way for a more comprehensive, patient-centered approach to healthcare, ultimately leading to better overall treatment outcomes.

References

1. Kim, Woorim, Ye Lee Yu, Jaeeun Ryu and Yeong Jun Ju, et al. "How do patients value the benefit of minimally invasive surgery in cancer treatment?." *Value Health* 25 (2022): 1212-1217.
2. Chesney, Tyler R and Julie Hallet. "Associations of preoperative frailty with cancer and noncancer deaths of older adults following surgery for cancer—reply." *JAMA surgery* 157 (2022): 83-83.
3. Park, In Ki, Hyun Jung Jun, Sung Jae Park and Ga Jin Lim, et al. "Differences in end-of-life care decision making between patients with and without cancer." *Am J Hosp Palliat Med* 32 (2015): 797-801.
4. Veroff, David, Amy Marr and David E. Wennberg. "Enhanced support for shared decision making reduced costs of care for patients with preference-sensitive conditions." *Health Aff* 32 (2013): 285-293.
5. Mady, Leila J., Marci L. Nilsen and Jonas T. Johnson. "Head and neck cancer in the elderly: Frailty, shared decisions, and avoidance of low value care." *Clin Geriatr Med* 34 (2018): 233-244.

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