



Editorial Comment on “...I Wish Someone Told Me About That...”: A Qualitative Assessment of the Educational Needs of Patients Undergoing Cystectomy

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This article is an insightful qualitative report discussing patient's educational needs surrounding radical cystectomy. In this study, 17 patients were divided into cohorts based on type of diversion and gender. Utilizing a script, focus groups were prompted to discuss timing, accessibility, usefulness, and barriers regarding education and impact on patient experience. We would like to congratulate the authors on their publication and appreciate their efforts on a vital topic since incorporating patient feedback is critical to progression of care, especially concerning a topic with little quantitative data available.

The authors raise important questions regarding challenges during the perioperative cystectomy period and identify actionable areas of improvement, namely education content, format, and timing. However, one of the major limitations is the single surgeon/institution nature of the series. The design highlights outcomes that are reflective of the institution and surgical team counseling effectiveness, which is not necessarily relevant to another surgeon's patients. Therefore, it is less broadly generalizable. Additionally, as the authors mention, the possibility of bias does exist as the study is homogenous, with similar race and education status, and may be affected by recall and responder bias.

However, this study creates a foundation for future research which could inform an educational quality improvement project around institutional perioperative counseling. Utilizing the needs identified in this series,

interventions such as an interactive website or centralized resource handout could be created and implemented by the authors. Along with that, the incorporation of an objective measure to quantitatively measure a pre- and post-intervention outcome is critical.¹ While lack of generalizability may be a limitation of the study, its specificity is also a strength because it allows development of interventions tailored to the local population. Resources are finite; the development and implementation of solutions to a demonstrated problem deserve objective measurement to ensure appropriate resource utilization.

Patients diagnosed with bladder cancer represent a vulnerable population that may easily be subject to information overload as they begin to digest complex medical diagnoses and treatment options. This, and other, series have demonstrated unmet needs in the perioperative education space. We look forward to the development and objective evaluation of interventions designed to improve care delivery in this space.

CRedit Authorship Contribution Statement

Mary E. Westerman: Conceptualization, Supervision, Writing—review and editing. Harrison Travis: Writing—original draft.

Declaration of Competing Interest

The authors have no conflict of interest to declare.

Reference

1. *Quality Improvement Essentials Toolkit*. Boston: Institute for Healthcare Improvement; 2017.

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