Proffered Papers

Evidence based cancer nursing I

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The AMC nursing approach for patients who need an oesophageal resection

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Since a few years, we increasingly nurse patients who need surgery in the oesophageal area, mainly for malignancies (1993 40 pts, 1997 85 pts). In the AMC, a university teaching hospital with 1035 beds, we work according to the model of primary nursing. This means that two nurses coordinate the care for one or two patients from admission, pre-operative and postoperative planning up to discharge from the hospital. The surgical ward has 64 wards (about 2500 pts/yr) and a team of 56 nurses.

In the surgical outpatients' department, annually more than 200 new patients are presented with a suspected anomaly of the oesophagus and/or gastro-oesophageal junction. About 50% of these patients are candidates for an oesophageal reconstruction either by hiatal oesophageal resection or extended oesophageal resection. After a written informed consent, the patients enter a randomized multicenter trial, hiatal vs extended oesophageal resection (HIVEX), and are assigned to two groups.

HIVEX trial and nursing guidelines. In agreement with the surgical guidelines and the protocol, special guidelines have been drafted for the ward focusing (a) on the technical aspects of care and (b) on the emotional aspects of care for the patients and the nurses. After the operation, the patients stay for about 24 hours in the IC before returning to the ward. For the first days on the ward, a standardized nursing programme is followed with special attention to the detection of early complications. If the patients make an uneventful recovery, the nurses start on the 7th day with training the patients how to swallow water via the reconstructed oesophagus. This also because a control video has to be made on the 8th postoperative day. Thereafter if the video shows uneventful healing, the dietitian prescribes a diet. The ENT specialist inspects the vocal cord and tests the voice. Complications can prolong the hospital stay, but in general the patients leave the hospital after two weeks and do not need help for their daily activities.

Results show that the patient satisfaction has increased due to the special nursing protocol and the close attention during the first days. Our nurses know exactly what they have to do in case of complications and this has a positive influence on the patients. So far (February 1997) we have experience with the care programme in about 50 patients. By July next, more results will be available (about ... patients). The step-by-step nursing approach and the results will be presented in the poster.

Conclusion: Emotionally, the patients have less problems despite the short stay in our ward. For our profession we see an increase of attention for patients who need a oesophageal resection.

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How effective are current treatments in the management of skin reactions induced by radiotherapy to the breast?

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Purpose: Despite the advancement of megavoltage machines to deliver radiotherapy, skin reactions continue to occur. Nurses need to know how to manage skin reactions effectively to promote patient comfort and skin healing. However, previous work in this area has demonstrated that there is a lack of consensus in the United Kingdom concerning skin management (Barkham, 1993; Lavery, 1995). It was therefore deemed appropriate to undertake a systematic review of the literature on this topic in order to provide practitioners with the best evidence available.

Methods: A systematic review was undertaken of the professional literature between 1985 and August 1996, using data bases and manual searches of journals. As well as a review of the current literature available to patients at UK radiotherapy centres.

Results: 27 articles from the professional literature and 43 patient information booklets were obtained. These were analysed in relation to four clinical questions concerning the incidence of skin reactions, the problem to the patient, the treatment advocated by the literature and evidence to support the effectiveness of treatments.

Conclusion: Skin reactions occur in a majority of patients undergoing radiotherapy to the breast and these can affect activities of daily living. Simple general skin care guidelines are advocated.

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Improving nurses' pain assessments: A nursing pain intervention study

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In the field of pain management, nurses are faced with several problems: nurses don't always know that a patient is in pain; nurses often misjudge the patients' pain intensity, pain management is not always adequate and there is a lack of knowledge in nurses with regard to pain and pain management. Based on previous results a simple method for nurses to monitor patients' pain accompanied with teaching nurses, was introduced in three hospitals in the Netherlands. Two hundred sixteen nurses received a short course on pain and pain management, and were instructed to register patients' pain twice a day by using a numerical rating scale from 0 to 10, with 0 representing no pain and 10 representing pain as bad as you can imagine. Nurses' knowledge of pain and pain management was tested before and after the course and showed significant improvement. A quasi-experimental design was employed to assess the impact of the nursing pain intervention on the nurses and on the patients' pain experience. Patients were assigned to either a control group (N = 358) or an intervention group (N = 345). Daily pain registration proved to be feasible. Pain was registered at least once a day in 85% of the cases. In the intervention group, nurses were significantly better informed of the patients' pain experience: levels of agreement between patients' and nurses' ratings of the patients' pain intensity were significantly higher in the intervention group than in the control group. After implementation of the nursing pain intervention, nurses documented more about pain in patients with moderate to severe pain and nurses administered significantly more analgesics to patients in this group. Patients in the intervention group reported significantly less pain than patients in the control group. It can be concluded from this study that a daily pain measurement is feasible in daily nursing practise and that the nursing pain intervention has a positive effect on the quality of nursing care. Based on the results of this study the nursing pain intervension is implemented in 6 hospitals in the region of the Comprehensive Cancer Center Amsterdam.

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Symptom occurrence and symptom distress in chemotherapy patients evaluated by patients and nurses

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Purpose: The purpose of this study was to examine the agreement between patients and nurses concerning symptom occurrence and symptom distress in chemotherapy patients.