

Interactive Sessions

34

Interactive session. Ambulatory infusional therapy

C. Oakley¹, E. Wright¹. ¹*St. George's Healthcare, Medical Oncology Department, London, United Kingdom*

Background: Home health care is one of the most rapidly growing and changing areas of health care provision, necessitated by an increasing elderly population, a need for cost savings, and the consumer awareness movement. Furthermore, technological advancement and refinements in treatment protocols have enabled cancer patients to receive intravenous treatments at home. Such therapies have been associated with reduced risk of infection and costs. Correct allocation of patients to treatment settings should facilitate optimal patient quality of life and allocation of resources. Available literature is mainly descriptive, often lacking a research base. The main paucity lies in comparing home and outpatient treatment settings, individual patient and carer preference, and cost implications of home based services. There is a general enthusiasm for the postulated benefits of home therapy, but inadequate acknowledgement of possible disadvantages, including potential added stress for caregivers. Available home intravenous therapy checklists are short and lack detail, consequently risking allocation of patients to home treatment without adequate assessment, and informed patient and carer choice.

Purpose: The purpose of this workshop is to enable participants to allocate cancer patients to appropriate home or hospital treatment care settings. The session will focus upon an adaptable clinical tool (Oakley C), based on the literature. This tool is designed for use by expert oncology nurses, to allocate patients to home or hospital care settings.

Aims: To promote correct allocation of patients to care settings. Topics to be focused on include:

- Needs of cancer patients and their carers.
- The role of the nurse in providing home therapies.
- Prevalence and professional experience of home cancer intravenous therapy services.
- Education and collaborative practices.

35

A nurse's guide to the Internet

H. Krcmar¹, C. Krcmar². ¹*Hohenheim University, Dept. of Information Systems, Stuttgart, Germany*

Information Technology (IT) is having a profound impact on our daily private and professional lives. Through the Internet, we can access up to date scientific information, purchase items and services, and communicate with colleagues and friends.

The Internet is one of the most rapidly growing sources of information available to the oncology nurse. However, using the Internet to enhance knowledge and improve practice is not widespread among European cancer nurses. The barriers to Internet use are numerous and include: lack of IT knowledge, a reluctance to change information seeking behaviour from traditional (i.e. paper) to electronic form, limited access to a computer and/or the Internet, and difficulty reading and understanding English.

The focus of this interactive workshop, to be held in English and German, is an introduction to understanding, accessing and browsing the Internet. A history of the development of the Internet will be discussed including a critical review of its advantages and disadvantages. Participants will learn what technical hardware is required to access the Internet and terms and jargon specific to IT will be explained. Using relevant examples, the participant will learn how to search the World Wide Web for information of relevance to oncology nursing.

A list of web sites useful to oncology nurses will be provided.

36

Ambulatory infusional therapy – Workshop

H. Jocham. *Jocham Clinic Home Interface, Oberschwabenklinik, D 88212 Ravensburg, Germany*

Infusion therapy is one of the most rapidly growing segments of home care. The increase in the aging population and advances in technology that have increased the safety, effectiveness and availability of home infusion therapies. Advanced technology has produced an array of long-term central venous access devices and infusion pumps that simplify parenteral administration of drugs in the home and have less risk for complications.

Special trained home care nurses are essential for a good quality of nursing care.

Chemotherapy Administration: The demand for more cost-effective methods of treating cancer patients has stimulated the development of comprehensive services including administration of chemotherapy.

Pain Management: Patient controlled analgesia (PCA) is being utilized in the home care setting via a variety of routes: subcutaneous, intravenous, epidural, subarachnoid. For continuous infusion, use of ambulatory infusion pumps offers unimpeded mobility. The analgesic most frequently prescribed is preservative-free morphine.

Home Parenteral Nutrition: The administration of parenteral nutrition at home is a rapidly growing option for cost-effective and beneficial therapy for the malnourished patient with cancer.

37

Stem cell transplantation, a treatment for patients with solid tumours and haematological malignancies. Implications for oncology nursing practice

J. Larsen¹. ¹*Karolinska Institutet, Department of Nursing, Stockholm, Sweden*

The use of high-dose chemotherapy with stem-cell transplantation (SCT) as treatment for malignant diseases has increased over the last decade. SCT provide cure or prolong life for patients with solid tumours and haematological malignancies.

SCT is performed within the context of a life-threatening medical condition, which carries with it many psychosocial stresses. The conditioning regimen prior to the SCT results in a period of profound pancytopenia with a high risk of infections. Furthermore, cytotoxic side effects occur that range from minimal to life threatening. Early side-effects are e.g. nausea, vomiting, mucositis, haemorrhagic cystitis, fluid and electrolyte imbalances, dermatological reactions, acute renal failure, veno-occlusive disease of the liver and infections. During the period that follows SCT the patient might experience loss of control and a state of dependency. Studies of patients undergoing SCT have shown that the treatment may also result in serious long-term, physical and psychosocial sequelae affecting their overall, health-related quality of life.

Patients undergoing SCT have long-term, complex needs of individualised nursing and medical support. In-depth knowledge of the effects of SCT in this group of patients is necessary to discover and understand even small differences in the needs of each patient.

The purpose of the interactive session is to provide a forum for discussion related to SCT and oncology nursing practice.