

Proffered Papers

Implementing research in cancer nursing

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ORAL

Bridging over the gap: Foundation of a nursing research committee in order to achieve research based care of haematology and oncology patients

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Until now nursing practice and decision making are based on advanced practice experience mainly. Far too few guidelines and standards of care are research based; often nurses don't even refer to literature findings. It's not only lack of research on certain issues, but also the fact that there's no tradition among nurses to search literature or to translate research findings into clinical practice. The aim of founding a nursing research committee is not only to achieve a research based nursing care of haematology and oncology patients, but also to create a tradition in nursing practice in which consulting research literature will be as a matter of course. Thereby we expect to bridge over the gap between theory and clinical practice. To achieve these goals, nurses will be given the opportunity to attend a 'step by step' research-training program in which they are enabled not only to translate research findings into nursing practice, but to generate research issues out of their daily practice as well. The interactive training program chosen takes into account the different styles of learning of the students. This method shows nurses that putting in practice nursing research isn't that difficult nurses think it is.

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To be on a side track... a qualitative study of BMT patients with focus on the transition from long time hospitalisation and physical isolation to being back home again

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Background: It is well-known that patients find it very difficult to return to "normal life" after bone marrow transplantation (BMT), and that the rehabilitation process is ever so difficult for them. The presentation is based on a pilot study performed during 1997 and the results published late summer 1998.

Purpose: With special attention to combined social, psychological and existential consequences to describe the experience of patients up to, during and after discharge. The presentation is focusing on the process of being hospitalised and isolated for a long period of time and subsequently returning to "normal life" after BMT.

Method: The investigation was performed through qualitative interviews. The patients progress were monitored from discharge, through the long period of rehabilitation towards a "normal life". Each patient was interviewed four times during a period of three months.

Conclusion: The title of this presentation is inspired by the analysis of patient statements. Having cancer and going through a BMT, seems to them ... "to be on a side track". They experience feelings of loneliness, isolation and not living a true life. The time of rehabilitation is a continual process. Difficulties which continue for a considerable period after a BMT. Patients need qualified help as part of the on going process towards full rehabilitation. Two different models will be suggested to change nursing practice based on the results of the project.

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Selecting hermeneutic phenomenology as a research methodology in cancer nursing: A clinical perspective

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This presentation considers phenomenology as a methodology for research in cancer nursing. Phenomenology is an interpretative process where new meanings and understandings of the phenomena under study can surface (Walters, 1995). In order to illustrate the appropriate use of phenomenology as a research philosophy, when literature to inform nursing practice is sparse, the impact of breast cancer recurrence on the woman's spouse will be used.

From a literature review evidence for assessing spouses concerns at the time of breast cancer recurrence was limited. In using qualitative methodology informed by the philosophical underpinnings of hermeneutic phenomenology, the researcher can elicit and explore experiences of breast cancer recurrence from the spouses perspective.

Hermeneutic phenomenology is a valuable research methodology in oncology nursing and it's congruence with the philosophy of nursing care will be emphasised. Nursing and phenomenology share values of listening to the individuals perspective (Taylor 1993). Phenomenology and nursing recognise that aspects of the experience under study are unique to each person in relation to their context and interpretations, and have common shared meanings with others.

Phenomenology is not without it's limitations. Although nurses understanding and sensitivity to topics in cancer nursing can be facilitated, phenomenology may not immediately direct future nursing care. However the philosophy provides an approach which is explorative in raising issues for further research.

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The validity of faecal occult blood (FOB) testing in population screening for colorectal cancer (CRC)

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CRC is a major health problem whose outcome is crucially dependent on the stage of disease at the time of diagnosis. Consequently, early detection by mass screening is the subject of much international research and debate.

Objective: A systematic review was undertaken to determine the effectiveness of FOB testing in CRC screening. Four issues were addressed: an appraisal of available FOB tests, their impact on CRC mortality, the appropriate screening interval and the factors influencing public compliance with FOB screening.

Methods: A computerised literature search was conducted utilising five databases, and was supplemented by cross referencing and hand-searching. Forty studies published between January 1980 and June 1998 were appraised as they fulfilled pre-defined inclusion and exclusion criteria. A thorough assessment of methodology, combined with an applied hierarchy of evidence resulted in the selection of 21 studies for review.

Results: The evidence from this review is that no single currently available FOB test provides optimal screening performance, that biennial FOB screening reduces CRC mortality by between 6–18%, that there is an advantage in annual screening and that better information can improve compliance rates.

Comment: Definitive answers to many important questions regarding FOB screening for CRC do not currently exist. Before the concept of a national screening programme could be supported, further research is needed, the key elements of which must include the assessment of more effective FOB tests and the promotion of population compliance.