



REVIEW

Nursing interventions to improve the health of men with prostate cancer undergoing radiotherapy: A review

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KEYWORD

Information;
Nursing interventions;
Nurse-led follow-up
care;
Prostate cancer;
Radiotherapy

Summary

The aim of this study was to investigate what nurses do to improve the health of men who are receiving radiotherapy treatment due to prostate cancer. The method was a literature review using a systematic approach. The Cochrane Library, Medline and CINAHL databases were used in a search that covered the period from January 1994 to April 2006. The screening of 200 abstracts resulted in 14 articles corresponding to the research question, which were assessed according to scientific quality. Two independent reviewers performed the screening and quality assessment process using specific protocols. Two themes emerged: nurse-led care related to radiotherapy treatment and patients' experiences of radiotherapy treatment. The results show that there is strong scientific support for nurse-led follow-up care aimed at assisting patients by means of providing information on how to manage side effects (evidence grade A). In addition, there is moderate scientific support for the need to ensure that this information is structured, objective and concrete and that it can be provided by means of audiotapes or over the phone (evidence grade B) as well as weak scientific support for reporting patients' experiences of radiotherapy treatment (evidence grade C).

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Zusammenfassung

Das Ziel dieser Studie bestand darin, zu untersuchen, welche Maßnahmen von Krankenpflegekräften ergriffen werden, um den Gesundheitszustand von Männern zu verbessern, die sich wegen eines Prostatakarzinoms einer Strahlentherapie unterziehen. Die Untersuchung erfolgte mittels einer systematischen Review der Fachliteratur. Es wurden drei Datenbanken abgefragt (Cochrane Library, Medline und CINAHL), wobei der Abfragezeitraum von Januar 1994 bis April 2006 reichte. Beim Screening von 200 Abstracts wurden im Hinblick auf die Studienfrage 14 Artikel herausgefiltert; diese wurden auf ihre wissenschaftliche Qualität geprüft. Zwei unabhängige Reviewer führten mit Hilfe von speziellen Protokollen das Screening und die Qualitätsbeurteilung durch. Dabei kristallisierten sich zwei Themen heraus: eine „Nurse-led“-Nachbetreuung im Hinblick auf die

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Strahlentherapie sowie die Erfahrungen der Patienten mit der Strahlentherapie. Die Ergebnisse der Review zeigen, dass harte wissenschaftliche Beweise für die Effektivität einer „Nurse-led“-Nachbetreuung existieren, deren Ziel darin besteht, die Patienten über Behandlungsmöglichkeiten von Nebenwirkungen der Therapie zu informieren (Evidenz-Grad A). Darüber hinaus besteht eine mäßige wissenschaftliche Evidenz dafür, dass gewährleistet werden muss, dass diese Informationen strukturiert, objektiv und konkret sind und auf Tonträgern oder telefonisch angeboten werden können (Evidenz-Grad B). Schwache wissenschaftliche Evidenz besteht für die Notwendigkeit, die Erfahrungen der Patienten mit der Strahlentherapie zu dokumentieren (Evidenz-Grad C).

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Introduction

An important aspect of the nursing care of patients receiving radiation therapy is the provision of care, support and advice so that treatment disrupts their lives as little as possible. The patients need information about radiotherapy, the treatment planning process, treatment schedule and self-care activities in order to control treatment-related side effects. The majority of patients receive radiotherapy at out-patient clinics and live at home during the treatment. In the last decade the need for nurses to integrate scientific evidence with clinical expertise has been increasingly emphasized especially since technical issues connected to the treatment have dominated the nursing care of patients receiving radiotherapy (Fieler et al., 1996; Johnson and Lauver, 1989; Wengström and Forsberg, 1999).

In recent years, the role of the nurse in Swedish radiotherapy departments has changed from mainly performing treatment to a greater focus on nursing care both during and after treatment. As a result of this change, radiation oncology nursing has become a new subspecialty in Sweden (Wengström and Forsberg, 1999). The introduction of a “named nurse” at radiotherapy departments with responsibility for individual patients during the treatment period has improved the quality of the care provided. This reform also enables the nurse to become familiar with and thus better support the patient to improve health throughout the treatment period. Clinical experience indicates that patients often turn to their “named nurse” if they have questions or need advice on the management of treatment-related side effects. The aim of this review was to systematically search for scientific knowledge on how nurses can best improve health of men with prostate cancer who are receiving radiation therapy.

Background

Prostate cancer is the most common cancer among men in Western countries with 513 000 cases diagnosed in the year 2000 (Swedish Council on Technology Assessment in Health Care (SBU), 2003). In Sweden, with a population of nine million, 7611 new cases were diagnosed in that same year (National Board of Health and Welfare, 2002). Two thirds of these men were 70 years of age or older when the tumor was diagnosed. Prostate cancer is rare before the age of fifty. The incidence has increased during the last decade, due to diagnostic improvements and longer average life expect-

tancy. Radiotherapy is used as adjuvant treatment after surgery or as an alternative to surgery, depending on the stage of the tumor. Patients usually receive radiotherapy 5 days a week for a 6–8 week period.

Radiotherapy treatment often has negative side effects such as cystitis, diarrhea, impotence and fatigue. The side effects may remain for a couple of weeks after the termination of treatment but can become chronic (SBU, 2003). Fransson et al. (2001) described how some men experienced a changed way of living, not participating in social activities due to fatigue, pain, urinary problems, fecal difficulties and sexual dysfunction. Talcott et al. (2003) reported that, 2 years after radiation therapy, men still suffered from urinary, sexual and fecal problems. On the other hand, Staff et al. (2003) described that men with prostate cancer reported higher health-related quality of life after radiotherapy compared to a normal population in the same age group, despite exhibiting a significant decrease in physical functioning. Heyman and Rosner (1996) interviewed patients and their wives about their perceptions and experiences of prostate cancer. The main finding was that informational needs changed over the course of illness, as did the type of information-seeking activities. Both the men and their wives felt that practical advice about how to deal with incontinence and impotence was necessary.

The integration of evidence-based nursing in daily care in the area of radiotherapy, as well as nursing as a whole, requires knowledge of normal human life and functioning as well as knowledge of current diagnosis and treatments. The demand for integration is also emphasized by The Swedish National Board of Health and Welfare, when legislating that the nurses' role rests on a scientific foundation (SFS, 1998:531).

Evidence-based clinical practice can be defined as the will to incorporate the best available research result, professional experience and patients' wishes and expectations into clinical decision making (Sackett et al., 2000; Willman and Stoltz, 2002). One way to obtain the best available research evidence is to perform a systematic literature review which includes the following phases: asking answerable questions, accessing best information, appraising information in terms of validity and relevance, and applying it in patient care (SBU, 1993; Flemming, 1998).

Prostate cancer is the most common form of cancer among men in Western countries. Most available scientific literature on radiotherapy treatment of this type of cancer concerns the improvement of radiation techniques, but also

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