Symptom Clusters in Individuals Living With Advanced Cancer

Peg Esper

<u>OBJECTIVES:</u> To discuss issues related to symptom clusters in patients living with advanced cancer.

DATA SOURCES: Research and review articles.

CONCLUSION: The importance for symptom cluster evaluation in oncology has been documented; however, there remain a number of inconsistencies in the literature as to the best way to accomplish this. Individuals living with advanced cancer are often dealing with symptoms from their disease, as well as prior and current therapies. Research related to patients receiving long-term cancer therapies and the symptom clusters experienced by this group of individuals is needed.

<u>IMPLICATIONS FOR NURSING PRACTICE:</u> Understanding the intricacies of symptom clusters in this population is an area for future research.

KEY WORDS: Symptom clusters, advanced illness.

N THE horizon seems to hover a new dichotomy in oncology care - "living with cancer." With deaths from cancer seeing a steady decline since the early 1990s, and survival rates increasing 16% since the mid 1970s, the diagnosis of cancer is starting to lose, at least to some degree, its death sentence

moniker.¹ Clinicians have long anticipated the opportunity to discuss cancer treatment strategies with patients in the context of a "chronic illness." The advent of novel targeted therapies has created a new paradigm in the treatment of individuals with cancer which has signaled hope for patients with some of the most historically treatment-resistant malignancies.² Overall, cancer patients seem to be living longer. The reality of living with cancer elicits the question, "Can living with cancer really be living?"

Veteran oncology clinicians can easily identify patients whom they observed having the last drop of chemotherapy administered almost synchronous to their taking their last breath, with no regard for the individual's quality of life. As a result, proponents of palliative care have battled for some time and have only recently seen momentum in the promotion of educational

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efforts for all health care providers related to the provision of quality end-of-life care. Now, with the recent advances in medical science, therapies are being designed for long-term chronic administration that will likely become the norm.³ This has even been documented to result in a delay in admitting patients to hospice because of the increasing ability to keep patients moving from one targeted treatment to another. As with our cardiology and endocrinology colleagues, we are starting to experience more long-term relationships with patients who have the fortune (though some might argue use of this term) to be living with their cancer who are now experiencing long-term effects of both their disease as well as its treatment.

This article will explore symptoms frequently seen in advanced cancer and discuss their relationship to therapies being administered in more chronic settings, as well as long-term sequelae of cancer diagnoses, and how these symptoms may cluster together. This discussion will also briefly address current and needed research in this area.

SYMPTOMS SEEN IN ADVANCED CANCER

Patients with advanced cancer have been described as being "polysymptomatic." In fact, a study by Walsh et al⁵ found the median number of symptoms experienced by patients with advanced cancer to be eleven. In this study, the majority of patients were not receiving any anti-cancer therapy at the time. Other studies focusing on patients receiving palliative care have listed the average symptom burden to be at least six symptoms, with as many as 13.4 symptoms being reported. 6-8 A list the most frequently noted symptoms experienced by patients with advanced cancer are provided in Table 1.9-13 These symptoms were primarily identified in patients not currently undergoing cancer therapy. Table 2 lists the symptoms frequently identified in the literature for patients undergoing some form of cancer therapy. 14-16 Neither list is intended to be exhaustive, but comparison of the demonstrates that many symptoms are present whether or not the patient is actively receiving treatment. Patients who are receiving any type of long-term therapy will likely experience a constellation of symptoms that can relate to both the acute therapy-related side effects, regardless of the type of treatment they are receiving, as well as chronic

TABLE 1.
Common Symptoms in Patients With Advanced Cancer
(Not Receiving Treatment)⁹⁻¹³

Pain	Constipation	Dyspnea
Fatigue	Weight Loss	Forgetfulness
Weakness	Anorexia	Taste changes
Dry mouth	Decreased energy	Depression

symptoms that relate to previous treatments or the effects that the cancer may have already had on specific body systems. Chronic symptoms can include lymphedema from prior surgeries, hot flashes from therapy-induced hormonal effects, neuropathy from previous chemotherapy, and pain from tumor infiltration of bone.

In conjunction with detailing lists of potential symptoms experienced by cancer patients either currently undergoing treatment or having undergone treatment, the question has been raised by multiple authors as to how various symptoms may occur together in known or predictable patterns. Defining these "symptom clusters" and their significance is an important focus of ongoing cancer research.

SYMPTOM CLUSTERS IN ADVANCED CANCER

Establishing a Common Language

Both the definition as well as the best way to approach studying symptom clusters in oncology continues to be a topic of discussion. In the earliest definitions, a symptom cluster was reported by Dodd and colleagues¹⁷ to involve three symptoms occurring together that were related but could have different etiologies. Some authors have suggested that symptom clusters should be

TABLE 2.

Common Symptoms in Patients With Advanced Cancer
(Receiving Treatment)¹⁴⁻¹⁶

Anorexia	Fatigue	Dry mouth
Cachexia	Constipation	Cough
Dyspnea	Diarrhea	Neuropathy
Nausea/Vomiting	Alopecia	Delirium
Sleep alterations	Memory loss	Pain
Cutaneous changes	Hot flashes	Stomatitis
Headache	Dysuria	Indigestion
Insomnia	Arthralgias	Mood alteration

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