

Holistic Nursing Approach to Patients with Cancer

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Received date: February 04, 2017; Accepted date: February 06, 2017; Published date: February 13, 2017

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Editorial

In recent years, cancer represents one of the leading causes of death worldwide. It is estimated that as much as 8.2 million of deaths due to cancer occurred in the year 2012, whereas about 171,000 new cases of cancer occur every year. Moreover, it is expected that new cases of cancer will increase by 70% over the next two decades [1].

Nurses in Oncology are required to offer care for the entire course of the patient with cancer, including the processes of diagnosis, treatment, possible recurrence, survival period, palliative care and assisting in a peaceful death [2]. The contribution of nurses is crucial throughout this journey ("cancer journey"), since this is based on the concept of holistic care and on continuous attendance of the patient and his family, but additionally on close collaboration with the other members of the multidisciplinary team [3].

The needs of patients with cancer generally involve the following areas: physical, psychological, social, financial and information needs [4,5], spiritual or religious issues, family relationships, emotional concerns, practical issues (employment, training, preparation of meals, etc.) or other everyday life issues [6]. These requirements are similar in patients who have just been diagnosed with cancer [4], in patients receiving treatment [5] and also in patients after their treatment [6].

In order to support their patients, nurses will have to identify their needs using a holistic approach. The philosophy of nursing is the adoption of a nursing care which integrates all dimensions of life [7]. On the other hand, focusing of care on patient's quality of life is in accordance with the philosophy of holistic approach in nursing [8]. Caring of patients is a dynamic process to address their needs, with adaptation each time to the demands generated by the disease and its treatment. It is personalized and designed to meet any physical, psychological, social and spiritual need of the patient [4,9].

In modern times, there are numerous therapeutic options used to treat cancer. Treatment depends each time on the type and stage of the cancer and can include surgery, chemotherapy, radiation therapy, targeted therapies, biologic therapies, hormonal therapies or bone marrow transplantation. On the other hand, these treatments can cause a large number of side effects, such as fatigue, loss of appetite, suppression of bone marrow (anemia, leukopenia, thrombocytopenia), nausea and vomiting, constipation, diarrhea, alopecia, problems with memory and concentration, peripheral neuropathy, changes in skin and nail, alteration in body image and impaired sexual function [10].

These side effects variously affect the patient in physical, psychological, social and spiritual level, thus minimizing the quality of life. The more symptoms or more distress due to the symptoms experienced by patients, the lower they rate their quality of life. This correlation of the experience of symptoms and quality of life receives

increasing attention in both research and clinical practice by professionals in recent years [11].

Caring of the patient on physical level involves a careful nursing history, assessment of symptom or symptoms by using proper tools, design of an appropriate care plan and a number of physical nursing interventions (nursing practice evidence based).

Psycho-social care is also necessary from the beginning of the diagnosis to the final stages of the disease [12]. Each patient has specific needs which vary depending on the phase of the disease (e.g. sadness, anger, fear, pessimism, reconciliation with God, acceptance) [13]. As treatment progresses, alteration in body image represents one of the important issues that the patient has to manage and which adversely affect its psychology (e.g. alopecia, changes in skin color, installation of an ostomy, mastectomy, changes in the face due to surgical interventions, etc.) [14]. In addition, problems in the workplace and disturbances in family relationships make their appearance during therapy period [12].

The role of the nurse in psychosocial support of patients is vital [12]. Installation of good communication is necessary at this point so as the nurse can understand the way the patient perceive him, what is important to him and how his relationships with others affect his decisions during treatment and after the completion of therapy. Developing of communication between the nurse and the patient's family is also important, so as the patient can have full support during the course of treatment. It has been shown previously that psycho-social care is beneficial in reducing psychological distress and the stress caused to the patient by the physical symptoms and also in improving quality of life [15].

Crucial for the provision of psycho-social care is the development of communication skills (verbal and nonverbal), creating an enabling environment so as the patient can feel comfortable and safe to be reached. This nurse-patient relationship should be based on trust, honesty, understanding, respect and reciprocal objectives [16]. Reporting of the disease, depending on patient's age and type of cancer, and the education of the patient and its family should be tailored to their needs [12].

Caring of spiritual status is also a dimension of holistic patient care. Spiritual well-being is a subjective experience that occurs both inside and outside of traditional religious systems [12]. The diagnosis of cancer is a turning point for each patient and research shows that spirituality can positively contribute to management of this situation, giving strength and hope, thus improving the patient's quality of life [13]. Spirituality is more pronounced in patients with advanced stages of cancer, as they approach the end of their lives [12]. A number of other important nursing interventions are to assess the mental condition of the patient, hope and optimism culture, activation of

adjustment mechanisms and referral to a specialist if there is a strong spiritual discomfort [12].

In conclusion, nurses provide holistic care in order to contribute to the treatment of patients with cancer. The aim of all their efforts is to achieve for their patients a better quality of life at all stages of the disease. For the success of this goal, the best use of available and well-established scientific data in everyday clinical practice is crucial. Furthermore, the education of nurses also plays an important role and it should be oriented to holistic care. The needs of cancer patients are many and the most important outcome of any oncology nurse training program should be the effort to improve patient care.

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