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An important role for cancer nurses: Responding to psychosocial distress in cancer patients

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Abstract

Individuals diagnosed with cancer experience more than physical impacts. There are also emotional, psychosocial, spiritual, and practical consequences. Distress emerges as patients cope with the changes they face throughout their cancer journey. Although all patients experience distress, between 35-45% have clinically significant levels such as anxiety, depression, and adjustment difficulties. Early identification of distress and providing interventions to reduce this symptom is a standard of quality cancer care and a requirement of health services accreditation. Nurses have a critically important role to indentify distressed individuals, engage in relevant assessment, and provide interventions to manage distress.

A programmatic approach to screening for distress (6^{th} vital sign) has been implemented in several cancer facilities across Canada. The program includes protocols for screening, algorithms for assessment, and guidelines for evidenced based interventions. Implementation of the programs has included relevant education of nurses, close attention to uptake and utilization of practice guidelines, a context of continuous quality improvement, and the use of rapid cycle evaluations. Cancer nurses are expected to respond to the standardized distress scores by opening conversations with items that are of concern to patients.

Evaluation has shown increased patient satisfaction with care. Patient concerns provide the focus for opening conversations with individuals and the basis for planning person-centered approaches to care. Patient concerns are identified beyond those related to tumor and side effects. Nurses are in an excellent position to respond to scores on a standardized distress screening tool as part of patient assessment. The assessments provide a foundation for individualized or tailored interventions.

Biography

Margaret I. Fitch completed her Ph.D. at the University of Toronto. She holds the positions of Head of Oncology Nursing and Supportive Care and Director of the Patient and Family Support Program at the Odette Cancer Centre and is associate Professor (Faculty of Nursing) and Professor (School of Graduate Studies) at the University of Toronto. She maintains an active research program in supportive care and publishes regularly. She is expert lead for the patient reported outcomes/survivorship at the Canadian partnership against cancer. She is also a past president of the International Society of Nurses in Cancer Care.

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