

Administration of Anticancer Therapy: Nursing Intervention in the Relief of Suffering

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INTRODUCTION:

Grief is a constant in the lives of people with blood cancer disease, not only by social representations linked to cancer disease, and the uncertainty of the trajectory of the disease, as well as the side effects of drug treatment. In these people, the time used in therapeutic management by nurses makes these moments have a therapeutic potential in achieving positive results in the relief of suffering, if any knowledge, intent and a way of acting in this area of care, namely be individualized and unique, with each person in the hospital.

The focus on care sick person is to understand the disease as a source of suffering and this as a multidimensional phenomenon whose relief requires recognition and understanding as an individual experience.

Objectives: we intend to assess the outcome of nursing intervention “administration of chemotherapy as nursing intervention (individualized)” in the relief of suffering of adult hospitalized with blood-cancer disease;

Method: Use a multi method drawing by following the steps of the methodological procedure to Developing and Evaluating Complex Interventions in health – development, feasibility/piloting, evaluation and implementation model. Participants in the studies were all nurses and the occasional patients admitted to a hospital in greater Lisbon area, that met the criteria for inclusion in each study.

From the descriptive and exploratory studies performed in the development phase was modulated intervention protocol, with acceptance of the components of this by the nurses co-investigators, in the design of the pilot study were measured the results of this, with the application of the Inventory of the Subjective Experiences of suffering in illness (IESSD), the thermometer of the Distress and the visual scale of pain, prior and after the three consecutive days of anti-cancer chemotherapy administration in a quasi-experimental study. For checking the central hypothesis and the secondary applied the test manova with repeated measurements. They were completed the ethical procedures both the organizational level as participants.

Results and discussion: we note that the relief of suffering, points to the emphasis in care focused on the person rather than the disease, giving prominence to the importance of relational skills and help, namely listening, respect, individuality. The exploratory study identified nursing activities developed in

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the context of hospitalization to relieve suffering, and the description study identified the perception of nurses on individualized care, creating the conditions for the pilot study almost experimental, longitudinal, with the implementation of the intervention: “administration of chemotherapy as a nursing Intervention (Individualized)”. We note that regardless of the time of the evaluation (pre-and post-intervention), the average level of Suffering “physical, psychological, existential and socio-relational”, the pain and Distress, is greater in the control group than in the experimental group. It should be noted that the meeting with the nurse, with the assumption of the person’s knowledge, was prior to the administration of chemotherapy anticancer with the evaluation process, and in which the nurse enters and collects information from the sick person, appealing to the fact of suffering be peculiar and unique to each individual, and involves the meaning and values of the person, recognizing the patient as a person, supporting his choices and keeping his dignity.

Conclusion: The time used in the administration of the chemotherapy if used intentionally and highlighting the relational skills, can become a care that relieves suffering, rather than being a purely technical act. For that to happen it is important to focus on person-centred care, namely, know it, do a diagnostic of their potential and integrate the relief of suffering in the individual unique experience of each sick person stimulating the forces promoting life.

Keywords: blood-cancer disease; suffering; relief of suffering; therapeutic administration. nursing interventions,

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