بسم الله الرحمن الرحيم

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Nurses' Performance Regarding Palliative Care among Patients with Cancer

A thesis

Submitted for Partial Fulfillment of Master Degree

In Medical Surgical Nursing

By

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Ghada Zoheir Abdel Zaher

List of Contents

List of Abbreviations

Abb.	Full-Term
ACS	American Cancer Society's
ANA	American Nurses Association
ASCO	American Society of Clinical Oncology
ATS	American Thoracic Society
BRMs	Biological Response Modifiers
CHPCA	Canadian Hospice Palliative Care Association
CINV	Chemotherapy-Induced Nausea and Vomiting
CRF	Cancer-Related Fatigue
ESMO	European Society of Medical Oncology
HPNA	Hospice and Palliative Nurses Association
HSCT	Hematopoietic Stem Cell Transplantation
IOM	Institute of Medicine
NCDs	Non-Communicable Diseases
NCHPC	National Coalition for Hospice and Palliative Care
NCI	National Cancer institute
NCP	National Consensus Project
NIH	National Institute of health
NPS	National Pain Strategy
PC	Palliative care
PCA	Patient- Controlled Analgesia
PDT	Photodynamic Therapy
PSCT	Peripheral Stem Cell Transplantation
SIADH	Syndrome of Insufficient and Diuretic Hormone

List of Tables

List of Tables (Continued)

List of Tables (Continued)

List of Tables (Continued)

List of Figures

Nurses' Performance Regarding Palliative Care Among Patients with Cancer

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Abstract

Background: Cancer is the serious diseases that's second leading cause of death globally, the increased cancer incident cases, growing aging population, and decreasing number of caregivers have made palliative care more imperative in Egypt. palliative care plays an integral role in these patients' journey of care. Palliative care provides by multidisciplinary to develop a plan of care that focuses on each patient's and family's concerns, values and goals. **Aim of the study:** Is to assess Nurses' performance regarding palliative care among patients with cancer **Research design:** A descriptive exploratory design was used to achieve aim of the study. **Subject:** A convenient sample of 35 nurses working at radiation oncology & nuclear center **Setting:** The study was conducted in radiation oncology &Nuclear medicine center affiliated to Ain Shams University hospitals Cairo/Egypt**. Tools of data collection:** Three tools utilized for data collection(1) Self-administered questionnaire to assess nurses' knowledge regarding palliative care among patients with cancer (2) An observational checklist to assess nurses' practice during implementation of palliative care among patients with cancer (3) Nurses attitude Likert Scale to measure nurses' Attitude regarding palliative care **Results:** Revealed that 74.3% of the studied nurses had unsatisfactory level of knowledge, 94 % of the studied nurses had unsatisfactory level of practices, and 62.9 % of the studied nurses had negative attitude regarding palliative care among patients with cancer. **Conclusion:** There was unsatisfactory level of knowledge, practice and attitude regarding palliative care among studied nurses**. Recommendation:** Establish periodical in-service training program to improve nurses' performance regarding palliative care, encourage multidisciplinary researches to cover large group of nurses and other health care professional.

Keywords: palliative care, cancer, nurses' attitude, nurse's performance, knowledge

INTRODUCTION

Cancer is the second leading cause of death globally one of six death person due to cancer, death figures caused by this disease continue to be on the rise worldwide ***(Paknejadi et al., 2019).*** Cancer is a complex disease that has defined over generations as a combination of diseases that can start in almost any organ or tissue of the body when abnormal cells grow uncontrollably, go beyond their usual boundaries to invade other organs that is called metastasizing and is a major cause of death from cancer ***(WHO, 2020 and Menekli et al., 2021).***

Cancer is a serious disease causes numerous symptoms due to both the disease itself and the side effects from method of treatments, and consequently decrease the patients' quality of life. Range of complex symptoms that cannot always be dealt with effective manner by generalist oncology services. The most common symptoms are pain, dyspnea, fatigue, nausea, vomiting, insomnia, loss of appetite, diarrhea, constipation and anxiety and depression the frequency and severity of symptoms vary depending on the type and stage of the disease ***(Menekli et al., 2021).***

Therefore, they require a range of services to ensure that their physical, psychological, social and spiritual needs are met effectively and to enable the patients to live by their

choice. Thus, specialist palliative care services should be accessible and available for patients with cancer ***(Morsy et al., 2014).*** The National Comprehensive Cancer Network and The American Society of Clinical Oncology **(ASCO)** recommends palliative care should be integrated in to cancer care starting from cancer diagnosis. However, traditionally palliative care is prioritized for patients with cancer at any stage of cancer ***(Islam et al., 2021).***

The term palliative care was initially coined by Dr. Balfour Mount in Canada around 1975 to characterize care for the dying that is directed at the relief of symptoms to enhance the quality of the time remaining, and that is not directly aimed to prolong life or result in a cure ***(MacLeod & Block, 2019).*** So, the focus aim of palliative care includes the relief of suffering for patients with a life-threatening and offer support for the best quality of life for patients and their families as well as being recognized as an essential issue of wellbeing and human rights ***(Islam et al., 2021).***

The **World Health Organization** defines that "palliative care is an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification, impeccable assessment, treatment of pain

and other problems-physical, psychosocial, and spiritual" **(Perry et al., 2021).**

Palliative care involves an interdisciplinary team including physicians, nurses, psychologists, social workers, and chaplains who are uniquely trained to manage the physical, bio psychosocial and spiritual symptoms of the patient and family. Nurse is vital member of the interdisciplinary team and a key player who collaboratively integrates palliative practices throughout the patient's disease course by promoting quality of life and reducing a fragmented delivery of care ***(Cavalier, 2020 and George, 2016).***

There is an increasing acknowledgment of the inadequacies in the care of patients with cancer and their families ***(Youseef et al., 2018).*** So, the provision of palliative care services to patients with cancer and the role of nurses in this regard, as well as the impact of their performance, on the quality of these services ***(Paknejadi et al., 2019)*** this requires nurses to possess a combination of knowledge, skills, and positive attitudes in a way that is sensitive, meaningful, and dynamic ***(Achora & Labrague, 2019).***

Furthermore, nurses play an important role in facilitating communication between family members & the