

# [Effect of nursing on stress levels of cancer patients](https://assignbuster.com/effect-of-nursing-on-stress-levels-of-cancer-patients/)

Does good nursing management can influence the nursing care to reduce stress, anxiety and difficult behaviour in cancer patients as compare to ineffective management plan to achieve better therapeutic outcomes? Search terms that can be used for relevant literature will be nursing management plans for patients with cancer, stress, anxiety, good nurse patient relationship, and challenging behaviours.

The research is to explore and summarize the literature based on the published information such as journals, articles, books. The purpose of this review is to identify best practice evidence that examining the cancer patients. The literature review will give direction to plan the study and understand the outcomes. (Burns & Grove 2009). The difficult patient behaviour versus good nursing strategies based on the research question (Emold et al 2011).

Inclusion criteria included the all publications based on the difficult patient behaviour and good nursing management plans to reduce stress and anxiety in patients. The strength of evidence was based on the hierarchy of evidence with randomised controlled trial and meta-analysis being considered the best evidence as the primary source if available. Other research and levels of evidence was included where evidence was not that much strong. The literature review was undertaken using electronic data bases and catalogues such as CINAHL, science direst, PubMed, for the period of 2007 and 2014. Using the original question the key phrases ‘ difficult patient behaviour in oncology’ and good nursing management strategies, stress and anxiety pain, and some psychological factors those can lead to negative outcomes on patients health outcomes and nurses attitude. These search terms highlighted the number of articles on different types of cancer patients then advanced search engine was used to narrow my search to find out the good sourced information. Going through the abstracts of each of the articles were considered the relevance and quality. Exclusion criteria includes the key words and points those will not be covered in research such as good communication strategies, challenging behaviour and comparison between effective and ineffective management plans. The good literature review and databases mostly covered the qualitative and quantitative criteria based on the clinical question and case scenario.

1. Developa summary table based on your 15 selected studies (500 words).

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| The authors  | Title of the article  | Hierarchy of evidence  | Focus of study  | Type of participants  | Broad research approach  |
|  |  |  |  |  |  |
| McCormack et al. 2001Social science and medicine  | Measuring patient centred communication in cancer care  | Qualitative study and six functions of PCC  | Problem focused strategies  | None  | 13 individuals with expertise  |
| Tsang et al 2012  | The benefit of mindfulness-based stress reduction to patients with terminal cancer  | The study is quasi-experimental  | To assess the pain and were focused on the physical and mental aspects  | 60 subjects participated  | The interview techniques were used  |
| Whitaker et al. 2009 Psycho-oncology  | Intrusive cognitions in anxious cancer patients  | A quantitative sample of 139 anxious cancer patients  | Hospital anxiety and depression scale and PSTD  | 139 patients  | Interview session and outpatient screening  |
| Oguchi et al. 2011 Patient education and counselling  | Communication study  | A quantitative Observational design  | Chemotherapy education  | 15 cancer patients and 13 nurses  | Experimental techniques  |
| Emold et al 2011  | Communication skills for nurses  | A non-randomised  | Self- efficacy  | Six oncology units nurses  |  |
| Karvinen et al 2013  | Stress reactivity in breast cancer survivors  | Quantitative and TSST  | Compliance to medical care  | 25 breast cancer survivors  | Explore the quality of life  |
| Rosenzweig et al 2011Research brief  | The attitudes, communication to reduce breast cancer disparity  | A pilot, RCCT, two group design  | Effectiveness of chemotherapy  | 24 African woman  |  |
| Van Vliet et al 2013 patient education and counselling  | A qualitative study in breast cancer  | Qualitative analysis  | Effective communication about the diagnosis and information  | 52 women participated  |  |
| Kvale K, 2007 European Journal of Oncology and Nursing  | A qualitative study of cancer in patients communication needs  | Qualitative study and Phenomenology research design  | In-patients communication needs  | None  |  |
| Sheppard C, 2007 European Journal of Oncology and Nursing  | Breast cancer follow –up: Literature review and discussion  | A systematic search and critique on other research  | Review of post treatment for breast cancer  |  |  |
| Remmers et al 2010 European Journal of Oncology and Nursing  | Stress and nursing care needs of woman with breast cancer during primary treatment  | A qualitative design and semi structured interview  | Participants suffered from psychological strain rather than physical strain  | 42 woman at an early stage of breast cancer  |  |
| Drageset et al 2009 Journal of advanced nursing  | Coping with breast cancer: between diagnosis and surgery  | A qualitative descriptive design Individual semi-structured interviews  | Coping strategies used by women between diagnosis of breast cancer and surgery  | 21 newly diagnosed breast cancer patients  |  |
| Serra et al 2012 Clinical Journal of oncology nursing  | Outcomes of Guided Imagery in patients receiving radiation therapy for breast cancer  | A literature review and limited teaching and guided imagery intervention  | Checking the feedback response of guided imagery  | 69 patients were screened with64% had early age disease and 76% received adjuvant therapy  |  |
| Beatty et al 2008  | The psychological concerns and needs of women recently diagnosed with breast cancer  | A qualitative study group focus interviews  | Psychological aspects of patients receiving treatment and early diagnosis  | 34 participants diagnosed with early stage breast cancer  |  |
| Nizamli et al 2011Nursing and health sciences  | Experiences of Syrian women with breast cancer regarding chemotherapy  | A qualitative design and semi-structured interviews  | Four main themes discussed psychological discomfort, negative emotion, body image and depressive symptoms  | 17 women who underwent chemotherapy after mastectomy  |  |

1. Based on your summary table, provide asynthesisof the key findings and conclusions in relation to your PICO question (250 words). Support your summary from relevant literature (use in text referencing)

Good nursing management plans is one of the most effective and appropriate option for the hospitalised cancer patients. Various research studies have been conducted and analysed the difference between effective and ineffective nursing care plans. Therefore, Evidence from a variety of resources indicate that staff communication, family support, working environment those factors positively influence the patient prognosis according to Rosenzweig et al 2011; Kvale 2007; Karvien et al 2013; & Emold et al 2011. However, patients diagnosed with cancer causes significant distress such as mentally and physically strains to themselves and family members (Emold et al 2011). Therefore good communication skill, availability of continued support, involvement of families required to overcome these difficult emotions (Kvale 2007 & Vilet et al 2013). Karvinen et al. (2013) & Whitaker et al. (2009) identified the relationship between stress, anxiety, intrusive thoughts and compliance to medical care. Certain psychological factors such as feelings of hopelessness, physical and mental strains affect the nursing care and patient’s prognosis (Remmers et al 2010). Different intervention strategies have also been discussed in literature such as mindfulness, self-efficacy, emotional support has the beneficial effects to the general health of patients according to Tsang et al. (2012). There are certain factors those influenced the nursing care such as workload, emotional exhaustion, and decision making skills among staff may lead to negative response and affect the patient’s well-being (McCormack et al 2011). However, the literature lacks some efficacy based on the good intervention strategies for staff to overcome the difficult patient’s behaviour. Overall effective nursing management can be structured to enhance physical, psychological, and emotional wellbeing that assists in promoting positive behaviour and good health outcomes among cancer patients.