

# Controlling symptoms can lead to improved quality of life for end-of-life patients

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Healthcare workers can most directly affect quality of life (QOL) of patients with advanced stage lung cancer by helping manage symptoms such as pain, lack of energy, shortness of breath, coughing, difficulty sleeping and dry mouth, according to a study recently published in the journal *Oncology Nursing Forum*.

Understanding the symptoms, particularly symptom distress - or the degree to which a symptom bothers a person, is crucial to improved patient care. Intervention at the time of diagnosis is important because [patients](#) with stage IIIb or IV [lung cancer](#) may approach the end of life quickly.

The study, "Determinants of Quality of Life in Patients Near the End of Life: A Longitudinal Perspective" was conducted by Carla Hermann, PhD, RN, associate professor, University of Louisville School of Nursing, and Stephen Looney, PhD, Medical College of Georgia.

The researchers interviewed 80 patients with either stage IIIb or IV lung cancer who were newly diagnosed or had recurrent lung cancer. The study measured symptom frequency, severity, and distress; functional status; anxiety and depression. Within five months of diagnosis, 40 patients had died. The strongest determinant of QOL was symptom distress, followed by symptom severity, symptom frequency and depression.

"People at the end of life have a wide variety of needs, and healthcare

workers need to evaluate patients holistically – focusing not only on physical needs but also on their psycho-social and spiritual needs," Hermann said. "The end of life can be a time of great personal growth for many, and nurses and other healthcare professionals can help foster that growth."

The implication of this research for nurses and other [healthcare workers](#) is to develop a thorough symptom assessment and to intervene quickly for patients with advanced lung cancer.

Nurses and other healthcare professionals have a unique opportunity to make a valuable and lasting impact on patients and their families, Hermann concluded.

Provided by University of Louisville

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