

# A nurse practitioner-driven palliative care intervention improves cancer patients' quality of life

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Recent studies have shown that palliative care interventions aimed at addressing patients' emotional, spiritual and social needs have a significant impact on cancer patients' quality of life and may even improve cancer patients' overall survival. Despite this, most cancer patients being cared for in their communities do not have access to these services.

Most [cancer patients](#) also do not have [advance directives](#) addressed and are not aware of the benefits of hospice services. In order to address this issue, researchers at [Mayo Clinic](#) in Florida decided to test whether a nurse practitioner-driven consultation that used quality-of-life assessment tools and advance directives tools resulted in improvement in the cancer patients' quality of life.

The researchers, who published their findings online in the [Journal of Palliative Medicine](#), *say their study suggests that a consultative visit between a nurse practitioner and a metastatic cancer patient goes a long way to improving that patient's emotional and mental well-being.*

The study results were strongly positive despite the fact that only 26 patients were enrolled. A total of 100 had been planned but accrual to the study was halted when other recently completed randomized studies had shown the benefit of similar nurse driven palliative interventions. Patients also frequently refused to enroll if they were randomized to the

"control" arm, which did not include a discussion with an oncology advanced registered nurse practitioner about advance directives and how their symptoms could best be managed. The 12 patients who did receive intervention from a nurse had a significant improvement in their [emotional health](#), compared to the 14 patients in the control arm.

"The findings should be extremely helpful to oncologists in both community and academic [medical practices](#) concerned about how to incorporate palliative care, including discussions about advance directives in the outpatient management of their cancer patients," says the study's senior investigator, Gerardo Colon-Otero, M.D., an oncologist in the Division of Hematology/Oncology at Mayo Clinic in Florida.

The study also demonstrates that oncology clinics are not doing enough to help improve their patients' quality of life because they are so focused on treating the cancer. As a result, there are missed opportunities to provide additional support and many patients end up enrolling in hospice care much too late and do not have advance directives completed in a timely fashion.

"This study suggests that we shouldn't be afraid of these discussions, and that many of our patients actually welcome having advance directives and hearing about hospice services," Dr. Colon-Otero says. "This relatively simple strategy of having a [nurse practitioner](#) trained in palliative care and embedded within the oncology clinic to provide these consultation services is helpful, all the way around."

Based on the study findings, Dr. Colon-Otero and his colleagues at the Florida Society of Clinical Oncology received a grant from the American Society of Clinical Oncology (ASCO) to disseminate this program in Florida. As part of this grant, 13 nurse practitioners from both public and private cancer clinics throughout the state were trained

at Mayo Clinic in Jacksonville in providing end- of-life counseling and symptom management to [metastatic cancer](#) patients. "This could be a model that many oncology practices can follow to bring [palliative care](#) and advance directives discussions to their cancer patients," he says.

Provided by Mayo Clinic

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