




Nursing Care from the Perspective of Cancer Patients

Kanser Hastalarının Bakış Açısından Hemşirelik Bakımı

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Geliş Tarihi/Received 26.02.2024
Revizyon Tarihi/Revised 06.06.2024
Kabul Tarihi/Accepted 24.06.2024
Yayın Tarihi/Publication Date 25.06.2024

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Cite this article: Pekmezci H, Köse BG,
Akbal Y. Nursing care from the
perspective of cancer patients. *J
Nursology*. 2024;27(2):146-152.



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ABSTRACT

Objective: This study aimed to determine the experiences and thoughts of cancer patients receiving outpatient chemotherapy about nursing care.

Methods: This study, completed using a phenomenological qualitative research method, included 13 patients receiving treatment in an outpatient chemotherapy unit. Data were collected between September and November 2023 using a semi-structured interview form and audio recording. The descriptive analysis method was used to evaluate the data. Written informed consent was obtained from the participants based on volunteerism.

Results: 53.8% had third-stage cancer and received chemotherapy treatment for an average of 36 months. Patients receiving chemotherapy treatment stated that the nurses were interested in them. They evaluated the care provided by the nurses as good. Their most significant expectations from nurses were patience, understanding, and a smiling face. They stated that they did not have any problems in their communication with nurses during treatment. However, they often experienced communication problems due to inappropriate physical conditions, patient density, insufficient number of nurses, and the noise of the devices used in treatment.

Conclusion: As a result, we recommend that the physical conditions of chemotherapy units be improved, and the number of nurses brought to an adequate level to increase the quality of nursing care.

Keywords: Chemotherapy, Nursing, Nursing care, Perception of care

ÖZ

Amaç: Bu araştırmanın amacı ayaktan kemoterapi tedavisi alan kanser hastalarının hemşirelik bakımı ile ilgili deneyim ve düşüncelerini belirlemektir.

Yöntemler: Fenomenolojik tipte nitel araştırma yöntemi kullanılarak tamamlanan bu çalışmada ayaktan kemoterapi ünitesinde tedavi alan 13 hasta yer aldı. Veriler Eylül-Kasım 2023 tarihleri arasında yarı yapılandırılmış görüşme formu ve ses kaydı yapılarak toplandı. Verilerin değerlendirilmesinde betimsel analiz yöntemi kullanıldı. Araştırmada gönüllülük esas alınarak katılımcılardan yazılı onam alındı.

Bulgular: Çalışmadaki hastaların %61,5'i kadın, ilkökul mezunu ve şehir merkezinde yaşamaktadır. %53,8'i üçüncü evre kanser hastası ve ortalama 36 aydır kemoterapi tedavisi almaktadır. Kemoterapi tedavisi alan hastalar; hemşirelerin kendilerine karşı ilgili olduklarını belirttiler. Hemşirelerin uyguladıkları bakımı iyi olarak değerlendirdiler. Hemşirelerden en büyük beklentilerinin sabır, anlayış ve güler yüz olduğunu ifade ettiler. Tedavi süresince hemşirelerle iletişimlerinde sorun yaşamadıklarını ancak fiziki şartların uygunsuzluğu, hasta yoğunluğu, hemşire sayısının yetersiz olması ve tedavide kullanılan cihazların seslerinden ötürü çoğu zaman iletişim problemleri yaşayabildiklerini dile getirdiler ($P<.05$).

Sonuç: Sonuç olarak, hemşirelik bakımının kalitesinin artması için kemoterapi ünitelerinin fiziki şartlarının iyileştirilmesi ve hemşire sayısının yeterli düzeye getirilmesini öneririz.

Anahtar Kelimeler: Kemoterapi, Hemşirelik, Hemşirelik bakımı, Bakım algısı

INTRODUCTION

The World Health Organization (WHO) defines cancer as a disease in which abnormal cells, starting from tissues or organs, spread uncontrollably to other tissues and organs.¹ Cancer is one of the most critical health problems in the world. Cancer ranks second after cardiovascular diseases among the causes of death in our country and the world. Cancer is the cause of one out of every six deaths globally and one out of every five deaths in Turkey. It is predicted that cancer will rise to the first place in the world in 2040, and approximately 29.5 million new cancer cases will occur.¹⁻⁴

Traditional cancer therapies include chemotherapy, radiation therapy and surgery. The most commonly used method is chemotherapy.^{5,6} However, while chemotherapy treatment treats the disease, it can also cause many physical and psychological symptoms.^{7,8}

Nursing care in cancer starts with the diagnosis of cancer and continues with selecting appropriate treatment options for the person during treatment, supportive treatment, and care for the symptoms that occur due to treatment.⁹ According to a literature review, clinical nurse specialists are a valuable member of the team in improving cancer care services.¹⁰ Quality care in cancer treatment is medical care and meeting and completing all patient care needs.¹¹ Nursing care, which is of great importance in the mental and physical support of cancer patients, is defined as the actions applied for all care needs of patients.¹² Patients receiving cancer treatment describe the nurse as someone who supports, strengthens coping, makes an essential and valuable contribution and increases satisfaction while reducing anxiety.⁹ In the literature, it is reported that the presence of the nurse is vital in the cognitive and physical recovery of cancer patients and coping with.¹³

Evaluation of nursing care from the patient's perspective reveals the importance of patients' experiences. Patients' opinions and experiences can be used in planning, implementing, and evaluating health services. Patient satisfaction positively affects the quality of health care.¹⁴ Patients' experiences are essential data revealing critical healthcare delivery processes.¹⁵ The term "patient's experience" is a complex concept mainly related to the communication between the patient and the nurse.¹⁶ A

systematic review found that communicating with healthcare professionals is a key need of cancer patients.¹⁷

The most crucial output that evaluates health care delivery and reveals care performance is the measurement of patient satisfaction. The data obtained with this indicator contribute to the organization of the total quality management system.¹⁸ In line with this information, this study aimed to determine the experiences and thoughts of cancer patients about nursing care in the unit where they receive health care.

METHODS

Study Design

The study is with outpatient chemotherapy cancer patients receiving treatment in a province of Türkiye. It is a phenomenological qualitative study. In phenomenological studies, the descriptive phenomenological method that reveals lived experiences was used. The outpatient chemotherapy unit where the research was conducted has a capacity of 44 patients, and seven nurses are working.

Participants

The study population consisted of 828 patients who applied to an outpatient chemotherapy unit in a province in Turkey to receive chemotherapy between September and November 2023. The research was conducted with patients who volunteered to answer the research questions and allowed audio recording. Qualitative research does not have a set rule in sample calculation, and the sample size can be decided by the purpose of the research.¹⁹ In accordance with the nature of qualitative research, sampling continued until saturation was achieved in forming the main themes. In this study, snowball sampling method, which is a purposeful sampling method, was used.

Inclusion criteria

The study included patients who agreed to participate, knew their cancer diagnosis, were older than 18, and had received treatment and care from nurses for at least one year.

Data Collection Tools

Data were collected using a "Patient information form" and "Semi-structured interview form."

Patient information form

It consists of nine questions, including six questions about the socio-demographic characteristics of the participants and three questions about the treatment process. The questions were age, gender, education level, marital status, place of residence, employment status, cancer stage, duration of diagnosis and number of years of treatment.

Semi-structured interview form

It consists of questions that enable patients to express their experiences regarding nursing care.

1. How would you comment the nurses who treat and care for you?
2. How would you like nurses to approach you?
3. What should nurses who provide care for you be like? What should they care about?
4. What do you think needs to change in nursing care?
5. What should be the most essential feature of the nurses who care for you during your treatment?

Implementation of Data Collection Tools

Data were collected by visiting the outpatient chemotherapy unit on different days between September and November 2023. After the meeting with the first participant, the other participant recommended by the participant was approached. Face-to-face interviews were conducted with the participants and the interviews were audio recorded. In-depth interview method was used while collecting data. Starting from the first question, all questions were directed to the participant. In the 10th patient, the data started to be repeated. However, the data collection process was completed by interviewing three more patients.

Ethical Considerations

Written informed consent was obtained from the patients immediately before data collection. It was stated that all data obtained during the research would be kept confidential and not used anywhere except for the study. Permission numbered 2023/233 was obtained from the relevant Recep Tayyip Erdoğan University's social and humanities ethics committee on 25.08.2023, and institutional permission numbered 221384599 was obtained from the Provincial Directorate of Health on 03.08.2023.

Statistical Analysis

The process was carried out sequentially in the analysis of qualitative data using the descriptive analysis method. Audio recordings were listened to and converted into written form. Written statements were read at least three

times by the researchers and categories were created.

Similar/standard categories were combined to reach the main themes. Patients' statements were added as raw data in the reporting process of each central theme. All researchers exhibited consistent behavior during the analysis process. They were impartial in listening and coding all data.

RESULTS

The sociodemographic characteristics of the patients are given in Table 1. The mean age of the patients who participated in the study was 59.30 ± 13.45 years, the duration of diagnosis was 44.31 ± 32.26 months.

Table 1. Sociodemographic Variables of the Patients (n=13)

	n	%
Gender		
Woman	8	61.5
Male	5	38.5
Education Status		
Primary education	8	61.5
High school	4	7.7
University	1	30.8
Marital Status		
Married	13	100
Place of Residence		
Village	1	7.7
District	4	30.8
Province center	8	61.5
Employment Status		
Working	2	15.4
Not working	11	84.6
Cancer Stage		
Phase 1	1	7.7
Phase 2	3	23.1
Phase 3	7	53.8
Phase 4	2	15.4
	Mean±SD (Min-Max)	
Age	59.30±13.45 (30-84)	
Time to Diagnosis (months)	44.31±32.26 (12-135)	
Duration of Treatment (months)	36.00±17.66 (12-72)	

Qualitative Results

The study reached three main themes and six sub-themes per the patients' statements (Table 2).

Table 2. Theme Classes (n=13)	n
Positive Perception of Nursing Care	
Nursing care is good and the nurses are attentive	9
Nurses are knowledgeable	7
The Nurse Has A Positive Approach	
Being friendly	7
Patience and understanding	6
External Factors Have Negative Effects	
Inappropriate physical conditions	5
Insufficient number of nurses	5

These three main themes run through descriptive analysis are as follows;

Main theme 1: Positive perception of nursing care

- Nursing care is good and the nurses are attentive
- Nurses are knowledgeable

Main theme 2: The nurse has a positive approach

- Being friendly
- Patience and understanding

Main theme 3: External factors have negative effects

- Inappropriate physical conditions
- Insufficient number of nurses

Main theme 1: Positive Perception of Nursing Care

It was determined that patients receiving chemotherapy treatment perceived nursing care positively during the treatment period. While evaluating the nurses they received care from, they stated that the nursing care was excellent, they were satisfied with the process, they could get enough information, and they were caring.

- Nursing care is good, and the nurses are attentive

Nursing care, which is a dynamic process, is an action that consists of science and art and focuses on individual assistance. Individualized care positively affects the patient's quality of life and satisfaction.²⁰ In another study conducted with a large sample in Turkey, we see that patients' perceptions of nursing care are in good condition.²¹

God bless them. They take good care and behave well. (P(Patient)-3)

They take good care of me. They come immediately when I call them. They treat people well. (P-4)

I am very satisfied. They are very good at their job. What more can happen? (P-6)

I am happy with all of them. They come when I need them. What more can I ask for. (P-7)

- Nurses are knowledgeable

Although nursing education is based on knowledge and skills, it is obliged to provide care to society and the sick individual by presenting this knowledge gained. While defining the care they provide, nurses used the expressions of respecting the individual, giving themselves to work, and meeting the needs and expertise.²²

When I ask, they give information without withholding. They explain everything very well. We can ask anything. (P-2)

We get information on everything. (P-4)

He knows his job very well. I can get information on everything. (P-5)

They can answer everything. (P-7)

Main theme 2: The nurse has a positive approach

When the research data on the expectations of cancer patients in the nursing care process were evaluated, it was determined that they focused on personal characteristics. It was seen that they expected smiling faces and a patient approach from nurses the most.

- Being friendly

The literature shows that patients expect to be valued and respected, have a humanistic approach, and tolerate and be friendly in the nursing care process.²³

Nurses do their best. There is much intensity, but the nurse should be friendly. (P-1)

They are already exhausted. They could be more friendly. (P-2)

A nurse should be friendly. (P-7)

We, patients, are already bitter. The nurse should be smiling. Smiling and sweet language is the best medicine. (P-10)

- Patience and understanding

Patience is a concept that increases the employee's ability to empathize and supports an understanding approach to all problems encountered in nursing care.²⁴

They can be stressed because of the intensity. I would like them to be more patient. I think the most important thing is to be compassionate. (P-8)

They should be compassionate. I want them to be patient. (P-9)

I have been coming and going for one year. The nurse should be understanding. (P-10)

I want him to be friendly, tolerant, and pleasant. (P-11)

Main theme 3: External factors have negative effects

Patients who evaluated nursing care stated that external factors affected their perception of care. It was stated that the number and density of patients were high, and the physical conditions were unfavorable.

- Inappropriate physical conditions

The suitability of the working environment in the health field is essential in providing effective and quality healthcare services. In nursing care, it is known that when the appropriate workspace is provided, the quality of care increases, and the satisfaction of patients increases.²⁵

The environment is noisy. The devices are very loud. (P-1)

The density is too high. (P-4)

For there to be change, the physical conditions must change first. (P-12)

- Insufficient number of nurses

Another critical issue in health care service delivery is the effectiveness and efficiency of staffing and appropriate management of human resources. Inadequate human resources increase negativities such as workload and turnover in terms of employees, and negativities such as medical errors and a decrease in patient safety in terms of patients.²⁶

There are many patients. They are already exhausted. (P-2)

Our problem is with the queue because of the density. I have been receiving treatment for two years. They change staff very often. I guess they cannot stand it too much. (P-4)

Attention should be paid to queue priority. There are problems due to lack of personnel. (P-9)

When there is a crowd, I guess they cannot keep up. They try to do the treatments, but they are insufficient in number. (P-13)

DISCUSSION

Our study determined that cancer patients receiving chemotherapy perceived nursing care positively with themes such as "nursing care is good, and nurses are interested" and "nurses are knowledgeable." Tolasa (2022) reported in their study with cancer patients that almost all patients stated that the cancer treatment process took a long time, that nursing practices helped reduce the symptoms they encountered, and that they trusted nurses' knowledge.¹¹ Similar to our study findings, oncology

patients stated in another study that nurses were reliable, empathetic, and helpful. They also stated that they felt peaceful and robust in individual care processes with the support and guidance of nurses.²⁷ A study examining nurses' thoughts about the roles and responsibilities of oncology nursing determined that nursing is a profession that needs to continuously develop professional knowledge and skills.²⁸ When our study results and other studies are examined, the importance of knowledge in nursing care emerges.

In our study, it was determined that patients expected a "smiling face", "patience" and "understanding" from nurses during the care process. Cancer diagnosis directly affects both the individual and his/her family. Cancer can negatively affect the family process by creating stress and imbalance in the family system. During treatment, patients and their relatives experience affective, cognitive, social, and physical symptoms.²⁹ Sharing these symptoms with nurses and receiving support from nurses are the most critical steps in the nursing care process.³⁰ In studies conducted with cancer patients, it has been emphasized that some patients have problems communicating with nurses,³¹ their expectations from nurses include understanding, respect, better communication, and good nursing care,³⁰ and they expect compassion, support, and hope from nurses and reliable, professional knowledge.¹² The fact that patients can hardly cope with the problems that may be experienced during the cancer treatment process suggests that the expectations of smiling face, patience, and understanding come to the fore in the nursing care process.

In this study, it was observed that cancer patients receiving outpatient chemotherapy wanted the institution's physical conditions and the nurses' working conditions to be improved in addition to their expectations for nursing care. In this context, they stated that "unfavorable physical conditions" and "insufficient number of nurses" caused confusion, and patients had to wait unnecessarily. The physical areas where chemotherapy treatment is administered, and staff resources affect patients' comfort during treatment. The density in outpatient chemotherapy areas causes dissatisfaction in patients.³² The literature states that the intensity in this area is caused by long infusion times, insufficient nurses, limited working hours in the outpatient chemotherapy unit, and insufficient treatment chairs.³³ Another study conducted with oncology patients revealed that the intense workload of nurses, shortage of nurses, a high number of nursing routines, and being busy with paperwork prevented nurse-patient communication.³⁴ Similar to our results, in another study, 98.6% of oncology nurses stated that they worked with

insufficient nurses.³⁵ Patients expect information, counseling, and support from nurses in intensive treatment units such as outpatient chemotherapy. Inadequate physical conditions and an insufficient number of nurses may negatively affect care. Patients' interpretation of the unit where they receive treatment as physical conditions and insufficient number of nurses may cause them to perceive the nursing care process negatively and experience anxiety.

This study was completed with cancer patients receiving outpatient chemotherapy, the majority of whom were stage 3 cancer patients. Patients evaluated the nursing care provided to them positively. They stated that the nurses were concerned and had sufficient knowledge. Patients stated they needed a smiling face, patience, and understanding. They also experienced problems in care due to inappropriate physical conditions and an insufficient number of nurses in the treatment environment. They stated that they had to wait in long queues, were confused while waiting in line, and were exposed to too many machines. They also stated that there was no problem communicating with nurses during the nursing care process. However, nurses were sometimes insufficient to allocate individual time and answer the questions they asked because they worked very intensively. Cancer is a process that leaves the patient worried and threatened about the future. Therefore, it is essential to support patients with a multidisciplinary team at every stage of the treatment process, especially with nurses within this team. Effective patient-nurse interaction during chemotherapy positively affects the treatment process. Therefore, we recommend that the physical conditions and the number of nurses should be considered, especially in outpatient chemotherapy units, and that institutions should consider this in managing human and material resources.

Limitations of the Study: The study is limited to the feelings and opinions of patients receiving treatment in the outpatient chemotherapy unit of a hospital.

Etik Komite Onayı: Etik kurul onayı Recep Tayyip Erdoğan Üniversitesi Sosyal ve Beşeri Bilimler Etik Kurulu'ndan (Tarih: 28.08.2023, Sayı:2023/233) alınmıştır.

Bilgilendirilmiş Onam: Hastalardan bilgilendirilmiş onam alınmıştır.

Hakem Değerlendirmesi: Dış bağımsız.

Yazar Katkıları: Fikir- HP; Tasarım- HP; Denetleme-HP; Kaynaklar-HP, BGK, YA; Veri Toplanması ve/veya İşlemesi HP, BGK; Analiz ve/veya Yorum- HP, BGK, YA; Literatür tarama-HP, BGK, YA; Yazıyı Yazan- HP, BGK, YA; Eleştirel İnceleme-HP, BGK, YA.

Çıkar Çatışması: Yazarlar, çıkar çatışması olmadığını beyan etmiştir.

Finansal Destek: Bu araştırma kamu, ticari veya kar amacı gütmeyen sektörlerdeki finansman kuruluşlarından herhangi bir özel finansal destek almamıştır.

Ethics Committee Approval: Ethics committee approval was obtained from Recep Tayyip Erdoğan University Social And Humanities Ethics

Committee (Date: 28.08.2023, Number: 2023/233)

Informed Consent: Informed consent was obtained from the patients
Peer-review: Externally peer-reviewed.

Author Contributions: Concept - HP; Design- HP; Supervision- HP; Resources- HP, BGK, YA; Data Collection and/or Processing- HP, BGK; Analysis and/or Interpretation- HP, BGK, YA; Literature Search- HP, BGK, YA; Writing Manuscript- HP, BGK, YA; Critical Review- HP, BGK, YA.

Conflict of Interest: The authors have no conflicts of interest to declare.

Financial Disclosure: This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

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