

# Different Perspectives in Cancer Education: Nurses and Patients

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## Background

- Chemotherapy-induced nausea and vomiting (CINV) is one of the top 5 reasons older adults with cancer call the doctor during treatment
- CINV can lead to increased use of resources for unplanned emergency department and hospital admissions
- Traditionally, education related to treatment-related side effects occurs prior to treatment
- Education for cancer-related side effects can be overwhelming or seem un-important until needed
- In addition, older adults do not necessarily believe self-management strategies for side effects work leading to under-management of side effects

## Purpose

To examine the perception of education about side effects and self-management of CINV in older adults with cancer

## Methods

- Eight patients and caregivers, four oncology nurses- all with prior experience with CINV, participated in this qualitative study
- Semi-structured interviews about experience with cancer-related side effects and related education
- Questions related to how older adults were educated to manage CINV at home and how they self-managed
- Content analysis was used to code transcripts.
- Two researchers extracted common themes from the data

## Findings

**Nurses, patients and family caregivers had very different views of their education about managing side effects related to chemotherapy.**

**Nurses were frustrated with patients when they:**

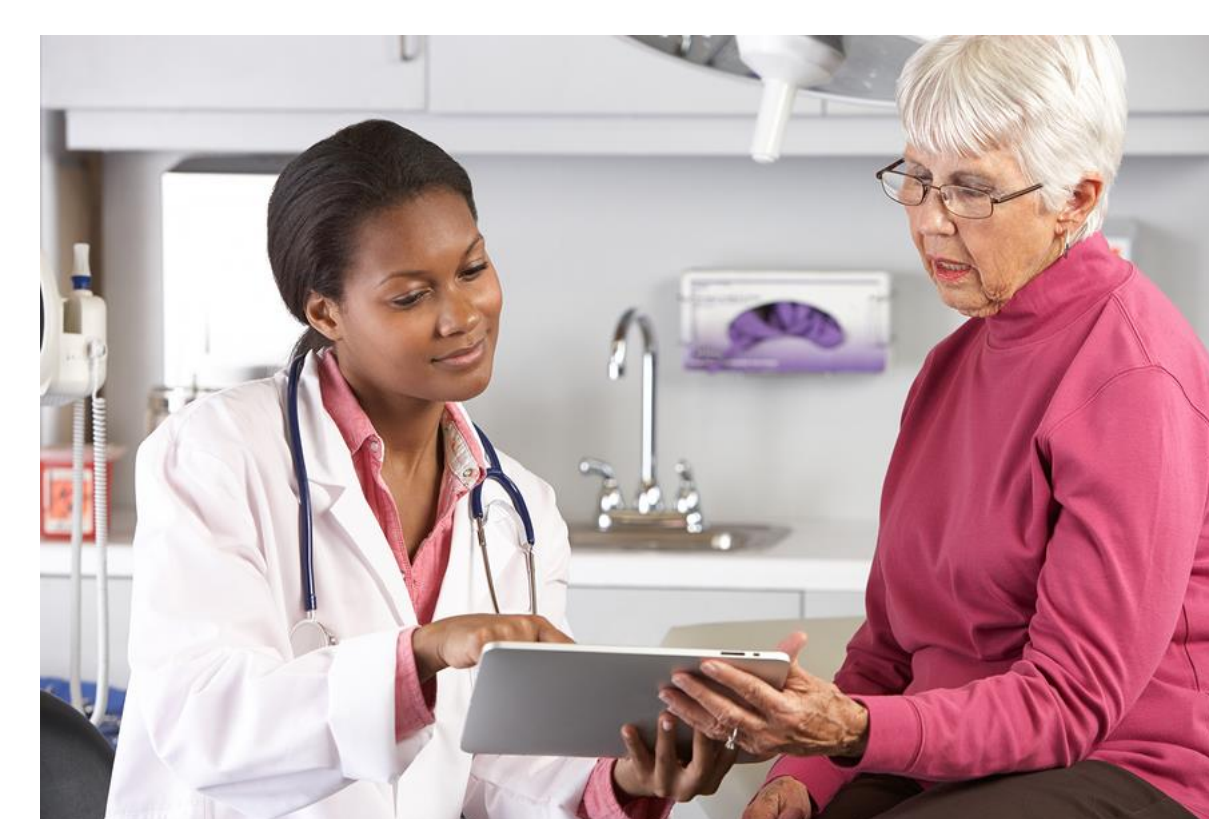
- Did not follow their recommendations
- Waited too long to manage side effects at home
- Did not call the clinic when side effects were severe
- Listened to others (friends, relatives) who did not have the same cancer or treatment and took their advice instead of the nurses

**Nurses identified serious knowledge deficits:**

- Culture (Spanish speaking patients), age, hearing and vision deficits, patients being overwhelmed, and concurrent medical issues

**Nurses accepted these issues in educating patients and seemed helpless to correct the issues**

- Knew it was important to assess learning style, but did not do it regularly.
- Understood education was overwhelming
- Accepted that they had to repeat key points numerous times
- Expressed negativity and futility of educating some older adults which affected their motivation to educate them



**Patients and caregivers felt that their education was appropriate, but felt overwhelmed at times. They also supported some of the frustrations expressed by the nurses.**

**Older adults learned by experience.**

- Knew about side effects in theory, but vague understanding until it happened to THEM
- Believed they would manage CINV better next time, once they had a bad experience

**Older adults recognized knowledge deficits**

- Overwhelmed by education and number of prescriptions
- Knew very little about cancer and side effects, especially CINV

**Older adults wanted more credible information**

- “Real life” information from people who have been in their shoes
- Options for treatment and reassurance
- More information on CINV specifically
- Open and honest communication about the unpleasantness of cancer and side effects

**Older adults had advice for others based on their experiences**

- “catch it early”, “take your meds”, “call the nurse right away”

## Discussion

- Perspectives on education differed
- Older adults felt they were managing CINV appropriately despite using few self-management strategies
- Nurses identified several barriers to educating older adults, but did not always address or accommodate those barriers when teaching
- Nurses should consider using a teach-back method to verify what older adults have heard and understood and clarify if needed
- Accommodations could include identifying main critical points, writing down important points or highlighting them on standard educational handouts, and educating social supports and family caregivers
- Nurses need to be aware of cultural considerations in older adults including the tendency to not disclose problems
- Peer support from older adults who previously experienced CINV may benefit older adults
- Simulation experiences for older adults may also be effective in preparing them to manage symptoms better at home.

## Conclusion

Nurses and other healthcare providers may have to think outside the box in order to provide education to older adults with different strategies to manage side effects at home

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