Dyspnea Among Patients With Advanced Lung Cancer: A Concept Analysis Barbara A. Roces PhD, NP, RN



There is no conflict of interest in this study.

To provide a thorough analysis of the concept dyspnea using the framework outlined by Walker and Avant (2011)

Identify current theoretical and operational definitions of dyspnea

> Learning Objectives

Identify and describe defining attributes of dyspnea

To identify the impact of dyspnea in functional status and Quality of life

To describe dyspnea in relationship with advanced lung cancer patients and symptom management

- Dyspnea as a word is derived from ancient Greek; "dys" means disordered or abnormal and "pnoia" means breath. Dyspnea is defined as short of breath, difficult or labored respiration.
- Dyspnea is a subjective, multidimensional experience of breathing discomfort, influenced by physiological, psychological, social and environmental factors, which includes secondary psychological and behavioral response and cannot be defined only by physical objective abnormalities.
- Dyspnea is a distressing symptom experienced by patients with advanced lung cancer with higher incidences reported towards end of life.

Concept Uses

- Chronic Obstructive Pulmonary Disease
- Asthma
- Lung Cancer
- Lung Disease
- Congestive Heart Failure
- Pulmonary Edema
- Myocardial Infarction
- Anxiety

Defining Attributes



- Tachypnea
- Bradypnea
- Apnea
- Fatigue
- Diminished chest expansion
- Shallow respiration
- Decrease energy
- Air Hunger
- Discomfort
- Pursed-lip breathing

Model Cases

It is compared to suffocating or feeling like a fish out of water. Imagine feeling that way all the time, struggling to get relief, and not being able to get that deep breath of fresh air.

Patients with dyspnea experience this symptom of air hunger and smothering. In severe cases, patients describe an intense fear of waking up with air hunger sensations of impending death, and fear of dying during the next episode.

Other Cases

Borderline:

 74 y/o man stage IV lung cancer suffered progressively worsening dyspnea for the last two weeks. This describes intensity and frequency, but does not describe the meaning of distress or the meaning of dyspnea perceived

• Contrary Case:

 Michael was at the park with his friend and a beautiful woman walked by and he told his friend "She took my breath away."

Related Cases:

 Michelle was crying in the bathroom this morning. She felt her dyspnea is interfering with her activities of daily living. She verbalized being depressed and resentful about being diagnosed with advanced lung cancer

Antecedents

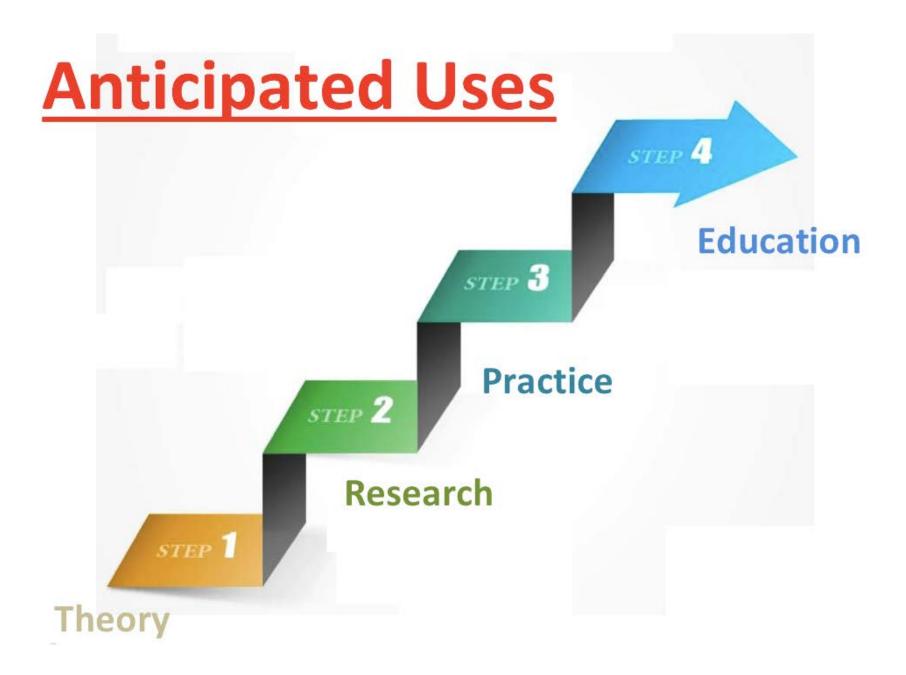
- Demographic Characteristic (age, gender, marital status, race, culture, role, education, and socioeconomic status)
- Disease Characteristic (type, stage of cancer, availability of treatment, and comorbidities)
- Individual Characteristic (health knowledge, values, past experience, and sense of coherence)

Consequences

- Lower functional status
- Impaired cognitive functioning
- Less effective role functioning
- Decreased QOL
- Psychological impairment
- Lower physical performance capabilities

Empirical Referents

- Air hunger
- Tachypnea
- Restlessness
- Anxiety
- Fatigue
- Shallow respiration
- Pain



Conclusion

- Dyspnea is a complex symptom
- Behavioral style/Emotional state
- Impact of dyspnea in advanced lung cancer
- Impact of dyspnea management
- Continued ongoing research in the management of dyspnea in advanced lung cancer patients

Thank you...

<u>References</u>

Brennan, C. W., & Mazanec, P. (2011). Dyspnea management across the palliative care continuum. *Journal of Hospice and Palliative Nursing*, *13*(3), 130-139.

Dudgeon, D, Dyspnea in the Cancer Patient. In: Berger A, Shuster, Jr. J.L. and Von Roennm J.H eds. (2013). *Principles and Practice of Palliative Care and Supportive Oncology*. Lippincot Williams and Wilkins Philadelphia, Pa.

Mularski, R. A., Campbell, M. L., Asch, S. M., Basch, E., Maxwell, T. L., Cuny, J.,...Dy, S. (2010, March 15). A review of quality care evaluation for the palliation of dyspnea.

Reddy, S. K., Parsons, H. A., Elsayem, A., Palmer, J. L., & Bruera, E. (2009). Characteristics and correlates of dyspnea in patients with advanced cancer. *Journal of Palliative Medicine*, *12*(1), 29-36.

Steadman†☐s medical dictionary for the health and professions and nursing. (2012). (7th ed.). Philadelphia, PA: Wolters Kluwer Health.

Tanaka, K., Akechi, T., Okuyama, T., Nishiwaki, Y., & Uchitomi, Y. (2002). Prevalence and screening of dyspnea interfering with daily life activities in ambulatory patients with advanced lung cancer. *Journal of Pain and Symptom Management*, *23*(6), 484-489.

Walker, L. O., & Avant, K. C. (2011). *Strategies for theory construction in nursing* (5th ed.). Upper Saddle River, NJ: Pearson.

Merriam-Webster Collegiate Dictionary. (1993). (10th ed.). Springfield, MA: Merriam-Webster.

Merriam-Webster Collegiate Dictionary. (1993). (10th ed.). Springfield, MA: Merriam-Webster.



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https://www.americannursetoday.com/when-breathing-is-a-burden-how-to-helppatients-with-copd-2/

https://www.thefix.com/opioids'-effect-older-adults-respiratory-problems-worryresearchers

https://www.youtube.com/watch?v=32LyfoOD0gQ

http://www.inhomecarenj.com/category/health-issues/respiratory-problems/

https://www.123rf.com/photo_34630904_senior-man-choking-from-the-smoke-ofa-cigarette-isolated-on-white-background.html

https://www.eadiehill.com/nursing-home/nursing-home-choking-suffocationdeaths/

http://icnm.vn/tin-tuc/18616/Nguoi-gia/-Trao-nguoc-da-day-o-nguoi-cao-tuoi-degay-ra-bien-chung-nguy-hiem.aspx

http://www.pinsdaddy.com/elderly-african-american-fitnesslady_FCyYXvjxfhrQQZFwvLSmGLp80%7C7YTJA%7CTqVhA*HVVXWvlt%7ClAtb6YD JQw7YNfhRhNyN8Plx1FaplMEPN31LBSA/

http://seniorsmatter.com/sundown-syndrome-when-an-episode-strikes/

https://www.ersnet.org/the-society/news/new-guidelines-for-treatment-andmanagement-of-copd-exacerbations