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Yvonne Tan

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#### Therapeutic Communication

Yvonne Tan

School of Health Sciences, Merrimack College

NUR3000B Medical Surgical Nursing

Professor Fotino

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## The Crucial Role of Nurses in Promoting Quality of Life of Cancer Patients through Therapeutic Communication

Quality of life is a subjective perception a person has of their position in life. This is subjective to every person and can be affected by numerous factors within their lives including income, occupation, housing, education, interpersonal relationships, available services, and access to cultural and leisure activities. However, for cancer patients, many other factors influence their quality of life including physical symptoms of pain, nausea, constipation, shortness of breath, and emotional symptoms such as depression, anxiety, and fear are significant challenges to improving quality of life. Cancer patients are commonly burdened with uncontrolled and unregulated growth of cells as well as countless problems that may be directly connected to their diagnosis, consequences of treatment, or both. After a diagnosis of cancer, nurses must assist patients to adhere to their cancer treatment plans, reach their recovery goals, and support patients and their caregivers with coping with the diagnosis and treatments while improving their quality of life.

Many studies have been created to improve the quality of treatment and care of nurses for cancer patients. Firstly, there are differences in the perceptions of the patient and the nurse regarding the patient's quality of life. Bahrami and Blackman (2008) created a study to identify the level of agreement between patients and nurses about the quality of life of cancer patients and the variables that may affect the level of agreement between them. This study included 117 cancer patients and 49 nurses from a public hospital who were separately invited to complete the World Health Organisation Quality of Life Brief questionnaire (Bahrami & Blackman, 2008). This assesses the quality of life of each patient in a holistic view including physical,

psychological, social relationships, and environmental factors. This study showed differences exist between nurses' and patients' perceptions of the quality of life of cancer patients which place an impact on the quality of patient care and support. The authors also included a reference to other studies that have also reported that "nurses had better agreement with their patients in QoL domains that consisted more of objective items such as in the physical domain" (Bahrami & Blackman, 2008). However, in contrast, Bahrami and Blackman (2008) stated that the quality of life of each patient is extremely subjective and each patient should be treated as a unique individual. The study concluded that it is important that nurses learn how to assess the quality of life of cancer patients thoroughly by using the standard quality of life tools instead of relying on their intuitive perceptions which led to misunderstandings and misjudgments of the patient's quality of life (Bahrami & Blackman, 2008). Increasing the level of agreement between the two parties will allow patients who are experiencing life-threatening illnesses to receive the care that they need to maintain or improve their quality of life.

A crucial part of treatment for cancer patients is effective communication between the nurse and the patient. A patient's communication experience refers to his or her view of the communication and healthcare services they received from his or her healthcare team during their hospitalization or treatment. Improvement of inter-professional communication with the patient is necessary to improve the quality and outcomes of healthcare treatment plans. Six crucial factors impact communication aimed to improve patients' experiences and health outcomes including exchanging information, fostering healing relationships, enabling patient self-management, responding to patients' emotions, enabling patient decision-making, and managing uncertainty (Alshammari & Guilhermino, 2022). This study was created to explore

adult patients' communication experiences with nurses in cancer care settings by studying 21 patient-nurse experiences in two separate healthcare facilities in Saudi Arabia. The study began with individual face-to-face interviews which focused on the six core sections impacting communication between nurses and patients. The participants had varying experiences with nurse-patient relationships that each of them underwent. According to Alshammari and Guilhermino (2022), some shared positive accounts of their communication with the nurses caring for them, while others reported minimal communication with the nurses. Due to the study, it became evident that nurses who spoke the same language as the patient were more effective in communicating with their patients. However, participants of the study felt that "more education and training on cancer care was needed to develop the Saudi nurses' competence in terms of kindness, respect, and politeness" (Alshammari & Guilhermino, 2022). Nurses also play an important role in boosting patient morale and responding to each patient's emotions. However, according to Alshammari and Guilhermino (2022), some patients indicated that they rarely discuss emotions with the nurses and preferred to discuss their emotional issues with their family, which can be explained by strong familial bonds in Saudi Arabia's culture. Additionally, a few participants in the study reported receiving adequate psychological support, including spiritual support, from the nurses, which benefited the relationship between the two parties. Most of the participants recommended that educational programs should be implemented for Saudi nurses working in cancer care settings to delve into their competencies in terms of politeness, kindness, respect, and the importance of checking on patients regularly and non-verbal communication such as smiling (Alshammari & Guilhermino, 2022). Additionally, participants

recommended that education stressing the importance of open and honest communication with patients and their families be provided for all nurses working in cancer care in Saudi Arabia.

The role of nurses is crucial after the diagnosis of cancer as they significantly impact the quality of life of each patient during treatment through their actions. According to Fotino (2022), nurses should treat cancer pain like normal pain, advocate for their patients, and provide education and support through exhibiting caring and active listening along with many other verbal and non-verbal therapeutic actions. Additionally, nurses should create an environment that maximizes privacy and trust between themselves and the patient to promote ease for the patient to discuss any concerns, complications, questions, or emotions regarding the diagnosis or treatment. This therapeutic communication with the patient connects to the study of Alshammari and Guilhermino by proving that effective communication skills such as kindness, politeness, respectfulness, and non-verbal communication greatly benefit the quality of life of cancer patients. Nurses can also improve or prevent the side effects of treatment. For example, gastrointestinal effects are common due to the highly proliferative cells in the digestive tract including nausea, vomiting, diarrhea, and mucositis, which also impacts hydration, nutritional status, and sense of well-being. Nurses can improve the negative impacts of these side effects by providing antiemetic medications to prevent vomiting during or after treatment, educating patients about low-fiber diets to prevent diarrhea, and providing oral care before and after meals with salt and water rinses for patients suffering from mucositis (Fotino, 2022). These actions and many others beneficially impact the treatment, experience, and quality of life of cancer patients around the globe.

The diagnosis of a life-threatening illness such as cancer negatively impacts the quality of life in patients as it increases the risk for anxiety, depression, disturbed sleep patterns, and discomfort due to the diagnosis and/or treatment. However, nurses have the potential to improve the quality of life in these patients through countless therapeutic actions during the patient's treatment. Alshammari and Guilhermino's (2022) study proved that adequate psychological support through therapeutic communication, including spiritual support, from the nurses, greatly benefitted the relationship between the two parties as well as aided the quality of life to improve in the cancer patients. Core competencies such as politeness kindness, respect, the importance of checking in on patients regularly, and non-verbal communication such as smiling are crucial in caring for cancer patients (Alshammari & Guilhermino, 2022). This beneficial effect between a nurse and a patient can improve through the alignment of the nurse's and patient's perceptions of a cancer patient's quality of life. According to Bahrami and Blackman (2008), nurses must learn how to assess cancer patients' quality of life thoroughly through standardized tools instead of relying on their intuition or perceptions due to the risk of misunderstandings and misjudgments of the patient's quality of life. An increase in the agreement on a patient's quality of life between the two parties makes it more likely that those experiencing life-threatening illnesses will receive the care they need to maintain or improve their quality of life. Nurses aid patients in more ways than monitoring vital signs and overall well-being, helping them manage pain and lessen side effects as they undergo treatment which holistically improves the quality of care for cancer patients as nurses aim to treat each patient physically, psychologically, and emotionally through therapeutic communication and treatment.

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