

Parallel Sessions

PS3.1

Nurse Clinic

14:30 Room 221

Chemotherapy Nurse Clinic in Contributing the Clinical Pathway for Managing Post-treatment Complications with Improved Outcome

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Chemotherapy is a major cancer treatment and is mainly delivered in ambulatory setting. But various significant and predictable treatment related side effects are common, and most of them occur between treatment cycles. Patient needs to manage the toxicities and symptoms at home that can directly affect patient's quality of life, tolerance of treatment, treatment decision or even treatment outcome. Therefore, effective toxicity assessment and prompt symptom management are important. Nurse-led chemotherapy review has been reported benefits such as increased capacity and reduced waiting time etc.

From UK experience, nurse-led chemotherapy review had been shown to be as effective as doctor-led chemotherapy review in various therapeutic areas but there is no "golden model" for establishment of the service. It can be designed for specific disease or chemotherapy agent, with or without on-site oncologist support, accessible or not to non-medical prescribing, which depends on the local arrangement.

In Hong Kong, non-medical prescribing is not adopted due to legal and regulation policy, and the role of registerable advanced nurse practitioner is not yet established. Despite those limitations, nurse-led chemotherapy review clinic is the priority of development across six oncology centres. Although no one model fits all chemotherapy nurse clinic, there are certain universal principles. Nurses should not duplicate the medical model or provide stand-alone service. Hence, the chemotherapy nurse clinic focusing on treatment-induced toxicity grading, assessment and the related management is appropriate for our local setting. This model has been adopted in the oncology centre of the Prince of Wales Hospital that first target the group of head and neck patients undergoing concurrent chemoradiotherapy. It aims at adding nursing values to chemotherapy service by providing holistic care and family support, and performing advanced nursing practice such as patient examination, including skin status, oral cavity condition and nutritional status, toxicity assessment and management of symptoms during treatment, making referral to other appropriate healthcare professionals, etc. Improved patient outcome with less unnecessary hospitalisation, less weight loss, better coping for nutritional problem and psychological support were demonstrated in a two-year prospective survey. Feedback from the medical colleague was positive because the consultation time could be shortened and patient-focused concerns can be addressed more effectively.