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# The Oncology Nursing Reading Room

## Publications with practical relevance to the care of patients with cancer

Many texts and articles merit reading long after publication. Here, we share some helpful reading for oncology nurses. See why this reading remains important over the long term, and check back often; we update the content regularly.

### Remembering patient suffering and the goal of relieving that suffering

Cassell EJ. The nature of suffering and the goals of medicine. *New England Journal of Medicine*. 1982;306(11):639-645.

This seminal publication began an ongoing conversation among health care practitioners regarding suffering, and was later expanded to a full book.<sup>1</sup> This paper continues to be cited internationally by healthcare professionals across disciplines, but holds particular relevance to oncology nurses.

The essence of Dr. Cassell's observations on suffering is that suffering is "*experienced by persons, not merely by bodies*."<sup>2</sup> He explores the complex social and psychological foundations that lead to suffering, which may be at odds with the goals of medicine. For example, Dr. Cassell considers how a failure to fully understand a patient's suffering can lead to medical interventions that although "correct" may fail to relieve suffering or even become a source of suffering itself.<sup>2</sup>

Such conundrums are often encountered by oncology nurses, who play a fundamental role in caring for those who suffer. These caregivers routinely encounter individuals with cancer facing loss, intense emotions, spiritual distress, and the inability to express those experiences.

### Entering the age of cancer survivorship

Mullan F. Seasons of survival: reflections of a physician with cancer. *New England Journal of Medicine*. 1985; 313(25): 270-273.

This personal essay is one of the earliest discussions of cancer survivorship. The messages were not only relevant at the time of original publication, today they have growing importance as individuals with cancer live longer with their disease. Dr. Mullan reflects on the process of surviving cancer beginning at diagnosis, and moving through acute, extended, and permanent phases – or his frequently-referenced "three seasons" of cancer survival.<sup>3</sup>

Revisiting this classic paper will remind oncology nurses of the feelings and emotions that their patients experience throughout the course of their disease. Dr. Muller explores the fear and anxiety during diagnosis and initial therapy, the fears of recurrence and toxicity issues during consolidation therapy or an extended remission, as well as late effects that patients face when their cancer has entered a more

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permanent period of survival.

The central message of this reading is that not only is the quantity of cancer survivors important, caregivers also need to consider the quality of life that these individuals experience during their cancer survivorship.<sup>3</sup>

## Caring for patients at the end of their lives: devising a supportive care plan

Thompson-Hill J, Hookey C, Salt E, O'Neill T. The supportive care plan: a tool to improve communication in end-of-life care. *International Journal of Palliative Medicine*. 2009;15(5):250-255.

This practical paper explores how one centre implemented an advance care planning tool, or Supportive Care Plan.<sup>4</sup> One of the contemporary issues facing oncology nurses today is assisting in the palliative care of their patients nearing the end of their lives. An end of life plan enables patients to express their preferences, facilitates communication between patients and their healthcare team, and enables coordinated care.

Oncology nurses reading this paper will learn from the experiences of this centre and be better equipped to assist in end of life planning for their patients with cancer. Having an established end-of-life care pathway provides nurses a framework to coordinate care and help initiate discussions with their patients as they approach this phase of their lives.

## Measuring quality of life in oncology

Osoba D. Lessons learned from measuring health-related quality of life in oncology. *Journal of Clinical Oncology*. 1994;12(3):608-616.

In the 1990s, interest in quality of life (QOL) in patients with cancer was gaining great momentum, and in this classic review by a pioneer in the field reviews 6 critical points to keep in mind when assessing QOL in patients with cancer.<sup>5</sup>

These timeless lessons are worth re-visiting by today's oncology nurses. Administering quality of life instruments and confronting the impacts of symptoms, treatments, and responses on QOL form a core component of the oncology nursing day. In his review of these lessons, Dr. Osoba observed that these considerations are relevant to both clinical trials interpretation and the future practice of oncology.



### Instant Survey

Which of the following topics do you believe would yield timeless publications for oncology nursing reading?

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#### References:

1. Cassell EJ. *The Nature of Suffering*. Oxford, UK. Oxford University Press. 1991.
2. Cassell EJ. The nature of suffering and the goals of medicine. *N Eng J Med*. 1982;306(11):639-645.
3. Mullan F. Seasons of Survival. *N Eng J Med*. 1985;313(25):270-273.
4. Thompson-Hill J, Hookey C, Salt E, O'Neill T. The supportive care plan: a tool to improve communication in end-of-life care. *Int J Pal Nurs*. 2009;15(5):250-255.
5. Osoba D. Lessons learned from measuring health-related quality of life in oncology. *Journal of Clinical Oncology*.

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