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Neuro-oncology Nursing in Europe

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Neuro-oncology Nursing in Europe

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In Europe, nurses who provide care for cancer patients are found in a clinical or a palliative-care setting, like a hospice, a nursing home, or in home care. To provide quality care for patients with cancer, education and evidence-based oncology nursing are of importance and should be accessible in every European country, through nursing schools, journals, associations, congresses, and through the internet (e-learning). Education is aimed at several competences that oncology nurses need regarding patient care: assessment of health status, diagnostic aspects of nursing care, and, as a result of that implementation and evaluation of interventions, planning and coordinating care, and finally maintenance of a professional level and competence.

■ Cancer Nursing

Regarding cancer nursing practice, there appears to be a great variety of competences, education, working conditions, and professional status between and even within European countries [1]. A survey performed by the European Oncology Nursing Society (EONS) among its national member societies revealed that oncology nursing programmes are found in 16 of the 20 participating countries, with the duration of these programs ranging from 6–24 months (40–800 hours), and that these oncology nursing training programmes make use of the core programmes of EONS in various ways. It became clear that there is a high demand for oncology nurses in many European countries. Oncology nursing is recognized as a specialized area in 11 countries and all these countries except 3 have specialized/expertise roles for nurses in palliative care. The survey also showed that specialized roles for cancer protection and prevention are gradually increasing. Senior positions for practicing nursing at the masters' degree level exist in 4 countries, nursing practices development units/departments are common in only a few countries, including England and Sweden [2].

■ Knowledge and Skills

Because patient advocacy, provision of support, and information about disease and its treatment for patients and caregivers are important aspects of the coordinating role of the oncology nurse, it is recommended that nurses should become skilled communicators within the multidisciplinary team. As a consequence, in many European countries the role of the oncology nurse has developed to the extent that in many centres (neuro-) oncology nurses take a leading role in the care of oncology patients. Specialization in oncology nursing is aimed at providing support for a specific group of cancer patients and their families and to further develop care. So, the specialized oncology nurse requires specialized knowledge and skills [3].

■ Exchange of Knowledge

Admitting that neuro-oncology nursing is a specialty in oncology care and cure has been the starting point of the motivation for the contents of the nursing research and care programme at the next EANO conference. What could be the topics that address the demand of education for more or less

trained neuro-oncology nurses? What themes could be worthwhile to be discussed that will add important skills and competences to the understanding of oncology nurses and other health care personnel that result in optimal neuro-oncology care?

A colleague from Timone Hospital in Marseille, who started as a neuro-oncology nurse in September 2011, came to visit me in the Netherlands for 2 weeks. The aim was to see how a neuro-oncology nurse offers psychosocial care to both patients and caregivers and how coordination and continuation of care are being provided. In France, there is no national oncology nursing programme. Compared to the Dutch Oncology Nursing Society with almost 3000 members, in France, the national oncology society counts about 200 members. Most French nurses end their jobs after 4–6 years, also because there are limited ways to develop their nursing function. This colleague successfully conducted a newly started advanced oncology programme for nurses with a duration of 12 months, provided by institutions in Marseille and Paris. Hopefully, the programme will be continued.

During her visit, we discussed ideas about the content of the nursing session and came to the conclusion that there is much knowledge to be obtained and spread for oncology nurses concerning neuro-oncology, despite the fact that in the past 10 years growing awareness has emerged within neuro-oncology care and cure – awareness of the needs of patients and their families in guidance throughout their disease concerning possible problems in coping, anxiety, fear, and depression, in obtaining access to care and cure with a low threshold in case of emergencies or sudden questions, and in shared responsibility in treatment and end-of-life decision-making. But what about the meaning (from a patient's view) and the point (from a professional view) of rehabilitation, about end-of-life care, about cognitive disturbances and psychosocial disorders, cancer care disparities and patient access to health systems, clinical trials and effective cancer therapy, difficult ethical considerations in patients with a lack of insight? And last, but certainly not least, patient advocacy: what are the rights of a patient to obtain good care and information? To address all these topics, we have created a programme with a multidisciplinary character: nurses, a physiotherapist, a speech and language pathologist, a neuropsychologist, a psychologist, physicians and a patient advocate will be presenting, enabling the attending health care professionals to gain and share their knowledge and experience with each other.

■ Knowledge Enriches!

To increase access to education EANO offers oncology nurses a parallel session during the biannual European neuro-oncology conference, which will be held in Marseille from September 6–9, 2012. It will take place on Friday, September 7, in Parc Chanot, Marseille. During this parallel nursing session, French translation will be available. Furthermore, the EANO website contains a special subsection for nurses – and other health care professionals – with interesting educational materials to advance and apply knowledge in neuro-oncology. A survey of psychosocial care of neuro-oncology patients in Europe to be found in this subsection will enlarge the insight of where we and our patients stand and could increase awareness of the need for neuro-oncology nurses. I would like

to invite everyone who delivers psychosocial support to neuro-oncology patients to submit the completed survey to hannekezwindels@eano.eu.

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