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Changing oncology patient perspectives in an outpatient infusion center

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Tnfusion Centers consist of specialty nursing which is a unique hybrid of inpatient and ambulatory nursing. There is a subspecialty Lof patients requiring treatment over longer periods, including oncology patients receiving chemotherapy and patients who require shorter infusions, such as those with Multiple Sclerosis, Crohn's disease, and Rheumatoid Arthritis. Millions of intravenous chemotherapy treatments are given in Outpatient Infusion Centers worldwide daily. However, new approaches are being investigated that focus on the education and support needs of oncology patients. Telephone follow-up (TFU) by Nurse Navigators and Nurse Practitioners is an alternative approach; this study aimed to explore patient views of TFU. A quantitative study is being conducted using infusion patients who had received TFU. Nurse calls resulted in one of the following: 1) no intervention related to more severe complications, 2) an intervention consulting with the oncologist or 3) the need for the call to be managed directly by the oncologist. Data is being analyzed using content analysis. Staff participates in delivering the survey to previously identified patients. The completed form is dropped off in a lock secured box by the patients. The majority of patients verbally expressed a perceived benefit. As continuity of care is an important factor when building a relationship between patients and staff. We hope to train other staff in the use of this intervention. It may be useful for nurses to initially meet eligible patients face to face, and to establish a rapport before implementing TFU.

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Neuromodulatory approaches for cancer pain management

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Pain management is an integral part of treatment of advanced cancer. With new advances in surgery for pain, we now have variety of options for providing long term, ambulators and all the control of the of options for providing long term, ambulatory and robust pain control. Neuromodulation has emerged as an important aspect of integrated cancer treatment. This talk is aimed at evaluating various options that we have for management of cancer pain, their indications, pros and cons, techniques and complications. The following neuromodulatory approaches are useful in cancer pain management: Intrathecal pain pumps, Spinal cord stimulation, Peripheral stimulation and Central nervous system lesioning like cingulotomy. Neuromodulation can complement in the care and well-being of a cancer patient by keeping them in control of their pain.

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