

# Advanced nursing practice for patients with lymphoma and autologous stem cell transplantation

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# Background - Lymphoma



## Lymphoma rate is rising worldwide

- The tenth most common cancer worldwide, 4% of all cancers
- Affects mostly people > 55 years

## Major diagnostic groups



**Non-Hodgkin-Lymphoma (NHL)**

386'000 new cases worldwide



**Multiple Myeloma (MM)**

114'000 new cases worldwide



**Hodgkin-Lymphoma (HL)**

66'000 new cases worldwide

(Müller et al., 2005; <https://www.wcrf.org/int/cancer-facts-figures/worldwide-data>)

# Background - Therapy

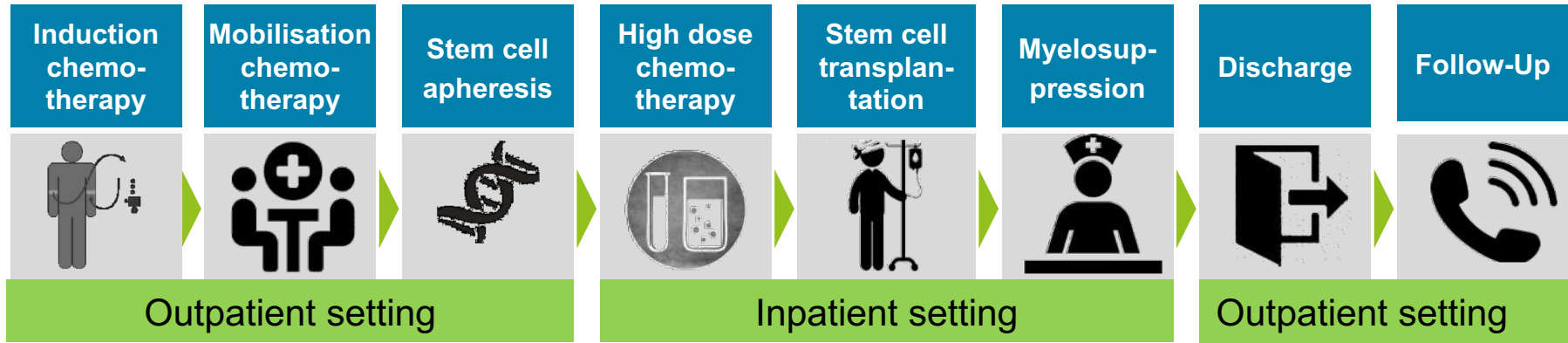
High dose chemotherapy (HDT)  
and autologous stem cell transplantation (ASCT)

- standard of care for MM and relapsed / refractory NHL and HL
- in transplant eligible patients



- in NHL / HL: curative intent
- in MM: superior overall survival and progression-free survival

# Treatment pathway



## Patients and families are confronted with:

- Complex therapy over several months
- Multiple side effects  
(i.e. pancytopenia, nausea, vomiting, mucositis, diarrhea, weight loss, alopecia, fatigue, anxiety, pain, peripheral neuropathy, sterility, depression)
- High psychological and social burden

# HDT and ASCT at Inselspital Bern University Hospital



## Inselspital – largest ASCT center in Switzerland

- 485 patients in Switzerland 2017 → 147 treated at Inselspital  
→ 103 adults with lymphoma (54 MM, 46 NHL, 3 HL)
- Number of treatments at Inselspital (and Switzerland) is constantly increasing



## Challenges with previous care model

- Growing group of increasingly elderly and often multimorbid patients
- Complex treatment, involving large interprofessional team with many actors
- Lack of continuity and coordination in ambulatory care

New model of care initiated to implement an advanced nursing practice (ANP) team

# Project aims

- To develop and implement an ANP service for patients with lymphoma undergoing HDT and ASCT
- The ANP team
  - Ensures continuous, needs-oriented care during preparation, treatment and follow-up for patients and families
  - Supports patients' and families' self-management
  - Coordinates interprofessional collaboration



## ANP team

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- RN, BScN, 40%
  - advanced education in oncology
  - MScN student
- RN, 40%
  - advanced education in patient and family counselling

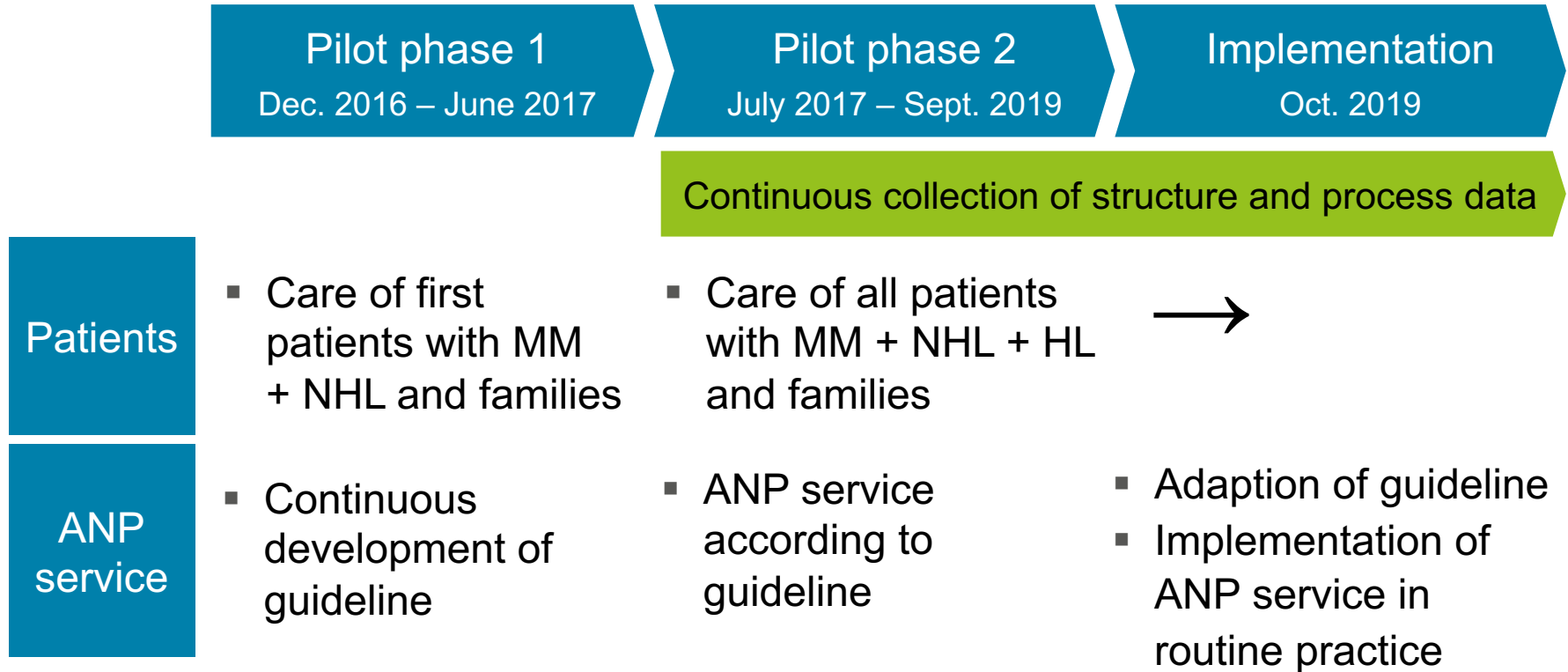
## Project team

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- ANP team
- Scientific collaborator
- Leading oncologist



# Project schedule



# Methods

- PEPPA framework

Participatory evidence-based, patient-focused process for advanced practice nursing (APN) role development, implementation, and evaluation

(Bryant-Lukosius & DiCenso, 2004)

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- Hamric's model of advanced nursing practice

(Hamric et al., 2013)

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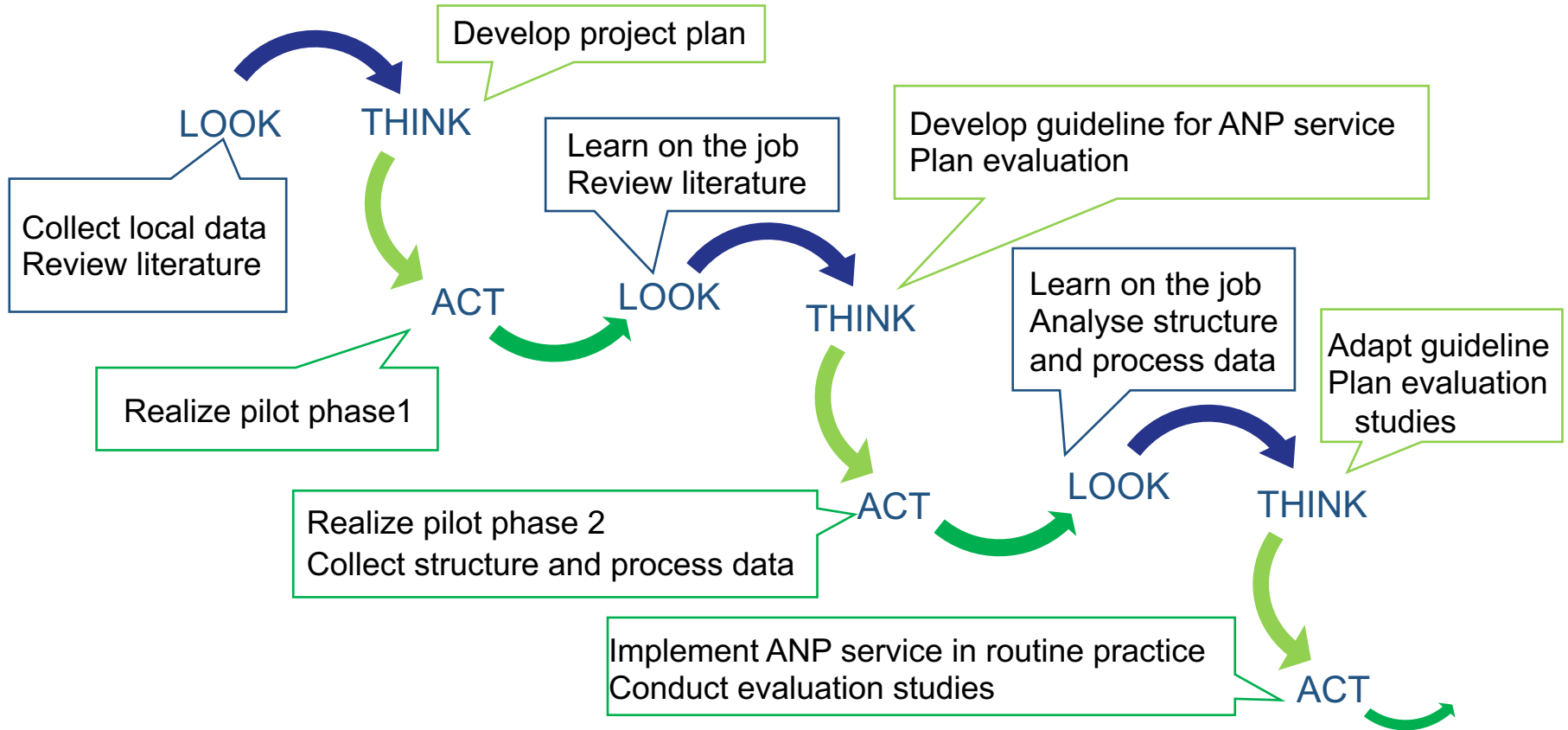
- Action research

(Stringer, 2014)

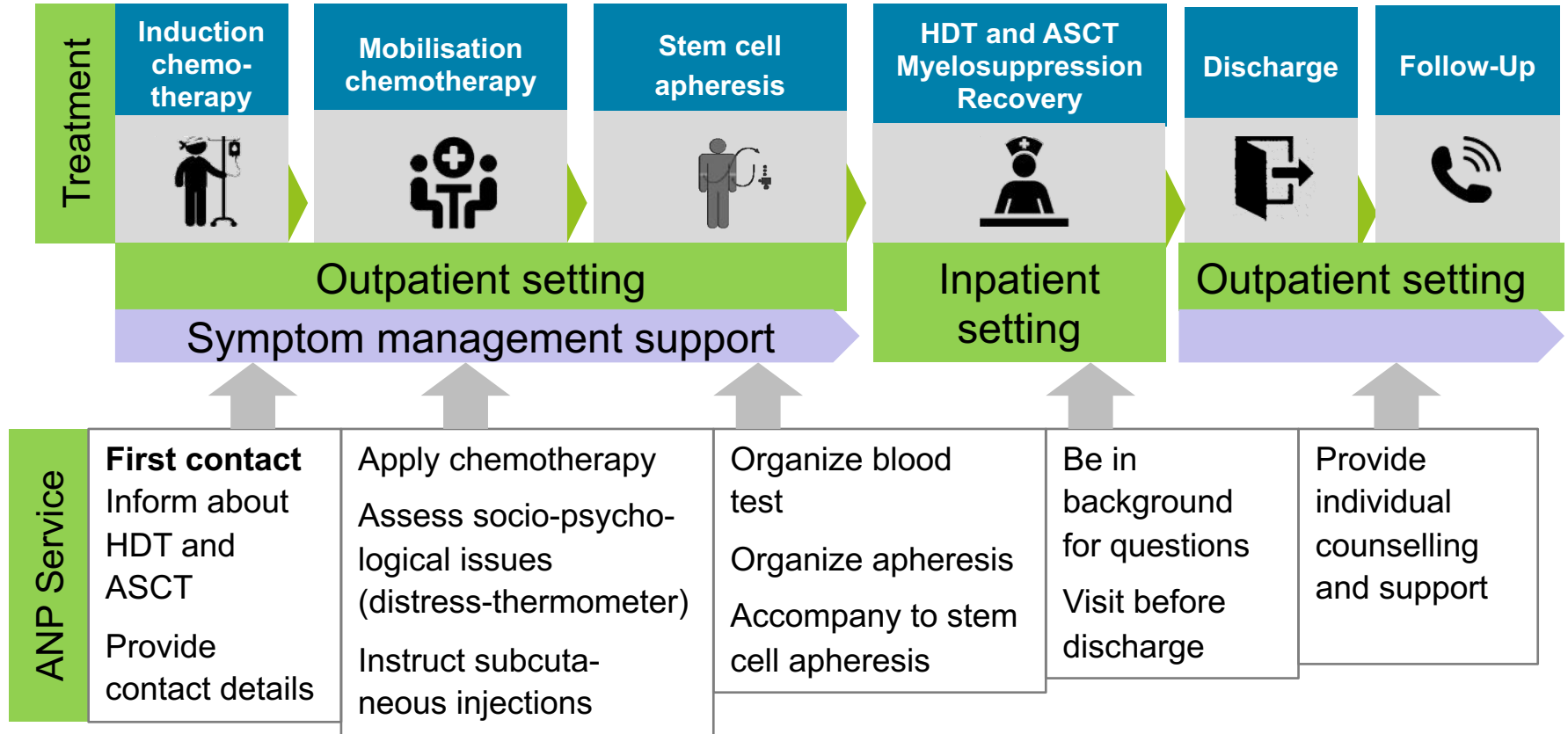
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# Iterative process using an action research approach

(Stringer, 2014)



# ANP service - continuous care, constant contact and coordination along the treatment pathway



# Structure and process data – evaluation 2017

## Structure

- 121 patients
- 508 contacts:
  - 319 x patient
  - 162 x patient and family
  - 27 x family
- 41 e-mails
- 91 phone calls

## Process

### Networking - Stakeholders involved

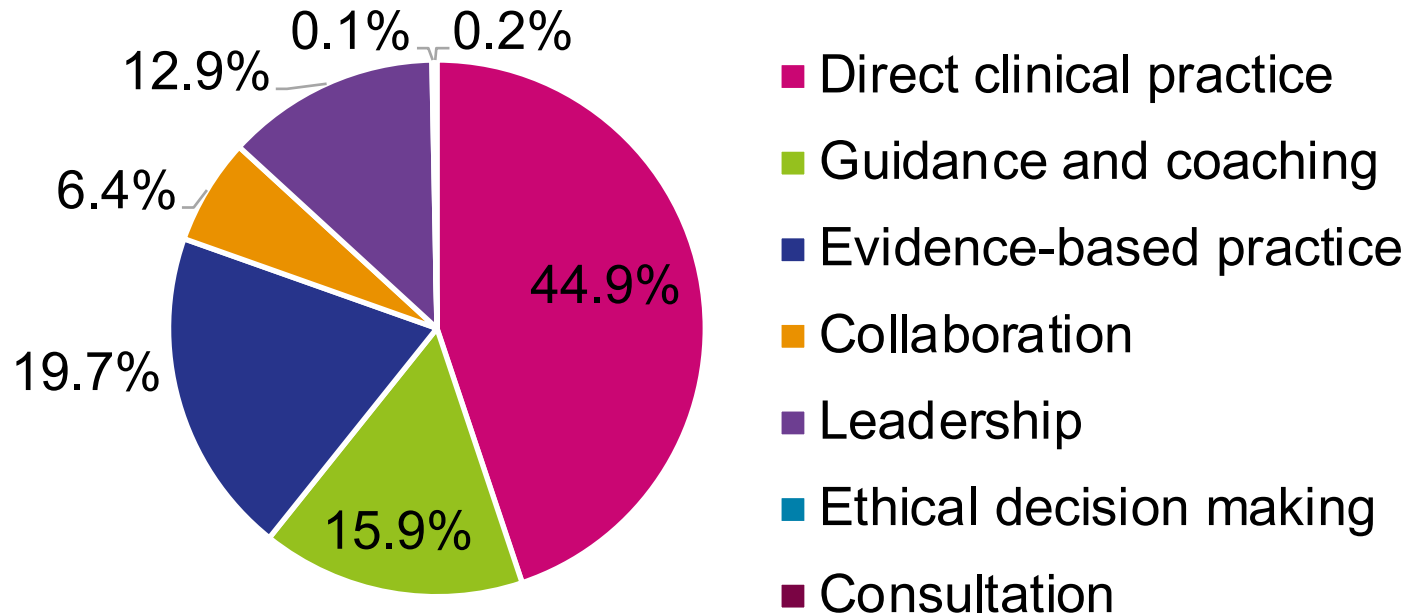
- 39 x psycho-oncologist
- 36 x social worker
- 18 x alopecia specialist
- 13 x home care nurses
- 12 x dietician
- 4 x interpreter

➡ Constant contact option for patients and families

➡ Care continuity and interprofessional collaboration

# APN activities according to core competencies of Hamric's model

(Hamric et al., 2013)



# Outlook



## Ongoing and planned evaluation research

- Compare supportive care needs of patients without and patients with support of ANP team (survey, pre-post-design)
- Describe symptom prevalence and health-related quality of life (prospective, longitudinal study)
- Explore patient/family experiences with the ANP service (qualitative study)



## Potential extension of ANP service

- Targeted patient group
- Scope of practice (e.g. symptom management)

## Lessons learned



Action research approach = useful



Evaluation planing without baseline data = limiting



Integration of new role = challenging! But now...  
«What would we do without you?»



Thank you for your attention



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# Disclosure

I have no conflict of interest