



The importance of nurses in the care of and research advancements for patients with advanced diseases

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The World Health Organization (WHO) defines palliative care as “*an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.*” The WHO further defines that palliative care necessarily “*uses a team approach to address the needs of patients and their families*” (1). Such interdisciplinary palliative care teams frequently include a combination of physicians, nurses, social workers, nutritionists, physical therapists, occupational therapists, and chaplains (2).

Importantly, palliative care enhances quality of life, positively influences the course of illness, and offers psychosocial support to help patients live as actively as possible until death and to help the family of patients cope during the patient’s illness and in their own bereavement (1,3,4). Clinically, such tasks and roles are very commonly performed by nurses today, and nurses play a critical role in understanding the principles of effective pain and symptom palliation and implementing pain and symptom management (5,6).

Focus in *Annals of Palliative Medicine* on the integral role of nurses in promoting and providing early palliative care was previously reported in an interesting perspective article by Fitch and colleagues (7). Those authors discussed how the provisions of palliative care are closely aligned to the basic tenants of nursing in providing holistic care to patients and their family members. They discussed that in many parts of the world, nurses are the primary health care

provider for patients with advanced diseases and the primary link between patients and other members of the health care team. Access to accredited palliative care education programs, however, has remained limited for nurses to date.

The February 2019 issue of *Annals of Palliative Medicine* features a focused issue dedicated to nursing palliative care. The issue is guest edited by Margaret L. Campbell, PhD, RN, FPCN from the College of Nursing at Wayne State University in Detroit, MI, USA and Theresa Tze-Kwan Lai, DHSc, IMDHA, MIFA, RM, RN, FHKAN from the The Jockey Club Home for Hospice and Society for the Promotion of Hospice Care in Hong Kong, China.

The issue features an original research article on the clinical parameters of wound healing in patients with advance illnesses. It also includes a wide breadth of timely and informative review articles on topics such as models of non-hospice palliative care, advanced practice registered nurses palliative care leadership and opportunities, palliative care services and nursing in pediatrics and pediatric oncology, and perinatal bereavement services. The issue concludes with a viewpoint article on mitigating distress of listeners from the pathognomonic noises made by patients in the final hours to days of life. This issue underscores that in addition to the critical role that nurses play in the clinical care of patients with advanced diseases, nurses are uniquely positioned to significantly add to the medical literature and advance the knowledge of palliative medicine.

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Footnote

Conflicts of Interest: The author has no conflicts of interest to declare.

References

1. WHO Definition of Palliative Care. Available online: <http://www.who.int/cancer/palliative/definition/en/>. Access January 21, 2019.
2. Simone CB 2nd, Jones JA. Palliative care for patients with locally advanced and metastatic non-small cell lung cancer. *Ann Palliat Med* 2013;2:178-88.
3. Ferris FD, Bruera E, Cherny N, et al. Palliative cancer care a decade later: accomplishments, the need, next steps-
-from the American Society of Clinical Oncology. *J Clin Oncol* 2009;27:3052-8.
4. Covinsky KE, Goldman L, Cook EF, et al. The impact of serious illness on patients' families. SUPPORT Investigators. Study to understand prognoses and preferences for outcomes and risks of treatment. *JAMA* 1994;272:1839-44.
5. Tuggey EM, Lewin WH. A multidisciplinary approach in providing transitional care for patients with advanced cancer. *Ann Palliat Med* 2014;3:139-43.
6. Bhatnagar S, Gupta M. Integrated pain and palliative medicine model. *Ann Palliat Med* 2016;5:196-208.
7. Fitch MI, Fliedner MC, O'Connor M. Nursing perspectives on palliative care 2015. *Ann Palliat Med* 2015;4:150-5.

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