

Nurses' Insights and Experiences in Palliative Chemotherapy Care

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Abstract

Objective: The study sought to provide an overview of the perspectives and experiences of Jordanian nurses in the context of caring for patients undergoing palliative chemotherapy. **Methods:** A phenomenological qualitative design was used to explore the perspectives and experiences of 11 Jordanian nurses providing care to patients receiving palliative chemotherapy at a governmental cancer care center. **Results:** The nurses identified two main themes: "Patient Persistence in Hope" and "Positive Impacts of Palliative Chemotherapy." They observed that some patients held onto false hopes of a cure when consenting to palliative chemotherapy, often influenced by family pressure. However, despite acknowledging fatigue as a major side effect, the nurses generally had a positive view of palliative chemotherapy, especially when it improved patients' quality of life or relieved pain. The nurses believed that the patients' resilience and positive attitude during treatment were encouraging. **Conclusion:** To better support patients, the study suggests that nurses should gain a deeper understanding of the significance patients attach to hope in advanced cancer situations to avoid misinterpreting it as denial or false optimism.

Keywords: Palliative chemotherapy- nurses' perspectives- Jordanian nurses- cancer care center- quality of life

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Introduction

Palliative chemotherapy refers to the administration of chemotherapy, which is a medical treatment involving the use of powerful drugs to inhibit the growth of or destroy rapidly dividing cells, with the primary goal of alleviating symptoms and improving the quality of life in individuals with advanced or incurable cancers [1]. Unlike curative chemotherapy, which aims to achieve a complete eradication of cancer, palliative chemotherapy focuses on managing symptoms, slowing disease progression, and enhancing overall well-being, especially in cases where a cure may not be feasible [2]. The intent is to provide relief from pain, control the spread of the disease, and enhance the patient's comfort and functional status.

In the realm of healthcare, the provision of palliative care is a critical component, especially for patients undergoing chemotherapy in cancer care centers [3]. This study embarks on a phenomenological exploration, seeking to unravel the intricate perspectives and lived experiences of Jordanian nurses immersed in the daily challenges and triumphs of caring for patients receiving palliative chemotherapy within the confines of a governmental cancer care center. Jordan, like many other countries, grapples with the complexities of palliative

care in cancer settings, and the experiences of healthcare professionals in this context remain a significant yet underexplored area [4]. The role of nurses, as frontline caregivers, is pivotal in shaping the quality of life for patients facing the dual challenges of cancer and palliative chemotherapy. Understanding the nuanced dimensions of their experiences is imperative for refining healthcare practices, fostering a supportive work environment, and ultimately enhancing patient outcomes [5].

Despite the critical role of nurses in palliative chemotherapy care, the literature concerning the lived experiences of Jordanian nurses in this specific context is notably sparse [6, 7]. While there is a burgeoning body of research on palliative care and nursing experiences globally, the unique sociocultural context of Jordan adds a layer of complexity that necessitates specific attention. Jordanian healthcare practices, cultural norms, and institutional frameworks may influence the way nurses perceive and navigate their roles in palliative care, making it essential to explore their experiences within this distinct context [8]. The existing literature predominantly focuses on general aspects of palliative care, often overlooking the unique challenges and triumphs faced by nurses in a governmental cancer care center in Jordan. A thorough examination of these experiences is vital not only for

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addressing the gaps in current knowledge but also for tailoring interventions and support systems that align with the specific needs of Jordanian nurses. By delving into their lived experiences, this study seeks to contribute valuable insights to the global discourse on palliative care while offering context-specific recommendations for enhancing nursing practices in Jordan [9, 7].

Understanding the experiences of Jordanian nurses providing palliative chemotherapy care is crucial for several reasons. Firstly, it sheds light on the contextual factors influencing their roles, allowing for the development of culturally sensitive and effective training programs. Secondly, it provides a platform for nurses to share their challenges and successes, fostering a sense of community and support within the healthcare system. Thirdly, the study contributes to the broader field of palliative care research, offering a unique perspective that can inform best practices globally.

Moreover, the outcomes of this research can serve as a catalyst for policy changes and resource allocation within Jordan's healthcare system. By identifying specific challenges faced by nurses, stakeholders can work towards implementing targeted interventions, improving working conditions, and ultimately enhancing the quality of palliative care services provided to patients. Additionally, the study aligns with the global movement towards person-centered care, emphasizing the importance of understanding healthcare providers' experiences to create a more compassionate and effective care environment.

In essence, this study endeavors to bridge a significant gap in the literature by providing an in-depth exploration of the experiences of Jordanian nurses caring for patients receiving palliative chemotherapy. By unraveling the intricacies of their perspectives, this research aspires to contribute valuable knowledge that can shape policies, inform educational curricula, and ultimately improve the holistic care provided to patients undergoing palliative chemotherapy in Jordan's governmental cancer care centers.

Materials and Methods

The study and participants

The study employed a descriptive qualitative research design to accurately depict the experiences of nurses caring for cancer patients. It focused on a governmental cancer care center in Jordan, which provides both curative and palliative cancer treatments, including chemotherapy and radiotherapy, mainly to patients with health insurance. The patient population encompassed a variety of cancer diagnoses. The center's multi-professional team included 15 nurses, and they treated approximately 500 chemotherapy patients monthly.

The study involved 11 purposively selected nurses with ages ranging from 30 to 46, averaging 38 years. Among them, four were specialist oncology nurses, five were registered general nurses (RN), and two were diploma nurses, who complete a 2-year nursing program and practice under RN supervision. Their experience in cancer care varied between 5 and 15 years of experience. See Table 1.

Procedure

After we obtained ethical clearance and permission from the university and cancer care center, the second author, a clinical specialist nurse, approached the nurses and invited them to participate in the study during their normal shifts; all recruited were willing to participate. Before conducting the interviews, informed consent was obtained in writing, and an information leaflet was handed to the participants. The interviews took place in a private room, either before the patients arrived for treatment or during lunch hour, lasting on average an hour. Participation was voluntary, and no harm was intended, however, the authors arranged with head nurse department perfectly.

Between September 2015 and September 2016, the second author, conducted 11 qualitative interviews on the topic of palliative chemotherapy experiences. These interviews were guided by three main themes: experiences with palliative chemotherapy, emotions related to the treatment, and expectations from it. The authors used prompting questions and probes questions to facilitate discussions and ensure comprehensive responses. The researchers determined the sample size by reaching data and theme saturation, which means they continued interviews until no new information was obtained. The interview data were transcribed verbatim, with participant names replaced by numbers for confidentiality.

For data analysis, qualitative content analysis was employed. Initially, the researchers carefully reviewed the transcripts and made initial notes in the margins as codes. They then identified overarching themes within the data through multiple reviews, defining and naming these themes [10, 11, 5]. The analysis was conducted separately by the authors, and they convened for a consensus meeting to agree on the final themes. Additionally, the researchers applied reflexivity to acknowledge their roles as nurses and how their own perceptions might influence the study's findings [12, 13].

Trustworthiness

To ensure the quality and rigor of the current study, the authors applied Lincoln and Guba's strategies [9], including credibility, transferability, dependability, and confirmability [13]. Credibility was strengthened through the second author's 9-year experience as a nurse, providing

Table 1. Participant Roles and Backgrounds

Number	Role	Years of experience
1	Specialist Oncology Nurses	10
2	Specialist Oncology Nurses	13
3	Specialist Oncology Nurses	11
4	Specialist Oncology Nurses	15
5	Registered General Nurses	7
6	Registered General Nurses	4
7	Registered General Nurses	3
8	Registered General Nurses	5
9	Registered General Nurses	6
10	Diploma Nurses	15
11	Diploma Nurses	14

an in-depth understanding of its culture. Additionally, a research proposal based on established research methods underwent peer review, further enhancing the study's credibility. Confirmability was ensured by the voluntary participation of nurses who were willing to share their data openly and honestly [14]. Detailed data was elicited using probing techniques [15], and the authors maintained a clear audit trail to document data collection and analysis processes.

To facilitate transferability, the authors provided a thorough description of the study context, outlined the number of participants, explained the data collection methods, and acknowledged any limitations. The study's dependability was reinforced by having multiple individuals independently analyze the data [16].

Results

The study's data revealed two predominant themes: the persistence of hope among patients and the generally positive perception of chemotherapy. These themes are substantiated by direct quotations from the participants.

The persistence of hope among patients: "They continue to believe that there remains a glimmer of hope."

Most participants in the study believed that patients were maintaining unrealistic hopes despite oncologists clearly explaining that palliative chemotherapy could not cure their condition. This suggests that some patients continued to hope for a miraculous cure, as perceived by the participants.

The generally positive perception of chemotherapy: "Finding Comfort and Positivity in Palliative Chemotherapy"

The study participants shared a positive experiences related to palliative chemotherapy. The study participants noted that patients exhibited comfort when the treatment was successful in enhancing their quality of life and alleviating pain. Patients' positive attitudes toward palliative chemotherapy were seen as encouraging, even when they understood it wouldn't provide a cure. However, participants were also aware of the side effects, with fatigue being a predominant concern, particularly among younger patients. Overall, the participants had a positive perspective on palliative chemotherapy, emphasizing its benefits in improving patients' well-being and managing symptoms.

The study participants observed that patients exhibited a positive outlook when palliative chemotherapy effectively improved their quality of life and provided pain relief. Nurses shared examples of patients experiencing significant benefits from the treatment, which instilled positivity in both patients and healthcare providers. Most patients were noted to have a positive attitude toward palliative chemotherapy, despite understanding that it couldn't provide a cure.

Participants acknowledged the positive impact of the treatment while being aware of the side effects. Fatigue was identified as the most common side effect, particularly affecting younger patients trying to manage work and family responsibilities [17, 18]. Nausea and vomiting were less frequently reported [19]. In summary, the participants

viewed palliative chemotherapy positively, especially when it enhanced patients' quality of life or alleviated pain. Patients' positive attitudes were seen as motivating, despite the challenges posed by side effects like fatigue, nausea and vomiting.

Discussion

The study found that nurses believed patients often consented to palliative chemotherapy because they held onto the hope of a cure, even when healthcare professionals had informed them that such treatment wouldn't lead to a cure. Nurses also perceived this as patients' difficulty in accepting the reality of impending death. This perspective was supported by previous research and suggested that palliative chemotherapy could raise unrealistic expectations and hinder patients from acknowledging the reality of death and making necessary preparations [20-22]. However, an alternative perspective on hope was also noted, emphasizing that some patients cling to hope because it is what makes life meaningful for them, and they may resist redirecting their hope towards more realistic goals [23]. Additionally, the study revealed that patients didn't always make the decision to undergo palliative chemotherapy entirely on their own; some felt pressure from their families [8]. The role of others in patients' palliative chemotherapy decisions varied, with different studies showing different patterns of decision-making, either involving doctors, patients themselves, or family influence [24, 25, 8]. Some patients may not be entirely transparent about their well-being due to concerns that their treatment might be stopped.

In summary, the study highlighted the complex interplay of hope, family influence, and patient autonomy in the context of palliative chemotherapy decisions. The study showed that despite being aware of the potential side effects of palliative chemotherapy, the nurses involved had predominantly positive experiences with the treatment. They emphasized that the benefits in terms of pain relief, improved quality of life, and the positive outlook of patients outweighed any drawbacks. This perspective contrasted with the ambivalence expressed by some district nurses in another study [26-28].

The debate within the healthcare community regarding the advantages and disadvantages of palliative chemotherapy, as well as its timing, was noted. Some researchers advocated for a reconsideration of guidelines due to concerns about potential harm to terminal cancer patients, while others saw palliative chemotherapy as a valuable intervention when used appropriately [29, 30]. Nonetheless, the study highlighted that the hope generated by the prospect of treatment, combined with pain reduction, often led advanced cancer patients to accept treatment even when its chances of substantial benefit were limited. While there was a positive observation that nausea and vomiting tended to decrease over time, fatigue emerged as a significant and often irreparable side effect, negatively impacting patients' quality of life and daily functioning [31-33]. This aligns with previous research indicating a high prevalence of severe fatigue in advanced cancer patients, and it also suggested a connection between

fatigue and a lower level of hope.

In summary, the study emphasized the complexity of perspectives on palliative chemotherapy, particularly in relation to side effects like fatigue, and highlighted the crucial role of hope in patients' decisions and experiences with this treatment.

In conclusion, the study found that while the participants believed that patients consent to palliative chemotherapy with the hope of being cured, they generally had a positive experience with the treatment. They considered the improvements in pain relief and quality of life to be more significant than the associated side effects. The patients' positive attitudes during palliative chemotherapy were seen as encouraging by the nurses. To enhance their care, the study recommended that nurses should acquire a deeper understanding of the role of hope in the lives of individuals with advanced cancer. This knowledge would help nurses avoid misinterpreting patients' hope as denial or unrealistic expectations. Furthermore, gaining insight into how palliative chemotherapy can contribute to maintaining hope and emotional well-being is essential for nurses in providing effective psychosocial and spiritual support. It was highlighted that hope can manifest differently in various contexts, and this awareness would enable nurses to offer more comprehensive care to those undergoing palliative chemotherapy.

Author Contribution Statement

All authors contributed equally in this study.

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Declaration of conflicting interests

The author(s) declared no potential conflicts of interest with respect to the research, authorship and/or publication of this article.

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