



## Do Oncology Nurses Provide More Care to Patients With High Levels of Emotional Distress?

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Abstract: Purpose/Objectives: To investigate nurses' planning and implementation of individualized patient care in relation to patients' emotional distress as assessed by nurses and whether nurses and patients perceived the implemented care in a similar manner. Design: Prospective, comparative. Setting: Five oncologic-hematologic wards in Sweden. Sample: 90 individual nurse-patient pairs were recruited and 81 were intact after three consecutive days. Each pair consisted of a patient with cancer and a nurse responsible for that patient's care. Methods: Nurse-patient pairs were followed using questionnaires. Outcome measures were nurses' identification of patients' emotional distress, care planning, and nurse-patient ratings of implemented care. Main Research Variables: Patients' emotional distress and nurses' implemented care. Findings: Nurses identified a variety of emotional issues among patients and planned individual nursing interventions. Nurse and patient perceptions of implemented care demonstrated weak correlations for individually planned interventions and nurses' general caring behavior. With one exception, nurse self-reports did not indicate any differences in nurses' caring behavior directed to more and less distressed patients. Nurses reported providing comfort more frequently to patients with high levels of emotional distress, but this was not substantiated in patients' ratings. Conclusions: Nurses showed an intention to provide individualized care. However, with one exception, nurses did not report providing more care to patients with cancer with high levels of emotional distress than to less distressed patients. Implications for Nursing: To ensure individualized care, nurses in cancer care should closely validate the accuracy of their interpretation of patients' needs and their planning of care in collaboration with the patients.

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