
ARCTIC HEALTH
An information portal to issues affecting the health and well-being
of our planet's northernmost inhabitants

The glimmering embers: experiences of hope among cancer patients in palliative home care.

https://arctichealth.org/en/permalink/ahliterature136705

Author: Louise Olsson
Gunnel Ostlund
Peter Strang
Eva Jeppsson Grassman
Maria Friedrichsen

Author Affiliation: Department of Social and Welfare Studies, Faculty of Health Sciences, Campus Norrköping, Linköping University, Norrköping, Sweden. louol@isv.liu.se

Source: Palliat Support Care. 2011 Mar;9(1):43-54

Date: Mar-2011

Language: English

Publication Type: Article

Keywords: Adult
Home Care Services
Humans
Interviews as Topic
Morale
Neoplasms - psychology
Palliative Care - psychology
Sweden

Abstract: The experience of hope among cancer patients in palliative care is important information for healthcare providers, but research on the subject is sparse. The aim of this article was to explore how cancer patients admitted to palliative home care experienced the significance of hope and used hope during 6 weeks throughout the last phase of their life, and to assess their symptoms and hope status during 6 weeks throughout the last phase of their lives.

Eleven adult patients with cancer participated in 20 interviews and completed seven diaries. The participants were recruited from two palliative care units in the southeast of Sweden. The method used was Grounded Theory (GT), and analysis was based on the constant comparative method.

The core category, glimmering embers, was generated from four processes: (1) The creation of "convinced" hope, with a focus on positive events, formed in order to have something to look forward to; (2) The creation of "simulated hope," including awareness of the lack of realism, but including attempts to believe in unrealistic reasons for hope; (3) The collection of and maintaining of moments of hope, expressing a wish to "seize the day" and hold on to moments of joy and pleasure; and (4) "Gradually extinct" hope, characterized by a lack of energy and a sense of time running out.

The different processes of hope helped the patients to continue to live when they were close to death. Hope should be respected and understood by the professionals giving them support.

PubMed ID: 21352617 View in PubMed

Family history of colorectal cancer in a Sweden county.

https://arctichealth.org/en/permalink/ahliterature18145

Author: Louise Olsson
Annika Lindblom

Author Affiliation: Department of Surgery, Central Hospital, Västerås, Uppsala University, Sweden, olsson@ltvastmanland.se

Source: Fam Cancer. 2003;2(2):87-93
Date: 2003
Language: English
Publication Type: Article
Keywords: Adenomatous Polyposis Coli - diagnosis - epidemiology - genetics
Adolescent
Adult
Age Distribution
Age of Onset
Aged
Aged, 80 and over
Child
Child, Preschool
Colorectal Neoplasms - diagnosis - epidemiology - genetics
Colorectal Neoplasms, Hereditary Nonpolyposis - diagnosis - epidemiology - genetics
Family Health
Female
Genetic Predisposition to Disease
Humans
Infant
Infant, Newborn
Male
Mass Screening
Middle Aged
Pedigree
Questionnaires
Sweden - epidemiology
Abstract: Hereditary nonpolyposis colorectal cancer (HNPCC) and familial adenomatosis polyposis (FAP) are well-known high-risk cancer syndromes. Hereditary colorectal cancer (HCRC) with at least three relatives with colorectal cancer and a dominant pattern of inheritance but with no specifications for age at onset and two close relatives with colorectal cancer (TCR) are other forms of familial clustering known to carry an increased risk of the disease. The frequency of the total burden of familial colorectal cancer is not well known. We therefore investigated the family history of 400/411 (97%) eligible patients with recently diagnosed colorectal cancer in Västmanland county, Sweden, during a 3-year period. Records or death certificates confirmed the diagnoses of relatives. Five patients (1.2%, 95% CI 0.15-2.2) were diagnosed as having HNPCC, eight (1.9%, 95% CI 0.6-3.2) as having HCRC and thirty-four (8.3%, 95% CI 5.6-11.0) were identified as having TCR. In total, 47 patients (11.4%, 95% CI 8.3-14.5) were found to have a contributing familial background. The implication is thus that every ninth patient with colorectal cancer represents a highly or intermediately increased risk of the disease among relatives. We conclude that the low frequency of individuals identified by family history alone makes the establishment of surveillance programs feasible.
PubMed ID: 14574157 View in PubMed