

practice question

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How can nurses help patients report neutropenic sepsis?

People's reluctance to report sepsis can be overcome by building therapeutic relationships

Neutropenic sepsis occurs in about 20% of people receiving chemotherapy (Smith et al 2006, Aapro et al 2011). There are about 4,000 neutropenic sepsis admissions and 700 deaths annually in the UK (National Institute for Health and Care Excellence (NICE) 2012). Delivery of intravenous antibiotics within one hour of presentation saves lives but patients often

delay reporting the symptoms to acute oncology services (AOS) (National Confidential Enquiry into Patient Outcome and Death (NCEPOD) 2008, Oakley et al 2016).

Delays can lead to distress, hospital admission, greater risk of treatment interruptions that affect prognoses and increased health service costs. However, nurses can promote earlier presentation through understanding the reasons for the delays.

I found that neutropenic sepsis information provided during medically led consent, nurse-led pre-treatment consultation appointments and throughout treatment can heighten patients' fears of dying (Oakley et al 2016).

Patient fears

The information often made patients realise how seriously ill they were so they avoided learning about neutropenic sepsis and ignored early symptoms.


Increasingly, clinicians discussed infections rather than sepsis specifically because they recognised that patients were frightened and feared treatment refusal.

Chemotherapy services can focus on drug delivery where information is delivered dispassionately, thereby encouraging patient passivity.

Common reasons for delays across neutropenic sepsis, stroke and myocardial infarction include fear, denial, poor motivation, not recognising symptoms as important, self-medicating, advanced disease, bereavement, fatalism, carer exclusion and poor clinician relationships (Oakley et al 2016, Mandelzweig et al 2006, Mackintosh et al 2012, Thuresson et al 2007).

Pre-treatment consultations that promote normality, empower patients, address fears and maximise relationships may encourage early symptom reporting.

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Find out more

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Pre-treatment consultation tips to encourage early symptom reporting

Normality and empowerment

- » Empower patients to stay fit during treatment
- » Check understanding of the patient agenda
- » Cancer Research UK's Your Cancer Treatment Record and accompanying patient video promote confidence to manage side effects
- » Your Cancer Treatment Record and the Macmillan

cancer treatment alert card include a version of the UKONS traffic light symptom reporting tool (Oakley et al 2010)

Address fears

- » Address patient fears to help them hear information
- » Explain neutropenic sepsis and management, and the benefits of presenting early

Relationships

- » Promote trusting therapeutic relationships rather than listing side effects
- » Films to introduce staff and services can increase patients' inclination to call
- » Engage patients' family or friends and encourage working together to manage and report side effects and to make plans