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[Intervention Review]

Non-invasive interventions for improving well-being and quality of life in patients with lung cancer

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ABSTRACT

Background

Lung cancer is one of the leading causes of death globally. Despite advances in treatment, outlook for the majority of patients remains grim and most face a pessimistic outlook accompanied by sometimes devastating effects on emotional and psychological health. Although chemotherapy is accepted as an effective treatment for advanced lung cancer, the high prevalence of treatment-related side effects as well as the symptoms of disease progression highlight the need for high quality palliative and supportive care to minimise symptom distress and to promote quality of life.

Objectives

To assess the effectiveness of non-invasive interventions delivered by healthcare professionals in improving symptoms, psychological functioning and quality of life in patients with lung cancer.

Search methods

The Cochrane Central Register of Controlled Trials (*The Cochrane Library* Issue 4, 2003), MEDLINE (1966-March 2003), EMBASE (1974-March 2003), CINAHL (1982-September 2002), CancerLit (1975-October 2002), PsycINFO (1873-March 2003), reference lists of relevant articles and contact with authors.

Selection criteria

Randomised or quasi-randomised clinical trials assessing the effects of non-invasive interventions in improving well-being and quality of life in patients diagnosed with lung cancer.

Data collection and analysis

Two authors independently assessed relevant studies for inclusion. Data extraction and quality assessment of relevant studies was performed by one author and checked by a second author.

Main results

Nine trials were included and categorised into six groups. Two trials of a nursing intervention to manage breathlessness showed benefit on symptom experience, performance status and emotional functioning. Three trials assessed structured nursing programmes and found positive effects on delay in clinical deterioration, dependency and symptom distress, and improvements in emotional functioning and

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satisfaction with care. One trial assessing counselling showed benefit on some emotional components of the illness but findings were not conclusive. One trial assessing an exercise programme, found a beneficial effect on self-empowerment. One trial of nutritional interventions found positive effects for increasing energy intake, but no improvement in quality of life. One trial of reflexology showed some positive, but short-lasting effects on anxiety.

Authors' conclusions

Nurse follow-up programmes and a nurse intervention to manage breathlessness may produce beneficial effects. Psychotherapeutic study indicates that counselling may help patients cope more effectively with emotional symptoms, but the evidence is not conclusive. Findings from the included studies reinforce the necessity for increased training and education of healthcare professionals giving in these interventions. More research, of higher methodological quality is needed in this area to explore possible underlying explanatory mechanisms.

PLAIN LANGUAGE SUMMARY

Nurse follow-up programmes and an intervention to reduce breathlessness may help reduce symptoms in people with lung cancer

Despite recent advances in lung cancer treatment, the outlook for most patients is grim. Many still face a short survival time during which they may suffer physical and psychological problems associated with the cancer and with side effects of treatment. Although no cure exists there is a need for high quality care to support patients and reduce symptoms as much as possible. This review found that a specialised nursing programme to reduce breathlessness was effective and that after patients' active treatment had finished, those cared for by nurses did as well or better than those cared for by doctors.