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Palliative Care and the Importance of Communication Between Nurse and Patient, Family and Caregiver

Cuidados Paliativos e a Importância da Comunicação entre o Enfermeiro e Paciente, Familiar e Cuidador

Cuidados Paliativos y la Importancia de la Comunicación entre el Enfermero y del Paciente, Familiar y Cuidador

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ABSTRACT

Objective: The study's goal has been to both assess and understand the scientific production over the period from 2005 to 2016 with regards to palliative care and the importance of communication related to the palliative care strategy. **Methods:** It is a descriptive-exploratory research with a quantitative approach, which was performed by the integrative review method. **Results:** After reading all the 14 articles, it was possible to group them by observing the theme studied and, in turn, the following categorization was obtained: Palliative care and the interpersonal relationship between nurse and patient; Communication as a strategy to strengthen the link between nurses and the user of palliative care; The importance of communication between nurse and family/caregiver. **Conclusion:** The nurse plays a fundamental role towards the promotion of palliative care. They are able to perform the acceptance of diagnosis and help patients living with their diseases, then providing integral assistance to the user and all involved with the patient.

Descriptors: Oncology, Nursing, Palliative Care.

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RESUMO

Objetivo: Conhecer e analisar a produção científica no período de 2005 à 2016 em relação cuidados paliativos e a importância da comunicação na estratégia dos cuidados paliativos. Método: Esta pesquisa possui características descritivas, exploratórias com abordagem quantitativa, realizado pelo método da revisão integrativa. Resultados: A partir da leitura dos 14 artigos, os artigos foram agrupados observando-se a temática em questão e, assim obteve-se a seguinte categorização: Cuidados Paliativos e a Relação interpessoal do enfermeiro e do paciente; Comunicação como estratégia para fortalecimento do vinculo entre enfermeiro e o usuário dos Cuidados Paliativos; A importância da comunicação do enfermeiro e o familiar/cuidador. Conclusão: O enfermeiro tem um papel fundamental para a promoção do CP, como na aceitação do diagnostico e auxilio para conviver com a doença, prestando assistência integral ao usuário e a todos envolvidos com o doente.

Descritores: Oncologia, Enfermagem, Cuidados Paliativos.

RESUMEN

Objetivo: Conocer y analizar la producción científica en el período de 2005 a 2016 en relación con los cuidados paliativos y la importancia de la comunicación en la estrategia de los cuidados paliativos. Método: Esta investigación posee características descriptivas, exploratorias con abordaje cuantitativo, realizado por el método de la revisión integrativa. Resultados: A partir de la lectura de los 14 artículos, los artículos fueron agrupados observándose la temática en cuestión y, así se obtuvo la siguiente categorización: Cuidados Paliativos y la Relación interpersonal del enfermero y del paciente; Comunicación como estrategia para fortalecer el vínculo entre enfermero y el usuario de los cuidados paliativos; La importancia de la comunicación del enfermero y el familiar / cuidador. Conclusión: El enfermero tiene un papel fundamental para la promoción del CP, como en la aceptación del diagnóstico y auxilio para convivir con la enfermedad, prestando asistencia integral al usuario ya todos involucrados con el enfermo.

Descriptores: Oncología, Enfermería, Cuidados Paliativos.

INTRODUCTION

The incidence of cancer is increasing, and several factors contribute to this progression, among them are the consumption of alcohol and cigarette exaggerated and the consumption of food contaminated with pesticides generating a poor diet, another important factor to be evaluated is the genetics that does not choose sex and age. Assistance to patients with advanced cancer requires special treatment.¹

The Palliative Care (PC) treats the patient and not more of his illness, is a set of care that brings better living conditions for the patient. Looking at your needs and symptoms not only from the physical point of view, but also from the emotional, social and spiritual viewpoints. This assistance would also extend to looking at family and care during treatment and providing them with solidarity after death during the grief period.

The nurse and his team have the obligation to reflect on PC provided at the end of life, as it is likely that by the year 2015, 15 million new cancer cases, unaccounted for cases of AIDS and disabling chronic diseases that have affected a large number of people. It is already known about the current and future importance of the implantation of services in hospitals and institutions, that elaborate new measures aiming at the quality of life.²

According to the World Health Organization, a definition of PC was defined in 1990 and updated in 2002, PC consisted of the assistance provided by a multidisciplinary team, whose objective is to improve the quality of life of the patient and their relatives, life threatened by disease, through the prevention and mitigation of suffering, early identification, impeccable assessment and treatment of pain and physical, social, psychological and spiritual symptoms.³

The size of the PC is very large, we must act with caution, because entering the life of sick people involving friends and family with unknown cultures and values, unique experience that benefits the professional experiencing and interacting with each patient and each family, think that the PC resumptions only to the care given to the final phase of life, want to fight more for life, to undo the idea that by bearing a cancer it means that a person is about to die.^{1,2}

When the patients cannot undergo surgery, chemotherapy and radiotherapy, especially in those in the terminal stages, the PC becomes essential and complex when users have incurability becomes a reality, for these there are procedures and drugs and approaches capable of providing physical well-being to the end of life, positive results of this treatment modality, seeking to alleviate or cure any type of discomfort, control of pain and other symptoms and psychosocial and spiritual problems are paramount, that is the purpose of the care to provide better quality of life and relief of the suffering of the user and their relatives. That is why the importance of professionals with competence.⁴

The information to the user about his real situation is important so that he does not feel cheated, inform about the steps of the treatment, with honesty, be attentive maintaining good communication, a loving look, a touch, a smile of understanding, talk about the spiritual need and how these beliefs influence treatments, are ways to win the trust of the patient, trust is the fundamental foundation of the structure of PC. Humanizing is essential to life.^{1,2,4}

This work aims to obtain subsidies capable of providing a better quality of life for users, relatives and caregivers. The results can also contribute to new research, develop science and bring new concepts to nursing practice.

Given the aforementioned, the following research question was formulated: What is the scientific production from 2006 to 2017 published about PC with regards to the importance of communication related to the palliative care strategy? In order to answer this question, the following objective was targeted: both assessing and understanding the scientific production over the period from 2005 to 2016 with regards to palliative care and the importance of communication related to the palliative care strategy.

METHODS

It is a descriptive-exploratory research with a quantitative approach, which was performed by the integrative review method. This method seeks, assembles, organizes and synthesizes the results of researches on the subject in a systematic way, with the purpose of promoting greater familiarity with the subject being studied. From the data and its analysis, it was possible to find prominences that contemplate the importance of a good communication between the nurses and the patients, relatives, and caregivers who are being submitted to the PC.

With the intention of knowing the scientific production on PC and the importance of the communication between the nurses and the patients, relatives and caregivers, the subject under study, was realized via online, through the *Biblioteca Virtual de Saúde (BVS)* [Virtual Health Library], using Descriptors of the Health Sciences (Decs): oncology, nursing, and palliative care.

The search for scientific articles was done through a database of the *Literatura Latino-Americana e do Caribe em Ciências da Saúde (LILACS)* [Latin American and Caribbean Literature in Health Science], established as inclusion criteria: articles published in Portuguese, English, and Spanish over the period from 2006 to 2017, available online, complete and free. And as exclusion criteria: repeated, not available for free online.

By searching the descriptor "oncology" was found 28,898 articles, to refine the search, the descriptor was launched, "nursing" reducing the number of articles to 1,532, adding the descriptor "palliative care" the number found was 143 articles, all they in the same database searched *LILACS*. After reading and preliminary analysis of these articles, it indicated that 14 fulfilled the established criteria, reason why will be considered in that proposal. The articles that were analyzed in this study were published between the years of 2006 and 2017.

Considering the ethical aspects, authors' authorship, the Copyright Law, both in direct and indirect citations, were observed and respected.

RESULTS AND DISCUSSION

After reading all the 14 articles, it was possible to group them by observing the theme studied and, in turn, the following categorization was obtained: Palliative care and the interpersonal relationship between nurse and patient; Communication as a strategy to strengthen the link between nurses and the user of palliative care; The importance of communication between nurse and family/caregiver.

Palliative care and the interpersonal relationship between nurse and patient

The philosophy of palliative care consists of active and integral assistance, aiming to minimize pain, preserving the

quality of life for a dignified end. The focus of this assistance was in 1967 when Cecily Saunders founded St. Christopher's Hospice, the first service to offer comprehensive patient care to understand the needs of the users (within their limits). PC is a word originated from the Latin *pallium*, which means mantle. The main idea of this philosophy is to protect, preserve, cover, shelter when the cure for the disease is no longer possible.⁵

Palliative care aims to offer a better quality of life to the users of this therapy, where care is extended to family and caregivers, aiming at the prevention and alleviation of suffering through early identification, in this way constitute an interdisciplinary field of total care, active and integral, generating a correct assessment and a treatment for the relief of pain and other symptoms, offering psychosocial and spiritual support, even in the period of family grief.

The fight against fatal diseases and death itself has been increasingly extended, prolonging life, has demanded a search for new practices by health professionals in order to better manage the patient's life span.

The PC is focused on valuing life, helping them deal with the disease through prevention and relief of suffering, the main focus is to exercise the care with love and knowledge in the area, be able to identify the needs of the user, these with cancer has pain as one of the symptoms that most interfere with their quality of life, influencing mood, mobility, sleep, food intake and activities of daily living, as well as other symptoms such as anorexia, depression, dyspnea, constipation and anxiety affecting social, family and work relationships.^{5,6}

Palliative care seeks, in an integrated way, to identify and minimize physical, psychological, social and spiritual problems, essential enough for the joint action of a multidisciplinary team composed of doctors, psychologists, nurses, social workers, among others that allow the exchange and knowledge, from different knowledge.

The spirituality reinforces the emotional support of the user, allowing the search for meaning in life, listening to identify the real demands of the user and the communication is verbal also allows to identify the needs of the user and the family, respecting their limits of understanding and emotional tolerance, aiming to increase your well being the relief of human suffering.⁶

The importance of the nurse in palliative care, to help these users and their families at that moment to an activity or a model of health care that is being called palliative care, for nursing to offer palliative care is to therapeutically experience and share moments of love and compassion, understand that it is possible to make imminent death worthy and to assure the user support and welcome in that instant humanized care that the ontological user deserves.^{2,5,6,13}

Nurses play a essential role in promoting the PC, such as acceptance of diagnosis and help to cope with the disease, providing integral assistance to the user and all involved with the patient. Through listening, the nurse aims to reduce anxiety, due to the fear of illness, and the future that awaits them. It is necessary for nursing to help the family to recognize their

problems and, if possible, to find solutions through sincere communication between professionals, family and the user.

Communication as a strategy to strengthen the link between nurses and the user of palliative care

In addition to the various strategies in this modality, communication stands out because it is part of the human essence understood as a technique of exchange and understanding, in which people perceive and share the meaning of ideas, thoughts, and purposes within the scope of nursing communication and of utmost relevance, for the practice of the PC, which is a driving force between nurse and user.^{7,14}

Communication goes beyond words to attentive listening, gaze, and posture, it is an effective therapy for users who need it especially in the terminal phase, adequate and fundamental communication for integral and humanized care, is a way to recognize, to accommodate the needs of the user and family, when the nurse uses this verbal or non-verbal resource allows the users to participate in the specific decisions and care to obtain a dignified treatment.^{8,13}

Communication is a relevant tool that seeks to mediate human relations by promoting sustainability and the consolidation of autonomy, always stimulating the user to verbalize, their anxieties, concerns, and doubts, providing a strong bond between the nurse and the user and family, consolidating a foundation for the interpersonal relationship, bringing tranquility and confidence.^{1,6}

Even if the user does not express, it is important to provide trust, to let him know that he has a professional who shows attention, affection and commitment to the patient, and communication properly is an integral and humanized pillar of a single desire if understood, the user needs to feel cared for and supported by the nurses, with whom he feels important with the sense of protection, comfort and inner peace.

The importance of communication between nurse and family/caregiver

Caring for a person who is in the terminal phase is a very significant task, encompassing dimensions, psychological, emotional and spiritual. The caregiver of the terminally ill person, uncertainty, fears about the future, and loss are the most common psychological concerns.

It was verified that the communication with the patient and with the family members is of extreme importance so that the health professionals, in primordial the nurses, can provide a service of quality, because only by means of an effective communication with all the members is that he will be able to properly include it in the therapy of PC. 8.9,11,15

Through such an understanding, the implementation of effective communication between nurse, patient, and family is immensely relevant, in order to assess and better know the patient and his needs, with agility and understanding,

and thus enable a special therapeutic assistance. In this concept, the dialogue between the nursing professional and the terminal patient's family can discover many anxieties, fears and clarify doubts present in this situation and, in this way, generate the creation of bond, respectable and necessary in this phase of life. ^{2,14,15}

Family support strategies such as: access to effective communication, the inclusion of the family in care, understanding of special needs, generating optimal control of pain and other symptoms, providing existential support, and in a way preparing the family to death, generating greater support for mourning. 9,12,13,15

In order for nurses to effectively practice as strategies, it is necessary not to neglect their emotional experiences when caring for the terminally ill person and his family, emphasizing the seriousness of the same as a connection within the team of PC. In the selected studies, it appears that nurses are worried about caring for the terminally ill and their families, since levels of apprehension change according to the professional status, gender, sector and personal experience.⁹

Aiming to perform a quality PC, it is essential that the nurse assess the person in the terminal phase and family, in order to establish an interpersonal contact, ensuring continuity, using the maximum time to be with them and not limiting to the physical aspects of the care provided. 9.14,15

Different needs are presented to each family/caregiver of the critically ill person, so the nurses in their interference should be smart to the recognition and contentment of them, according to the establishment of a trust affinity, in the expansion of nursing at the same time which discipline and profession.

CONCLUSIONS

This research was able to demonstrate the contributions of nurses through communication in curative treatment to the end in palliative care. The importance of communication in palliative care can help patients and their families to the physical and psychological changes that will occur at the end of life and, thus, adequately deal with this situation and the stage of treatment.

Furthermore, through communication the nurse also becomes able to help patients deal with the concerns and their emotional difficulties that occur due to cancer and its treatment. Moreover, good communication in palliative care generates support for family members and loved ones emotionally, such as when the treatment phases, the transition from the patient to a hospital and finally mourning. ^{2,5,8,13,14}

Through this research was possible to emphasize the extreme importance of communication in the treatment of the care showing the benefits for the health and well-being of patients and the family/caregivers. The studies analyzed showed that patients undergoing PC can control their symptoms by having good communication, and also are able to

inform their emotional needs, therefore, they have a better life quality.

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