Introduction & objectives

- Breast care nurses (BCN) are important partners in the care of breast cancer patients. Through their support, knowledge, commitment and availability they can accompany and route women through their disease and treatment.
- The aim is to develop an evidence-informed guideline for BCN, based on patients’ experiences and breast care nurses’ perspectives, to provide supportive care in a breast cancer nursing consultation.

Method

- A qualitative study based on the principles of the grounded theory was used.
- Individual interviews with breast cancer patients (30) alternated focus group interviews with BCN (4) and breast cancer patients (10).
- Data-collection was repeatedly build on the data-analysis and followed each other in a cyclic process.
- Data-analysis was supported by Nvivo8.
- Researcher triangulation was used to increase the validity of the analysis.

Results

- Nursing consultations and the BCN’ support offer a medium to:
  - Reduce the chaos resulting from the diagnosis
  - Coach the patient to find the way to ‘normal life’
  - Be accessible for patients by showing a sincere interest, a warm personality and a holistic approach
  - Attune support to the specific care demands and needs of each individual patient
  - Provide psychosocial care by recognizing the person in the patient with breast cancer
  - ...
- A BCN can be helpful and effective only if she understands the existential meaning of the events and acts in accordance with it.
- Standard care, which is organized at fixed moments or on patient-request, is mainly provided during diagnosis and around surgery. Patients strongly appreciate a supply-driven support and express long-lasting difficulties.
- BCN have to be ‘all-round’. They participate in direct patient care, but they also need the necessary competences to foster structural and organizational developments.
- A conversation-aid offers BCN opportunities to develop a professional relationship with cancer patients. These approaches rely on a skilled companionship in which patients can hold on to the BCN to handle breast cancer, to deal with the consequences and to resume life.

Conclusions

- The developed guide can be used flexibly by BCN to set up a nursing consult or to optimize an existing one.
- An approach in which breast cancer patients feel that they are valued as an individual and where feelings are empathized, offers BCN the opportunity to build on a relation which is being distinguished by a strong confidence in the support and acts of the BCN.
- The guide strives for continuity in the care of breast cancer patients on a long term base and from a multidisciplinary perspective. The BCN must be present not only at the critical points during the disease trajectory, but also at those moments where the patients feel “good care” is not provided by the other professionals or when those professionals are less available.