The goal of Cancer nursing is to assist the patient maintain strength and cope with unavoidable physiological and psychological problems that accompany the disease. Studies indicated that psychological problems of Cancer patients are anxiety, depression, emotional instability, fear of death, etc. Treatment and support to the patient in problem solving (Robberson-Fisher et al., 2000). In crisis situation, social and nursing support are the major factors which appear to be relevant for patients and their spouses to deal with the problems of illness (Ashbury et al., 1991, Grays et al., 2000 and Keital, 1990). The perception or feeling of the sup-

TIME etc.
Ascertain the patient’s perception of the disease and expectancy about treatment.
Study the potentialities of daily living and communication pattern.
Understand the nature of available family support.
Study the level of sexual enjoyment and emotional feelings.

Nursing intervention strategy
1. Reducing depression by allowing patient of share feelings about having Cancer. Recognize feeling of losing control. Discuss about the positive aspects of treatment.
2. Reducing anxiety by establishing a sustained unhurried interaction pattern while interacting with the patients. Try to reduce anxiety through reflection of positive atmosphere and reorientation of positive feelings. Encourage to express positive emotions.
3. Promoting effective coping by encouraging patient and family members to learn everything about treatment plan, which promotes a sense of control.
4. Provide appropriate physical care while teaching patient to take over care as able.
5. Respect the patient’s wish to refuse active therapy when there is limited potential for a response to therapy.
6. Reduction of death anxiety by facilitating emotional support to Cancer patient.

7. Allowance should be made for the possibility that symptoms, such as loss of energy, appetite, and weight, could be due to progression of Cancer. Help patients readjust expectations and goals to promote a sense of control.

8. Facilitate emotional support for the patient to reduce morbidity by giving information. Determine how much information patients want about their illness and treatment, their perceptions about their illness, which will have revealed whether they are aware of their diagnosis. When they are aware the task is to confirm they are right (Peterguire, 1980).

To sum up the discussion it may be said that the above-mentioned list are non-exhaustive and non-exhaustive one, rather they can serve as information materials to deal with the Cancer patient. Authors most humbly request the modification and enrichment of such list through further studies and reviews.

References:


5. Lazarus (1966) in Stal A. Basil (1979) In mind body cancer prognosis. Chapter 6, New York, John Wikey and Sons Ltd.