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Narrative medicine and oncological pain treatment: an investigation of knowledge and attitudes among nurses

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Abstract

BACKGROUND

Cancer pain worsens people's quality of life and is conditioned by anxiety, loss of dignity and of body control (Cipolla, 2014). IASP (2020) states that pain is related to life experiences and needs to be narrated. This need can be satisfied by health professionals thanks to narrative medicine, which uses narration to acquire and understand the plurality of perspectives that intervene in the disease event (Charon, 2001; ISS, 2015). Narrative based interventions improve pain control (Crogan et al., 2008; Black et al. 2018; Yang et al., 2020) and well-being (Cepeda et al., 2008). The narrative approach should be implemented in the nursing management of cancer pain.

METHODS

Objectives of the observational study: to investigate the ways of approaching pain in nurses caring cancer patients; to analyze attitudes and knowledge of the narrative medicine. A 14-item questionnaire circulated online to professional nursing groups. The sample of 159 nurses was made up mainly of women with an average age of thirty, with a degree and who have been working at cancer settings for less than five years.

RESULTS

To assess pain, nurses mainly use NRS; one out five nurses adopts an unstructured assessment. It was asked what factors influenced the patient's willingness to listen: 46% replied "the ability to perceive what the patient is feeling" and 32% "the time I have available". Over 50% of the sample said they investigate "sometimes" or "rarely / never" the emotions and feelings with which the patient experiences pain, although their expression is considered important in pain relief. About 60% of respondents use "sometimes" or "rarely / never" the interview, the conversation or the pain diary, but most of them recognize its usefulness. 50% of the interviewees know narrative medicine and almost all of them are interested in expandering their training. Finally, most nurses believe that the narrative approach is valid for understanding the patient's pain experience and his needs.

CONCLUSION

Nurses, aware of their role in pain management, are willing to use narrative approaches in order to collect the person's experiences of illness and suffering, to interpret their meanings and to respond to the implied needs. Therefore, narrative based nursing interventions should be included in nursing practice and the opportunity to introduce narrative medicine in university's graduate programs should be considered.

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Abstract
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