E-health applied to oncology treatment, education, and knowledge for cancer care

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Introduction

HEALTH'S DEFINITION
"use of information and communications technologies in support of health and health-related fields, including health-care services, health surveillance, health literature, education, knowledge and research”

E-HEALTH POTENTIAL
To improve efficiency; To develop access to health services; To reduce costs; To improve quality of care

TELEMEDICINE
Sub-set of e-Health related with healthcare services and education using telecommunication’s technologies.

KEY TO SUCCESS
To improve the success of it is important to identify the factors that can influence, positively or negatively, the outcome of the intervention.

Methods

The review followed the PRISMA and used Pubmed and EBSCO databases, using the terms related to "cancer", “e-health”, “telemedicine” and “nursing interventions”, published between January 2017 till February 2022.

Highlights

HEALTH PROFESSIONALS NEED TO BE PREPARED FOR THE EVOLUTION OF THE E-HEALTH SYSTEMS

WHY? competencies and interventions nurses seem to be most qualified to apply e-health to cancer patients however it is important to improve skills in technology and communication.

E-HEALTH BENEFITS AND LIMITATIONS: patient education can be achieved by nurses with E-health technology, treatment/medication adherence, a pain diary or cancer symptom management.

COMMUNICATION: The discussion can be about quality care, communication, and E-health benefits to cancer care. The patient-healthcare provider relationship can be compromised without an in-person visit.

TOOLS: Implications concerning privacy, ethics, cost, and infrastructures as these novel technologies are not available in all institutions for E-health

NURSES-COMPETENCIES: Nurses have histories of providing survivorship care to individuals with cancer, and it can be standardized and assessed to impact care. Proactive support can empower and engage survivors in their care, ultimately resulting in improved patient outcomes and higher satisfaction with care

References

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Conclusion

• There are many articles related to supportive e-health with nursing interventions to oncology patients and is expected that this number will exponentially increase in the next years

• Most articles are related to conference abstracts, grey literature, letters, and opinion papers, with lack of scientific base to ensure the evidence of the e-health in nursing interventions to oncology

• E-HEALTH HAS AN ENORMOUS POTENTIAL TO IMPROVE HEALTHCARE COST, EFFECTIVENESS, AND QUALITY OF CARE AND IN A MANNER OF TELEHEALTH, NURSES ARE THE INTERCONNECTING CORE IN MULTIDISCIPLINARY TEAMS

• Although it was almost obvious that this evidence is applicable to oncology care and nursing interventions, is imperative to ensure and objectivate the value and impact on the patient life quality and medical outcome

• Feasibility of internet-based demonstrated impact on the delivery of cancer care because it simplifies multidisciplinary team roles.

• Nurses in multidisciplinary teams are considerate well placed to support adherence to treatment among cancer patients.

The results intend to show how important is to increase the skills of professionals and patients to use digital health tools to empower and engage patients, making them co-designers of care.