

Complexities of Care and the Interdisciplinary Team

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Many of you who are reading this article are advanced practitioners (APs) and experts in the management of complex patient symptoms. Despite managing “side effects” of treatment for years as a nurse, then an advanced practitioner, I did not fully comprehend the concepts of symptom management, symptom clusters, and complexity science until I took a course with a symptom management focus during my doctorate studies (Lee et al., 2016; Brant et al., 2009; Heylighen et al., 2006). In the course, we studied theoretical models hypothesizing that symptoms do not occur in isolation; rather, they occur in clusters that can interact with one another.

Seemingly, these were simple concepts at first glance, yet these symptom theories changed the way I assessed patients for side effects and symptoms of their condition. I became aware of well-known and disturbing facts that most patients experience uncontrolled symptoms from their cancer and suffer with other collateral effects, such as physical strain, financial burdens, and lack of caregiver support. While some cancers can be appropriately diagnosed, algorithmically managed, and

patients will live a relatively long life, some patients with benign and hematologic cancers must deal with symptoms of the disease (often more than one), as well as the aforementioned burdens of living with a chronic illness as cancer survivors, which requires a team approach to manage.

MULTIPLE MYELOMA

I was bestowed a great honor in 2006 when I was appointed as a board member of the International Myeloma Foundation Nurse Leadership Board (NLB). The NLB is a professional partnership representing oncology nurses and APs who are experts in the care of patients with multiple myeloma (MM) at leading medical centers. The NLB aims to improve care and self-care of patients with MM via consensus publications, symposia, multimedia, and research. Since its inception, the NLB remains highly focused on empowering patients, addressing symptoms, and providing symptom management through a multidisciplinary team approach. The NLB is representative of community- and hospital-based practices from around the country and internationally who share the same mission: To improve the care of patients through education.

I mention the NLB in discussion of complex patient symptom assessment and care delivery as this month, through a collaborative effort, the NLB has published a case-based supplement titled “Multiple Myeloma and Plasma Cell Disorders: Update on Diagnosis, Prognosis, Treatment, and Supportive Care.” These articles include case studies modeled after patient scenarios and are aimed at highlighting considerations such as treatment sequencing and navigation of physical, financial and symptom management. Citing clinical data and real-world experience, these leaders in MM care strive to bridge the gap between the patient and the care team through effective patient and provider education and communication. Therefore, being cognizant that patients may experience complex symptoms and side effects of the disease and treatment, the supplement highlights intervention strategies and the importance of effective education and a multidisciplinary team approach to care.

IN THIS ISSUE

This issue sheds further light on the team-based approach to care. Two surveys provide fascinating insights into how APs practice around the country. In the Research and Scholarship department, Jennifer Aversano and colleagues present the results of a national quality survey by the Association of Community Cancer Centers (ACCC) on the critical role of oncology nursing and patient navigation in cancer care planning, coordination, and delivery. These results help identify how oncology advanced practice nurses empower patients in the shared decision-making process and further contribute to patient-centered care.

In the Review department, the National Comprehensive Cancer Network (NCCN) APP Workgroup describes survey results on the ever-important issue of measuring APP productivity. While relative value units (RVUs) have long been used to assess productivity, we know that there are many important non-billable activities that APs perform, such as answering patient phone calls and emails and providing care coordination,

that are not captured by RVUs. The article suggests a more holistic view of the value that APs provide, including incorporating team metrics. The NCCN Workgroup published an earlier article in JADPRO on APP staffing models and professional development opportunities at NCCN member institutions, and together these two articles provide valuable takeaways on how APs are utilized and the potential to maximize their roles.

In this issue, readers will also learn all about Richter transformation (RT): its clinical manifestations, diagnosis, and management. A Grand Rounds article by Melanie Douglas details this devastating and rare development in patients with chronic lymphocytic leukemia or small lymphocytic lymphoma, highlighting novel therapies on the horizon. Jackie Broadway-Duren focuses on the diagnosis, describing predictive factors for RT, clinical manifestations, and diagnostic criteria to promote early recognition and intervention.

Read about an institution’s experience with solid pseudopapillary neoplasms, a rare pancreatic tumor diagnosed most frequently in young women. Head and neck cancer patients often undergo a demanding treatment schedule, which can affect adherence. In a Review article, Jennifer Lynn Miller and colleagues compile evidence-based interventions and strategies for the oncology AP to improve HNC patients’ quality of life and treatment adherence. Finally, Prescriber’s Corner provides an overview of therapies targeting *MET* exon 14 skipping alterations in metastatic non-small cell lung cancer. ●

References

- Brant, J. M., Beck, S., & Miaskowski, C. (2009). Building dynamic models and theories to advance the science of symptom management research. *Journal of Advanced Nursing*, 66(1), 228–240. <https://doi.org/10.1111/j.1365-2648.2009.05179.x>
- Heylighen, F., Cilliers, P., & Gershenson, C. (2006). Complexity and Philosophy. *Po* 12kf
- Lee, S. J. C., Clark, M. A., Cox, J. V., Needles, B. M., Seigel, C., & Balasubramanian, B. A. (2016). Achieving coordinated care for patients with complex cases of cancer: A multiteam system approach. *JCO Oncology Practice*, 12(11), 1029–1038. <https://doi.org/10.1200/jop.2016.013664>