

Sarcomas are rare connective tissue malignancies. Patients and their families often experience many challenging problems during the cancer journey. Professionals working in this complex landscape need to collaborate to optimize patient outcomes.

AT A GLANCE

- The Scandinavian Sarcoma Group (SSG) was formed in 1979 to facilitate collaboration. Subsequently, SSG for Nurses and Physiotherapists was established as a subcommittee of SSG in 2007.
- The SSG for Nurses and Physiotherapists' accomplishments include development of a preceptorship for Scandinavian nurses, a community awareness program, and an international sarcoma nurses and allied professionals group.
- Because of the low incidence of sarcomas in Scandinavia, collaboration across borders is important.

KEYWORDS

sarcoma; patient outcomes; collaboration; Scandinavia; nurses; physiotherapists

DIGITAL OBJECT

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A Scandinavian Point of View

Caring for patients with sarcoma across boundaries

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Sarcomas affect more than 15,000 people per year in the United States (Siegel, Miller, & Jemal, 2018), whereas in the countries of Denmark, Finland, Iceland, Norway, and Sweden, with a combined population of 27 million people, about 800 patients are diagnosed with sarcomas each year (Trovik et al., 2017). Given the rarity of sarcomas in Scandinavia and relative small populations of those countries, it is important for healthcare providers who care for this patient population to collaborate across boundaries.

Nurses play a pivotal role in supporting patients with sarcoma and their caregivers as they move along the health–illness continuum; therefore, it is essential that nurses working in this complex clinical landscape have advanced knowledge to competently address and manage the myriad of physical and psychosocial concerns of this patient population (Fauske, Bondevik, Bruland, & Ozakinci, 2015; Ferrari et al., 2018; Kain et al., 2017). Although caring for this patient population can be challenging, seeing patients attain improved outcomes and quality of life through advanced interprofessional care is rewarding. However, the medical team must be open to such collaboration, particularly because it is the key to successful care for patients with sarcoma (Arifi, Belbaraka, Rahhali, & Ismaili, 2015; Kain et al., 2017). Benefits to collaboration include the following:

- Access skills and strengths.
- Develop employee skills.
- Solve problems and innovate faster.
- Work efficiently.

How can nurses working with this rare form of cancer achieve these important benefits?

To facilitate collaboration among Scandinavian sarcoma professionals, the Scandinavian Sarcoma Group (SSG) was formed in 1979. The SSG is composed of subgroups of oncologists, surgeons, radiologists, pathologists, tumor biologists, nurses, and physiotherapists from Scandinavian countries. The aim of the SSG is to improve the diagnosis, treatment, and care of patients with sarcoma by sharing information and education, and coordinating basic and clinical research (Alvegård, Sundby Hall, Bauer, & Rydholm, 2009). The group produces protocols, guidelines, and recommendations collaboratively with interprofessional input. The similarity of the medical system in Scandinavian countries facilitates collaboration and makes multicenter clinical research studies easier to perform. Swedish referral centers are linked with referral centers in Norway and, to a lesser degree, with those in Finland, Denmark, and Iceland (Alvegård et al., 2009).

Development of the SSG for Nurses and Physiotherapists

The SSG for Nurses and Physiotherapists initially began in 2005 as the Sarcoma Forum for Nurses and Physiotherapists for professionals working at the Norwegian Radium Hospital, which is part of Oslo University Hospital in Norway (Fuglør & Petersen, 2017). Because nurses and physiotherapists work close together during the treatment of patients with sarcoma,