

Implementation and Use of a Patient Symptom Diary During Chemotherapy: A Mixed-Methods Evaluation of the Nurse Perspective

Annemarie Coolbrandt, RN, PhD, Erika Bruyninckx, RN, MSc, Chris Verslype, MD, PhD, Ester Steffens, RN, MSc, Ellen Vanhove, RN, MSc, Hans Wildiers, MD, PhD, and Koen Milisen, RN, PhD

Coolbrandt is a clinical nurse specialist and Bruyninckx is a nurse, both in the Department of Oncology Nursing; Verslype is a professor in the Department of Hepatology, all at University Hospitals Leuven; Steffens is a PhD candidate in the Department of Public Health and Primary Care at Katholieke Universiteit (KU) Leuven; Vanhove is an oncology nurse in the Department of Oncology Nursing, and Wildiers is an adjunct head of clinic in the Department of General Medical Oncology, both at University Hospitals Leuven; and Milisen is a professor in the Department of Public Health and Primary Care in the Academic Centre for Nursing and Midwifery at KU Leuven, all in Belgium.

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Coolbrandt can be reached at annemarie.coolbrandt@uzleuven.be, with copy to editor at ONFEditor@ons.org.

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Purpose/Objectives: To gain a deeper understanding of nurses' experience working with a patient diary for tracking and treating side effects during chemotherapy.

Design: A mixed-methods design was used to learn about oncology nurses' use and perceptions of a symptom diary.

Setting: Six oncology wards and two outpatient clinics at the University Hospitals Leuven, Belgium.

Sample: 79 nurses completed a survey, and 14 nurses participated in focus group discussions.

Methods: First, a survey sampled nurses' use and perceptions of the diary. Next, focus group discussions were held with the aim of arriving at a deeper understanding of the survey results.

Main Research Variables: Use and perceptions of a symptom diary.

Findings: Most nurses reported performing diary-related behavior to some extent. The survey and focus groups indicated that many nurses strongly believed in the value of the diary, but some were still hesitant or had concerns about patients' perceptions of the diary. The focus group results showed that nurses' use of the diary in daily practice was influenced by their personal beliefs about the value of the diary, the team's, and those of their patients.

Conclusions: Although a positive trend was noted, nurses' use of the symptom diary was suboptimal six months after its implementation.

Implications for Nursing: This study highlights important issues that need to be addressed to advance the successful implementation of the symptom diary.

Supportive care for patients with cancer is suboptimal (Henry et al., 2008; Johnsen, Petersen, Pedersen, Houmann, & Groenvold, 2013). Several barriers at the professional level (e.g., lack of time, focus on treatment) and at the patient level (e.g., misconceptions that symptoms are incurable, beliefs that good patients do not complain) impede adequate symptom detection and, ultimately, impair symptom management (Jakobsson, Ekman, & Ahlberg, 2008; Passik et al., 2002; Patrick et al., 2004; Sun et al., 2007, 2012).

To prevent professionals from overlooking or minimizing symptoms, the use of patient-reported outcomes (PROs) is being promoted (Atkinson et al., 2016; Judson et al., 2013). Evidence shows that routine attention to PROs improves quality of care, patient–clinician communication, and symptom management (Detmar, Muller, Schornagel, Wever, & Aaronson, 2002; Howell et al., 2015; Judson et al., 2013; Ruland et al., 2010; Velikova et al., 2004). In addition, using PROs in routine clinical practice has shown potential for reducing symptom burden (Judson et al., 2013; Ruland et al., 2010; Velikova et al., 2004). More frequent and better discussions about symptoms between patients and clinicians, together