Finding Information in All the Wrong Places

What do the newspaper comic strips, television soap operas, People Magazine, ads from pharmaceutical companies, and a recent movie poster have in common? Lately, they have become an all-to-common source of healthcare information for millions of Americans. I am not sure about you, but I am most uncomfortable with the idea that, in this world of rationed healthcare resources, many of the people around us are getting their medical explanations and familiarity with the issues facing health care today from these popular cultural sources.

• The comic strip, Rex Morgan, MD, tells us about all manner of diseases and their treatments. The strip just completed a story line on childhood asthma. In the last year, Dr. Morgan’s wife and forever-faithful office nurse, June, completed her nurse practitionership. The good doctor was at once proud and threatened!

• An occasional glimpse at any daytime melodrama reveals characters struggling to come to terms with every medical condition from a brain tumor to fetal alcohol syndrome. Medical “facts” and a supposedly accurate look into the goings on in the hospital regularly are folded into the other outrageous story elements.

• Magazines and tabloid newspapers catch our attention in grocery check-out lines. Lately, they have been filled with stories of a famous actress and healthy lifestyle proponent who has decided to pursue alternative treatments for her recently diagnosed breast cancer. She is quick to say that this is the way for her and that she is not recommending this treatment path for others, but does anyone really believe that the millions of women who have been following this woman’s advice about food, exercise, and relationships for years suddenly will ignore her healthcare choices?

• Pharmaceutical companies decided some time ago to advertise directly to the public. Ubiquitous ads for cholesterol-lowering drugs, allergy-relieving preparations, over-the-counter pain relievers, prescription appetite depressants, and psychoactive drugs assault us in between episodes of our favorite television programs and the pages of the popular press. Their detailed and all-too-medically correct lists of possible side effects always leave me wondering why anyone would want to try these preparations, but the ads imprint the names of these drugs in our minds and influence our conversations with those who prescribe treatments for our many ailments.

• The other day, I passed a bus kiosk and read the banner across the top of the movie ad for Pearl Harbor. “America Needs Nurses” it proclaimed! My first thought was “This is great!” My excitement at the idea that movie producers might be using their influence to have a positive effect on the nursing shortage quickly was shattered by the banner midway down the poster and across the bigger-than-life image of the movie’s nurse character. “To Have and To Hold” it proclaimed. The more things change, the more they stay the same.

A former leader of the Oncology Nursing Society (ONS) sent a thoughtful and appreciated message recently to Lisa Schulmeister, RN, MN, CS, OCN®, editor of the Clinical Journal of Oncology Nursing, and to me about including more patient-education content in our journals. She made the point that nurses can do the job of teaching patients and their families better than anyone. Teaching and counseling is as natural to nurses as breathing, and, yet for the most part, our role in patient education is almost invisible. Most patient surveys will tell you that patients prefer to receive their information from the physician, but ask any nurse and she or he will tell you how most patients really learn what they need to know to manage their health problems. Patient-education activities are integral to every facet of health care, be it prevention and detection, adjustment to a diagnosis, implementation of treatment regimens, or end-of-life care. Good health care cannot happen without it, and, for the most part, professional nurses are delivering the goods. This most vital aspect of care is time consuming, and the need is usually ongoing for a patient. Ironically, it is almost never reimbursed financially.

ONS publications will continue to find creative ways to support the efforts of oncology nurses in all aspects of caring for patients with cancer, but we all need to be more vocal about our roles in patient education. In addition to delivering the content to patients, their families, and our communities, we also need to find ways to let these individuals know where they should be turning for accurate information. The Sunday comics brand of health care does more harm than good, but consumers need to know that better alternatives exist and that those alternatives are as close as the nearest nurse.