

ONCOLOGY NURSING SOCIETY POSITION

Prevention and Early Detection of Cancer in the United States

In the United States, more than 1,200,000 new cancers are diagnosed in individuals across the lifespan each year. The lifetime risk of developing cancer in the United States is one in two for men and one in three for women. Cancer is the second leading cause of death in the United States, with one in every four deaths caused by cancer. Cancer is the leading cause of death in individuals 40–79 years of age (American Cancer Society [ACS], 2001). Consequently, cancer is a major public health problem in the United States. Adopting healthier lifestyles and avoiding carcinogen exposure could prevent many cancers. According to ACS, institution of prevention measures and early detection of cancer are two of the most important and effective strategies for reaching important public health goals of saving lives lost from cancer, diminishing suffering from cancer, and eliminating cancer as a major health problem.

It Is the Position of ONS That

Professional Education

- Oncology nurses, at both the generalist and advanced practice levels, must have educational preparation in the behavioral, biologic, educational, and economic principles of cancer prevention and early detection.
- Continuing education and specialized educational programs must be developed and provided to practicing nurses to facilitate integration of cancer prevention and early detection into clinical practice.
- Oncology specialty certification examinations and nursing licensure examinations should include evaluation of knowledge related to cancer prevention and detection practices in the general population.

Public Education

- All oncology nurses are well suited to provide education to the general public about prevention measures and general population screening guidelines for the early detection of cancer.
- Oncology nurses also are well suited to provide the necessary information and education to facilitate client decision-making about participation in cancer prevention and control clinical trials.
- Oncology nurses must strive to provide comprehensive cancer prevention education and early detection services in a manner consistent with the cultural background and healthcare beliefs of individuals and families. Educational materials should be used that are in the appropriate language and are targeted to the appropriate level of literacy.
- Oncology nurses must be involved in the development of educational resources that have a focus on wellness, including the prevention and early detection of cancer in at-risk populations.
- Education programs must be developed and provided on the primary prevention of cancer (e.g., smoking cessation programs, nutritional counseling, avoidance of exposure to ultraviolet light) beginning in childhood and throughout the lifespan to encourage people to adopt healthy lifestyles.

Cancer Prevention and Detection Services

- Oncology nurses need to develop, implement, and evaluate measures to ensure that individuals and families have access to education about cancer prevention and appropriate cancer screening.
- Advance practice oncology nurses can obtain, document, and interpret cancer risk assessments; recommend appropriate cancer early detection and prevention strategies to individuals and families; and arrange or provide comprehensive cancer screening examinations based on the individual's level of risk. These practices must be consistent with guidelines defined by the appropriate state's nurse practice act, educational preparation, and role scope, along with standards of oncology nursing practice.
- As genetic technology evolves and knowledge of cancer genetics expands, healthcare providers must respond by informing patients, families, and the public about the implications of these developments for cancer prevention, early detection, and treatment. Nurses providing comprehensive cancer genetic counseling must be advanced practice oncology nurses with specialized education in hereditary cancer genetics.
- Individuals who have survived a cancer diagnosis also should receive age-appropriate cancer screening for other cancers.
- Programs that are focused on delivering services for the early detection of individual cancers (e.g., breast, prostate) also should ensure that patients receive education and are referred for screening for other common cancers. An immediate opportunity exists to implement this approach in men and women who are covered by Medicare and already eligible for reimbursement of the respective screening tests for breast, cervical, colorectal, and prostate cancers.
- Individuals should be assessed for eligibility for chemoprevention trials based on personal level of risk and referred for consideration at the appropriate clinical site.
- Individuals should be fully informed of their options for managing their personal risks for developing cancer and should understand the limitations, benefits, and risks of each strategy.