

How Do Nurse Case Managers Care for Older Women With Breast Cancer?

Andrea Jennings-Sanders, DrPH, RN, Yong-Fang Kuo, PhD,
Elizabeth T. Anderson, DrPH, RN, FAAN, Jean L. Freeman, PhD, and James S. Goodwin, MD

Purpose/Objectives: To describe how nurse case managers care for older women with breast cancer.

Design: A randomized, prospective trial.

Setting: Thirteen community hospitals and two public hospitals in southeastern Texas.

Sample: 335 older women aged 60–89 years newly diagnosed with breast cancer and being cared for by 60 surgeons. Most participants were Caucasian. A total of 166 women were in the control group, and 159 were in the intervention nurse case management group.

Methods: The nurses implemented multiple nursing interventions in each nursing process phase over a period of 12 months.

Main Research Variables: Independent variables were participants' demographic characteristics, depressive symptomatology, and cognitive impairment. Nurse case management contact was a dependent variable.

Findings: In each nursing phase, a greater number of nurse case management contacts were made in the first quarter. Bivariate analysis illustrated statistical differences among race, income, education, and living alone with respect to the mean amount of nurse case management. Multivariate analysis revealed that age, income, living alone, and stage of cancer predicted more nurse case management contact.

Conclusions: Nurse case managers may play a role in helping older women with breast cancer achieve positive health outcomes.

Implications for Nursing: Based on the findings of this study, nurses can develop specific nursing interventions to meet the needs of older women with breast cancer. Nurses can use the Model of Nurse Case Management to plan and manage care for older women with breast cancer.

Key Points . . .

- Older women with breast cancer are an understudied group in the literature, which limits the generalization of most findings in this subject area because the results are based on samples of younger women with breast cancer.
- Researchers must establish an acceptable range of nurse case management contact and which types of nursing interventions are most effective for this population in terms of achieving positive health outcomes.
- This study was not based on which types of interventions were needed by older women with breast cancer, but on which interventions they received from nurse case managers.

breast cancer, including hesitation in seeking initial treatment, desire to maintain independence, and the multiple number of health difficulties being experienced. All of these factors put older women with breast cancer at risk for undertreatment and poor health outcomes. Depending on patients' circumstances or the complexity of the plan of care, nurse case managers may be assigned to this population.

Nurse case management is the process of coordinating health care by planning, facilitating, and evaluating interventions across levels of care to achieve measurable outcomes (Zander, 2002). The nurse case manager is a valuable resource who can help to ensure that patients receive health services and benefits to achieve positive health outcomes. Nurse case managers can efficiently manage an episode of

Breast cancer is the most common type of cancer and is the second-leading cause of death from cancer among women (National Cancer Institute, 2005). Breast cancer becomes more prevalent with age; in fact, approximately 50% of breast cancer cases are diagnosed in women 65 years of age and older (Yancik et al., 2001). Older women's illness experiences with breast cancer may differ substantially from younger women's regarding reactions to and needs resulting from the diagnosis. For example, with increasing age, the risk of comorbid conditions increases (Satariano & Ragland, 1994).

Older women with breast cancer are faced with the physical and psychosocial difficulties associated with the disease. In addition, they may have to cope with obstacles related to transportation, decreased social support, and physical factors that have the potential to aggravate adjustment to diagnosis, treatment of the disease, and recovery. Cameron and Horsburgh (1998) explored issues identified by older women with

Andrea Jennings-Sanders, DrPH, RN, is an assistant professor in the School of Nursing at Cleveland State University in Ohio. Yong-Fang Kuo, PhD, is a senior statistician in the Sealy Center on Aging, Elizabeth T. Anderson, DrPH, RN, FAAN, is an associate professor in the School of Nursing, Jean L. Freeman, PhD, is an associate professor in the Sealy Center on Aging, and James S. Goodwin, MD, is a professor of medicine in the Department of Internal Medicine in the Sealy Center on Aging and in the Department of Preventive Medicine and Community Health, all at the University of Texas Medical Branch at Galveston. This research was funded by a grant from the U.S. Public Health Service (R01 NRO3385). (Submitted June 2003. Accepted for publication January 23, 2004.)

Digital Object Identifier: 10.1188/05.ONF.625-632