Title

Telephone support system for patients with colonrectal cancer in treatment and follow-up

Author

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Introduction

The development of technology has had a significant increase in recent years, but its application in health, it is not felt in all areas, such as cancer treatment. In order to overpass this gap, was created a Health Information System in order to improve the quality of care for these patients. This study was undertaken to understand the functioning and utility of this innovative Health Information System. The study was conducted in cancer patients with colon and rectum pathology. All patients were in chemotherapy treatment or follow-up, after surgery.

Aim

The study aims is to describe the population included in the nurse phone call project, identify possible problems with the health information system (SIS), and make recommendations for its development.

Methods

The study was conducted at the Portuguese Oncology Institute - Porto (IPO) for 3 months. The SIS was used by nurses to record the side effects of chemotherapy treatment and monitor patients for follow up. The study included 67 patients, chemotherapy in 49 and 18 in follow-up.

Results
The median age is 64 years, 41.8% are suffering from cancer of the rectum. The side effects of treatment were experienced in 71.3% of patients receiving systemic treatment. 13.6% of 181 calls were made extra protocol for re-evaluation of side effects. The SIS showed 66.7% of information on prescription medication and support patients’ adherence to it. The registration information of side effects was 29.3% for the oral treatment and 70.7% for the systemic treatment.

Discussion
Almost half of the population has rectal cancer the reason is that this patients received chemotherapy treatment before the surgery and after. The SIS authorizes the change of protocol in the same patient.

Telephone call to oral treatment patients are more frequently than systemic treatment patients. The calls out of protocol are to evaluate development in patient condition.

The data for information about support medication prescription and patient consent as information about different side effects is a benefic result for SIS but it cannot register all of the information because it is deficient in data collection. That result should be because of the nursing practice and data collection.

Conclusion
Coupling data from information systems with knowledge and skills of nurses the result is benefic for patients. The limitations found for the SIS can be overcome in order to be able to develop favorably.