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SYSTEMATIC REVIEW OF THE LITERATURE

Caracterização de teses e dissertações acerca do cuidar em enfermagem na oncologia

Characterization of theses and dissertations about nursing care in oncology

Caracterización de tesis y disertaciones sobre cuidados de enfermería en oncología

Adriana Gonçalves de Barros¹, Kálya Yamine Nunes de Lima², Viviane Euzébia Pereira Santos³

ABSTRACT

Objective: To characterize the dissertations and theses available in nursing Theses Database Coordination of Improvement of Higher Education Personnel (CAPES) that deal with care in oncology. **Method:** Documentary research conducted in Journal Portal CAPES, in February 2013. **Results:** The sample consisted of 62 studies, 47 (75,80%) dissertations and 15 (24,20%) theses. The universities that have produced more on the subject were the University of São Paulo, with 21 (33,87%) studies and the Federal University of Rio de Janeiro with 10 (16,12%) jobs. Prevailed qualitative research (56,45%). Humanization of Care, Care, Assessment and evaluation strategies in nursing care and health/safety of the worker: the following thematic categories were listed. **Conclusion:** The majority of research postgraduate in oncology focused in the Southeast, with masters programs the highest producers in recent years, highlighting the qualitative methodological approach to development. **Descriptors:** Nursing, Medical oncology, Nursing care.

RESUMO

Objetivo: Caracterizar as dissertações e teses de enfermagem disponíveis no Banco de Teses da Coordenação de Aperfeiçoamento de Pessoal de Nível Superior (CAPES) que versam sobre o cuidado em oncologia. **Método:** Pesquisa documental realizada no Portal de Periódicos da CAPES, em fevereiro de 2013. **Resultados:** A amostra constituiu-se de 62 estudos, 47 (75,80%) dissertações e 15 (24,20%) teses. As universidades que mais produziram sobre a temática foram a Universidade de São Paulo, com 21 (33,87%) estudos e a Universidade Federal do Rio de Janeiro com 10 (16,12%) trabalhos. Prevaleram as pesquisas qualitativas (56,45%). Foram elencadas as seguintes categorias temáticas: Humanização do Cuidado, Cuidado, Avaliação e estratégias de avaliação no cuidado de enfermagem e Saúde/Segurança do trabalhador. **Conclusão:** A maioria das pesquisas de pós-graduação na área oncológica concentra-se na região Sudeste, sendo os cursos de mestrado os que mais produziram nos últimos anos, destacando-se a abordagem qualitativa no desenvolvimento metodológico. **Descritores:** Enfermagem, Oncologia, Cuidados de enfermagem.

RESUMEN

Objetivo: Caracterizar las disertaciones y tesis disponibles en la enfermería Tesis Coordinación Base de Datos de Perfeccionamiento de Personal de Nivel Superior (CAPES) que tienen que ver con la atención en oncología. **Método:** Investigación documental realizado en Diario Portal CAPES, en febrero de 2013. **Resultados:** La muestra consistió en 62 estudios, 47 (75,80%) disertaciones y 15 (24,20%) tesis. Las universidades que han producido más sobre el tema fueron la Universidad de São Paulo, con 21 (33,87%) estudios y de la Universidad Federal de Río de Janeiro, con 10 (16,12%) puestos de trabajo. Prevalció la investigación cualitativa (56,45%). Humanización de la Atención, Cuidado, Evaluación y estrategias de evaluación en la atención de enfermería y de la salud/seguridad del trabajador: fueron listadas las siguientes categorías temáticas. **Conclusión:** La mayoría de la investigación de postgrado en oncología se centró en el sureste, con maestrías programas los más altos productores en los últimos años, destacando el enfoque metodológico cualitativo al desarrollo. **Descriptor:** Enfermería, oncología médica, atención de enfermería.

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INTRODUCTION

Caregiving is an attitude of life whose purpose is to ensure the maintenance and continuity of existence.¹ Additionally, caregiving comprises the affective involvement with the person being cared for, establishing themselves in a mode of occupation, concern and accountability.²

In the conceptual field, caregiving can also be defined as a practice based, systematized, with the capacity to be a selfdirected learner-if your essence is perceived through the actions present in every moment of the life cycle, in the various manifestations of the illness, as well as in interaction with human beings in different dimensions¹.

In this opportunity, one of the purposes of caring in nursing is to alleviate human suffering, keeping his dignity. Therefore, nursing professionals while caregivers should consider to be careful in their biological dimensions, social, psychological and spiritual health, which are interdependent dimensions.¹

In this perspective, the nurse, as an integral member of the multidisciplinary team, to perform the careful makes use of a set of skills that allow the search for resolution to the responses of health phenomena.³

In this way, the instrument used to perform the watch is the process of care, through which professional activities are developed "for" and "with" the patient, based on scientific knowledge, skill, intuition, critical thinking and creativity and accompanied by behaviors and attitudes of nursing/care in order to promote, maintain and/or retrieve the totality and human dignity.⁴

In this way, the process of care must involve the technical and scientific knowledge, practical skills and expressions of interest, consideration, respect and sensitivity of the nurse with the patient, covering the rescue of the interactive process, the emotional component and the moral dimension.⁴ These actions and ways of behaving of the nurse, when combined, provide proper care.

Nevertheless, it is still necessary to affinity and affectivity in relation to patients, especially in the case of patients with cancer⁵.

Note that the cancer cause both physical and psychological several changes on its wearer. Therefore, the handle must be held fully to the client and family, promoting psychosocial support, therapy administration, evaluation of nursing problems, selection and implementation of interventions that reduce the negative effects of the treatment, favoring the comfort and well-being of the patient⁶.

In order to build and deepen the knowledge of nurses in this context there is a progressive increase of studies on nursing care to the patient with cancer. However, the literature points out that the research in this area is not yet consolidated, due to gaps in

the production about the issues generated by isolated studies, for example, which bring little contribution to the practice of nursing.⁷

Based on these, the theme of nursing care in oncology gain scientific and social relevance, because it is closely linked to the knowledge and practice of nursing and being oncology, an area of global concern because of its implications for the carrier of the cancer and for society.

In addition, highlight trends Brazilian graduate-level research helps to identify what the nurses have already produced and gaps that will provide inputs for the construction and development of new investigations.

Thus, enclose the following research questions: What are the characteristics of dissertations and theses available in nursing Bank Theses Coordination of Improvement of Higher Education Personnel (CAPES) that deal with the care in oncology? What issues relating to care in oncology are being addressed?

Thus, the present study aims to characterize the dissertations and theses available in nursing Theses of the CAPES that relating to nursing care in Oncology.

METHOD

This is a desk research carried out at the Bank of the Theses Portal de periodicos CAPES. This database provides the information of dissertations and theses defended throughout the country since 1987.⁸ The choice for theses and dissertations as data source if the high methodological rigour and gave possibility of progress in scientific area that these studies present, helping to solve problems relevant to the society.⁹

For completion of study was built a research protocol, which is structured with the following points: purpose; guiding questions; search strategies; selection criteria of the studies; strategy for data collection; strategy for critical evaluation of the study and summary of the findings.

The data collection was conducted in the month of February of the year of 2013. Controlled descriptors used by health sciences descriptors (DECS) "Oncology" and "nursing" and non-controlled "care" in the search field "subject", through the "all words" option. As the Bank of CAPES Theses only provides the titles and abstracts of papers, it was subsequently carried out a search in the libraries of universities for development of studies, with the aim of finding them in their entirety.

The studies were selected according to the following criteria: 1) Inclusion criteria: dissertations and theses available nursing in full and for free to versassem about the care in Oncology; studies published in the period from January 2003 to January 2013; 2) Exclusion

criteria: dissertations and theses that cover the theme of care in Oncology; works that were not in the area of nursing; studies that were not available in full and for free.

With the purpose of organizing and analyzing the collected data has been prepared a worksheet in Microsoft Excel with the following collection indicators itemized in each column: academic level; development of the study site; year of publication; methodological design; theme of the study.

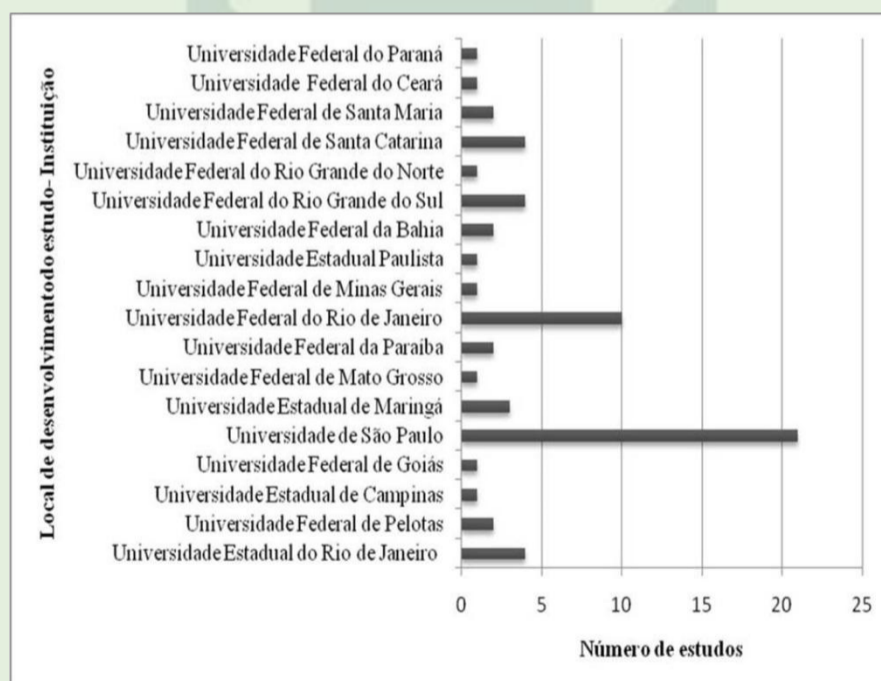
Under the theme of the study be very comprehensive, the different themes of the research were also grouped by categories in the same instrument to facilitate analysis.

RESULTS AND DISCUSSION

The research at the Bank of CAPES thesis resulted in 243 studies, however only 62 works, including theses and dissertations, were in accordance with the criteria for inclusion in the study, which corresponded to a sample of this research.

Work at Masters level totaled 47 (75,80%) and doctoral level, (24,20%). Publications about the subject amounted from the year 2008, with nine studies.

Universities that produced the most about care in oncology were the University of São Paulo, with 21 (33,87%) studies and the Federal University of Rio de Janeiro with 10 (16,12%) work, as seen in Graph 1.



Graph 1. Distribution of studies according to the location of development. Natal/RN, 2013.

Research with qualitative approach prevailed descriptive (56,45%) followed by the studies which did not specify the methodological approach (25,80%), the quantitative studies (11,29%) and Lastly, the works that used the two approaches (6,46%).

Finally, according to the themes of the theses and dissertations, were listed the following thematic categories: humanization of care, Care, assessment and evaluation strategies in nursing care and health/worker safety.

The conferences on the careful focusing on research on the topic began in 1978 in the United States. Since then, nursing has been leading the study and research on the subject. In Brazil, the investigations also have privileged the phenomenon of care, mainly through post-graduate courses in nursing.⁴

These have assumed an important role in accelerating the advancement in technology and innovation of high quality in this area, through the relevance of projects developed in this field, which in turn contribute to the strengthening of nursing as a science.¹⁰

In Brazil, the master and doctorate courses grew so shy, planned and with greater absorption by the public sector, what justifies the presence only of public institutions that have produced work about care in Oncology. This shows that despite the increase in the number of private colleges and universities, graduate school still remains stronger public institutions.¹¹

It is worth noting that there is still a regional imbalance with regard to the number of productions in masters and PhD level. According to the study, the prevalence of research conducted in regions that have their postgraduate programs longer, as South and Southeast regions.

This disparity is a historical reflection, in which the oldest and prestigious universities, by conquering these programs sooner than the other institutions, are more likely to get funding for their research and more favorable conditions for developing a more substantial number of studies master's and doctorate.

The concentration of programmes in the regions South and Southeast also reflects the relationship between the concern to generate knowledge for development in the more developed areas of the country. What, though, graduate policies have served in recent decades to improve teaching and research, the distortion of investment by regions is apparent and tends to reproduce.¹²

As for titrations, it was a gradual increase among oncologists nurses as teachers and doctors in recent decades, which is related mainly to the growth of graduate nursing programs in the quest for scientific profession.¹³

Before that, there was a greater number of dissertations relating to theses, thus demonstrating conformity with the reality of the Brazilian graduate. In the country, the academic masters is the kind of graduate course that more headlines and more grows. The doctorate is still outnumbered, being one of the causes cited in the literature the relevant number of masters who don't continue their studies upon completion of the master's degree.¹⁴

About the methods used, the qualitative approach prevailed, with the purpose to understand the subjectivity of the patient with cancer, his relationship with his family and both with health professionals. The lower number gives the quantitative studies and those who have used mixed methods. Which shows the effects of the use of such methods. Such

methodological approach integrates the so-called complex strands, signaling that science progresses as the quantitative and qualitative studies begin to relate to and complement.¹³

Evidence is therefore a trend in nursing if you prefer the qualitative method, which is due to the own characteristics of the approach that caregiving/care encompasses.⁴

According to the literature, the oncology nursing studies tend to focus on, with greater frequency, aspects related to assistance, the Organization of the process of care and organization of health services and nursing care, aiming at promoting changes in professional qualification and in the provision of care to customers.¹³

Humanization of care

The humanization and care are inseparable.¹⁵ Accordingly, the humanization of care requires a reflective process about the values and principles that guide the professional practice, assuming a new ethical posture that pervade all professional activities and institutional work processes.¹⁶

In the midst of this sample study, identified twenty-nine (47%) works whose themes involve the humanization of care. Offer discussions on issues about the interpersonal relationship between the professional and the patient and perceptions about care for both.

It should be noted that the twenty-nine studies, eleven (39%) more specifically depict the humanization front of palliative care to elderly patients, addressing themes of spirituality, experience for the family in taking care of people in palliative treatment and oncological patient expectations in front of nursing care.

Watch

Historically, man has always showed the need to be careful, since its birth until its final moments. For the human being care is of multiple aspects, which is an integral part of life.¹⁷

The watch activates a feeling of compassion, solidarity, help to promote the bem4. In this sense the health professionals who aim at the well-being of the patient, their moral integrity and their dignity as a person must possess intentionality in the act of caring.¹⁷

Amid the work sample constituents, seventeen (27%) were treated to cancer patient care, and of these, six (35%) addressed the care the woman with cancer and eleven (65%) of caregiving to children with oncological disease.

Regarding the studies about the woman with cancer, the themes treated postoperative care, understanding the meaning of care, as well as the experiences of women with cancer. Discussions were also identified on the chemotherapy treatment as regards the functional capacity of women after treatment and its toxicity.

Another factor noted was the predominance of works focused on breast cancer, with four studies. This fact is due in virtue of this type of cancer being the most neoplasm incident in the female population, but also the most feared by the public due to the possibility of mutilation, increasing the production of studies about the disease.¹⁸

In relation to studies aimed at child care with oncologic disease, most of these, a total of seven (63%) was focused on aspects related to the family of the child, such as the experience of the same before the hospitalization and treatment and oncological disease influences children in married life. Three papers (27%) addressed the role and perception of

care nursing staff to treat children with cancer. Only one (10%) study reported the influence of the environment to the child in your care.

The productions analysed about childhood cancer show a socio-cultural trend, considering that they had as subjects themselves professionals, family members and children with cancer.

In the analysis of socio-cultural nature quest on issues involving productions relationships, social support, human rights legislation, attitudes and practices in health, knowledge, perception, behaviour and feelings of human groups.¹⁹

In this opportunity, human care and concern for the feelings of the patient with cancer are of paramount importance, because they highlight the role of nurses in the care process and in promoting quality of life for the patient.¹⁷

Assessment and evaluation strategies in nursing care

According to the literature, assessing is to assign and/or check value to something, using procedures based on scientific methods, that can identify, obtain and provide information, in addition to judge the merit and value of something fairly.²⁰

Among the sampled worked, twelve (19%) addressed some type of evaluation, prevailing those pertaining to work nursing and strategies used by the team to assess the patient's conditions.

The search for quality in health services has become a worldwide phenomenon, a result of increased awareness that the quality is indispensable for the survival of health services.²⁰

This quality must be constantly evaluated in order to adapt nursing care needs of the patient, based on the results of their actions. The importance of this theme can be reflected in five studies that brought the discussion of assessment and qualification of nursing care to the patient with cancer.

Nevertheless, the creation and implementation of nursing instruments that assess the patient's manifestations, subsidize and strengthen interventions of this professional class. In this perspective, it is important to note that the evaluation criteria of nursing care and patient assessment instruments are flexible and should fit the reality of each region, industry and institution.²¹

Thus, the productions have a relevance to the application of instruments that assess conditions typically presented by cancer patients, such as pain, sleep quality, wounds and fatigue.

Given this, the steady nursing as a profession that follows the global parameters and health production, demonstrating your interest in qualifying its assistance, through actions and instruments that allow for a more accurate assessment of the manifestations of the patient and their actions against the planning of assistance.

Health/worker safety

Man is a being who labora and who has the ability to transform the medium according to their labor activities. In addition, the dignity of work modifies and ennobles the very person who works. In this context, there are concerns about the quality of work and the prospects of the fundamental rights of the worker to enjoy a healthy lifestyle and good quality.²²

The health and safety of workers is an area of public health that provides for the study, prevention, and surveillance assistance to harms to work-related health.²³

Thus, the health and safety of workers aimed at better understanding the health-disease process in workers and promote intervention alternatives that lead to changes in reality, with views to the appropriation of the human dimension of the work.²²

Thereby, three have been identified (5%) studies that encompassed health and worker safety in oncological treatment units. The work gave rise to discussions about the activities performed by nursing professionals who deal directly with antineoplastic chemotherapy and the conditions of work and health of nurses in organizational context. It was observed that a (2%) study sought to identify the prevalence of *Staphylococcus* sp. Oncology service, demonstrating the concern with the spread of this organism, under Community and institutional.

Health professionals working in the field of Oncology are faced constantly with situations of suffering, pain and loss. In this context, the characteristics of the disease and prolonged treatment, provide the professional approach with the difficulties experienced by patients and their families.

Therefore, this intense relationship, between professional and patient, in addition to the requirements of technical preparation and the limitations of her own medical knowledge, causing an additional worker wear. In this way, the activity may lead to professional stress or burnout syndrome.²⁴

However, in the environment of oncological treatment, exposure to numerous types of agents, among them the chemotherapeutic handling and circulation of pathogenic microorganisms, generates a need for high accuracy with regard to the care to be taken, because the worker in addition to focus on activities related to the recovery of patients, need to be aware of their own health.

CONCLUSION

Before the study, it is possible to point out that most graduate-level research in Oncology area focuses on the Southeast region, being the most Masters courses produced on the subject in recent years, with emphasis on the qualitative approach in methodological development.

An issue that should be analyzed by the students of master's and doctoral degrees, as well as by Brazilian graduate programs refers to methodologies used in surveys and to what extent the knowledge produced is likely to reach professionals who are directly in health services and, if the same is able to be applied/replicated. It is known that the quantitative experimental studies offer more chances to be applied due to the high level of evidence

that present in relation to qualitative descriptive studies, methodology that prevailed in the search.

As to the content of theses and dissertations, noticed a predominance of discussions involving the humanization of care, care, evaluation of nursing care and health/patient safety.

The studies involving the humanization of care pointed questions of spirituality, family experiences, expectations of the patient against the care and palliative care, having as subject, predominantly, the elderly patient with cancer.

It shows gaps in the Brazilian scientific production, which still need to be fulfilled, such as the need for the development of research about palliative care to children who have cancer disease. In the category about the care, there has been greater focus on attention to female cancer and the child with oncologic disease.

The studies concerning the evaluation on oncology area if held nursing job evaluation and clinical assessment of the patient. Demonstrating that despite the production still shy about the subject, nursing has been worrying in qualify and evaluate their assistance to patients.

When it comes to health and worker safety in oncological treatment units, it was observed the effects of theses and dissertations in the area. The discussions were limited to the possible harms related to chemotherapy, exposure to handling pathogenic microorganisms and the workplace. In this way, one realizes the need for studies involving issues of biosafety and the importance of educational activities aimed at solutions that are viable for the minimisation of risks and harms to health and worker safety in Oncology.

Finally, identified the predominance of papers that discuss the nursing care with a focus on the emotional component and in the interactive process between patient, family, and professionals. Given this, infer the need to articulate these issues to technical activities and scientific knowledge of nursing, so that their interdependence stay clear in establishing appropriate care to patients with cancer.

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