Ylva Hellstadius was one of the recipients of last year’s EONS Research Travel Grant, travelling to London in early 2014. She graduated as a nurse in June 2010 and gained an MSc in research methodology in December 2012. Now a full time PhD student at the Karolinska Institute in Stockholm, with a clinical background in palliative care, she talks about her work and how she used the grant.
My doctoral thesis, entitled “Improved emotional recovery following oesophageal cancer surgery”, aims to investigate emotional adaptation among patients following curatively intended oesophagectomy for cancer with a particular focus on the development of post-operative anxiety, depression, and post-traumatic stress symptoms. But why is the impact on emotional recovery important to study in this patient group? Firstly, oesophageal cancer is a most devastating cancer disease associated with an extremely poor prognosis and an extensive surgical procedure offers the only chance for cure. Despite curatively intended treatment, the five-year survival rate is only 31% and the risk of death from tumour recurrence post-operatively is high. There is emerging evidence that these patients suffer significant emotional distress post-operatively, but evidence from large, prospective and methodologically sound studies are limited.

Therefore, I am especially grateful to be one of the recipients of the EONS travel grant 2013, enabling me to complete a research exchange at the Department of Upper Gastrointestinal Surgery at St Thomas’ Hospital and King’s College in London, which has an ongoing comprehensive data collection including all oesophageal cancer cases treated at this high-volume centre. This large-scale data collection is prospective in design and provides high-quality and unique data on the emotional outcomes of interest for my thesis. This research exchange will contribute to new knowledge about the emotional recovery following surgery in this vulnerable patient group, in order to target appropriate supportive interventions to reduce patients’ suffering.

Another area of interest includes my ongoing efforts to make research findings more available and easy to implement in clinical practice. I strongly believe this is one of my main responsibilities as a nurse in clinical research. New findings are today communicated mainly through scientific journals and conferences. Few nurses in the clinic are able to access or even to find these results or attend conferences. As a consequence, few important research findings are ever implemented in everyday care and some interventions are even based on nurses’ own experiences rather than evidence. To illustrate this point, a few years ago I worked as a newly graduated nurse in a palliative care setting when a young man was referred to the ward. He was dying and experienced severe pain, but had an
on-going methadone addiction. The nursing team was petrified. How do we care for this patient? Some nurses in the team did not want to give the patient analgesics as they believed he was pretending to be in pain – “he is a drug-addict after all”, said one nurse. Other nurses in the team felt sorry for the patient and wanted to compensate by unrestricted drug administration. Some argued that it was our mission to make him clean again – when he only had a few days left to live? Of course, we all tried to handle the situation based on our own experience and ability, but it was obvious that we all argued on the basis of fear and prejudice instead of evidence.

The collaboration between academia and the clinic needs to be more clear and transparent. The yearly EONS Research Proposal Workshop is a good example of bringing together nursing research with clinical practice. I was one of the workshop participants in Stockholm, 2012, and the fruitful discussions about clinical problems were, over the course of two days, transformed into research hypotheses and study protocols. This, I believe, is a perfect example of how to combine research and clinical expertise and investigate clinical problems in a systematic way, in order to improve our everyday work and care of the patients.

As EONS magazine went to press, Ylva got in touch to say how she was getting on in London:

I arrived in London on Monday 10 March and I was at once introduced to the gastro oesophageal research team at St Thomas’ Hospital and we went through the detailed planning of the two coming months. I joined the gastro oesophageal team when they had their weekly round at the ward. I have also started collaborate with the two research coordinators who are responsible for the ongoing data collection at St Thomas’, which two of my studies in my thesis are based on. I will shadow these coordinators when they administer questionnaires to oesophageal cancer patients planned for curatively intended oesophagectomy. I will also attend the following operations. I am sincerely grateful to EONS for enabling me to complete this unique research opportunity. On return to Sweden in May, I will be able to conduct high quality research regarding emotional distress following oesophageal cancer surgery, based on the highly comprehensive data collection and the unique clinical experience I gain at St Thomas’ Hospital during these months. I really hope that this will lead to timely and warranted improvements in the care of oesophageal cancer patients.

About the Award

Launched in 2013, the EONS Research Travel Grant helps fund a novice or established researcher to spend time with an established researcher or research group in another country. This allows them to build collaborations and facilitates the development of research proposals.

Other travel grant recipients:

NIKOLAOS EFSTATHIOU is a lecturer at the University of Birmingham (Nursing and Physiotherapy). Originally from Greece, his PhD thesis explored perceptions of oncology among healthcare providers and users’ perceptions of oncology care provision in Greece. Palliative and end-of-life care has been his main research interest, and he recently completed a study investigating critical care nurses’ experiences of providing end-of-life care.

He applied for the travel grant to visit the Nursing Palliative Care Research and Education Unit (NPCREU) at the University of Ottawa, Canada, with the aim of building further capacity in nursing and inter-professional palliative and end-of-life care research.

GIANLUCA CATANIA is a nurse at IRCCS AOU San Martino-IST, a research teaching hospital in Genoa, Italy. He received his MA in Oncology and Palliative Care in 2006 and his MSc in Nursing in 2010.

Gianluca is currently a PhD student at the Department of Health Sciences at Genoa University, Italy, and he is particularly interested in the development and implementation of a complex intervention focused on quality-of-life assessment in palliative care practice. The grant was awarded to give him the opportunity to visit St Christopher’s Hospice, in London, UK, to gain insight into factors that have made the implementation of quality-of-life assessment in palliative care practice successful.