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A 'haem theme' but a commonality of practice

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A 'haem theme' but a commonality of practice

Abstract

This issue of our journal has a haematological theme but our four papers report findings and engage in discussion that resonates with all cancer nurses. The threads that link the four papers are those of living with cancer and haematological malignancies and how best to support individuals doing this.

Survivorship has been characterised as living on after a cancer diagnosis, as being a life-changing experience and as having both positive and negative aspects. The concept of survivorship has also been used as a tool to frame a survivor's experience and to describe the meaning making, skill building 'craftwork'¹ required by survival. A key consideration, therefore, for us as cancer and haematology nurses, is how to work with individuals affected by cancer and haematological malignancies and our fellow health professionals to enable individuals to survive well at all times across the trajectory of survival.

Disciplines

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Editorial

A 'haem theme' but a commonality of practice

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This issue of our journal has a haematological theme but our four papers report findings and engage in discussion that resonates with all cancer nurses. The threads that link the four papers are those of living with cancer and haematological malignancies and how best to support individuals doing this. Survivorship has been characterised as living on after a cancer diagnosis, as being a life-changing experience and as having both positive and negative aspects. The concept of survivorship has also been used as a tool to frame a survivor's experience and to describe the meaning making, skill building 'craftwork'¹ required by survival. A key consideration, therefore, for us as cancer and haematology nurses, is how to work with individuals affected by cancer and haematological malignancies and our fellow health professionals to enable individuals to survive well at all times across the trajectory of survival.

We start in an area of practice that is paramount for the support of many, if not all, cancer treatment modalities. Bev Quested's paper examines some of the significant changes that have occurred in the standards, guidelines and governance of blood and blood components in Australia. Transfusion practice has moved from the idea of numerical transfusion thresholds triggers to more qualitative and person-centred patient blood management principles.

I have used Fitzhugh Mullan's words before as he likened surviving cancer to being saved from drowning but then abandoned on the beach². This remains pertinent as Yvonne Panek-Hudson's paper describes attempts at one institution to provide a cancer survivor care through a health promotion lens. Yvonne's paper elegantly orientates us to the gaps in survivorship guidelines and how to best serve these members of our population and then offers a useful and effective way of working.

Nicole Loft's paper provides us with an insightful opportunity to consider an important but sometimes forgotten (or at least not prioritised) late effect of cancer treatment — that of a secondary malignancy. The very idea of the treatment causing the condition that the individual is being treated for in the first place seems counterintuitive for some patients. Nicole's paper frames this adverse effect of treatment in a way that contextualises it and provides us as cancer nurses with information to enable us to discuss it but also contextualise it for those we care for.

Patricia Morris' paper takes on a journey to understand the experience of living with a haematological malignancy through the eyes of the autobiographer and *The Age* reporter, Pamela Bone. This paper deconstructs Pamela's biography and provides us with an analysis of her story through the lens of three key illness experience theories. This reflective paper is a little different from the usual *AJCN* manuscript and provides us with some valuable insights into ways of understanding one individual's experience of living with cancer.

These four papers provide a varied look at how we, as cancer nurses, can respond to changes not only in practice but also in knowing and understanding the experiences of those individuals who come into our care. We hope you enjoy reading this edition and find these papers useful in your own practice.

References

1. Frank AW. Survivorship as Craft and Conviction: Reflections on Research in Progress. *Qual Health Res* February 2003; 13:247–255.
2. Mullan F. Seasons of Survival: Reflections of a Physician with Cancer. *N Engl J Med* 1985; 313:270–273.



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