INTRODUCTION

Oral mucositis (OM) is among the common and dreaded toxicities for cancer therapy. Lesions of OM are often painful and compromise nutrition. Cancer patients who had severity of OM were found to be associated with an increased time in hospital and increased total inpatients charges. Previous studies of performing basic oral care guideline supported the effectiveness of preventing and treating OM in cancer patients undergoing radiotherapy and chemotherapy. The purpose of this study aimed to use the intervention programs of oral care guideline to improve OM management in cancer patients with chemotherapy.

METHOD

1. In cross-sectional survey, the lower performing rate (63.1%) of oral care guideline was determined in oncology nurses in a teaching hospital in northern Taiwan. Through the cause and effect analysis and roots cause analysis in the lower performing rate of oral care guideline, the influence factors were the deficient knowledge of how assessed oral mucosa and the complicated context of patient education about basic oral care guideline, and used different assessment tool of oral mucosa in oncology nurses.

2. The intervention program included nurses’ education program consisting of oral mucosa care and WHO mucositis grading scale in cancer patients, patient education of oral hygiene for cancer patients receiving chemotherapy, the assessment package of a penlight and a card of WHO mucositis grading scale, and evaluating the standard operating procedure of nursing care for cancer patients receiving chemotherapy. All oncology nurses completed the exam before and after the nurses’ education program.

RESULT

1. All cancer patients with receiving chemotherapy were conducted in this program from March, 2017 to January, 2019, with the average of 452 patients per month. All patients completely received the assessment of oral mucosa through WHO mucositis grading scale two times per day by oncology nurses. No patient had been assessed OM on more than grade 2 of WHO mucositis grading scale during their hospitalization. Therefore, they didn’t increase time in hospital due to server OM. The mean scores of pre-post exams about nurses’ knowledge of oral mucosa were significantly increased from 75.9 to 84.5, and maintained a great score after one year, with a mean score of 93.13. In addition, the performing rate in which nurses adhered the standard operating procedure of oral mucosa care was improved from 91.8% to 98.8.

CONCLUSION

1. The results showed that this program was effective to improve the performance of basic oral care for cancer patients with chemotherapy and to prevent the OM. Nurses could also increase their knowledge about oral practice care guideline through the education program. It would further enhance the quality of oncology nursing care.