

# Impact of symptoms on quality of life/hope

# Take a moment to think about you...

- What raises your spirits?
- What dampens your spirits?
- What is most important to you?

Pick any hobby that is important to you...



Let's think more about quality of life...

Have a think about what is important for your own quality of life

Then,

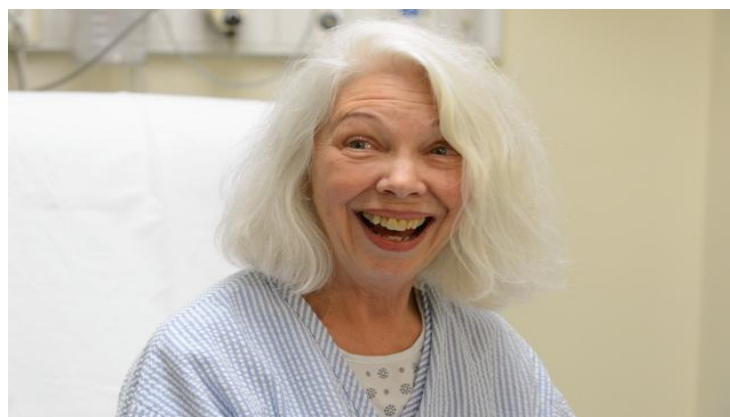
If you had to pick one of the following conditions, which would it be and why?



# How Good Are We At Measuring Quality of Life (QoL)?

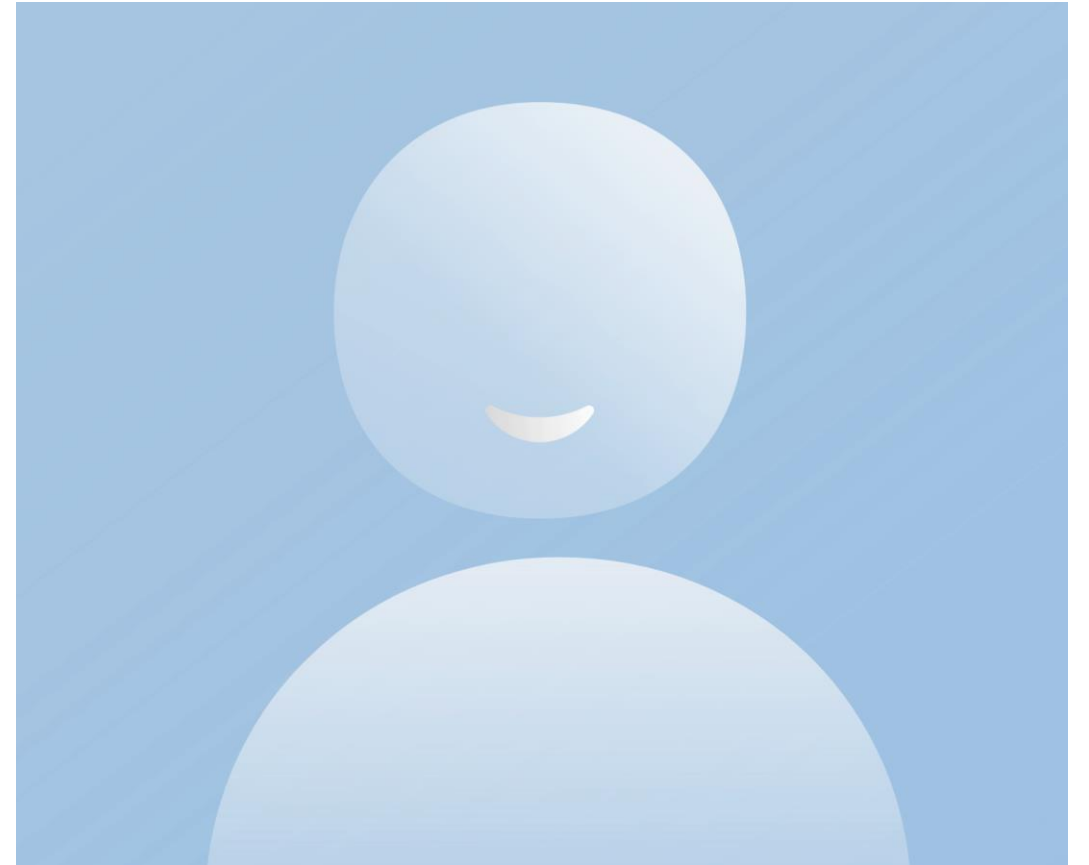


# Are We Poor Judges of QOL?



# Who should measure QoL?

- Who should measure QoL?
  - Patient
  - Relative
  - Professional
- Are observers poor judges of symptoms and QoL?



# QoL – What Is It?

‘The degree in which a person enjoys important possibilities in life with 3 major domains being identified – the 3 ‘B’s’

- **Being** – basic aspects of ‘who one is’. Includes psychological, spiritual and physical being.
- **Belonging** – person fitting into their environment and includes physical, social and community belonging.
- **Becoming** – personal goals, hopes and wishes.

QoL is a central concept in health & social care that refers to how satisfied they feel about their lives especially within illness.

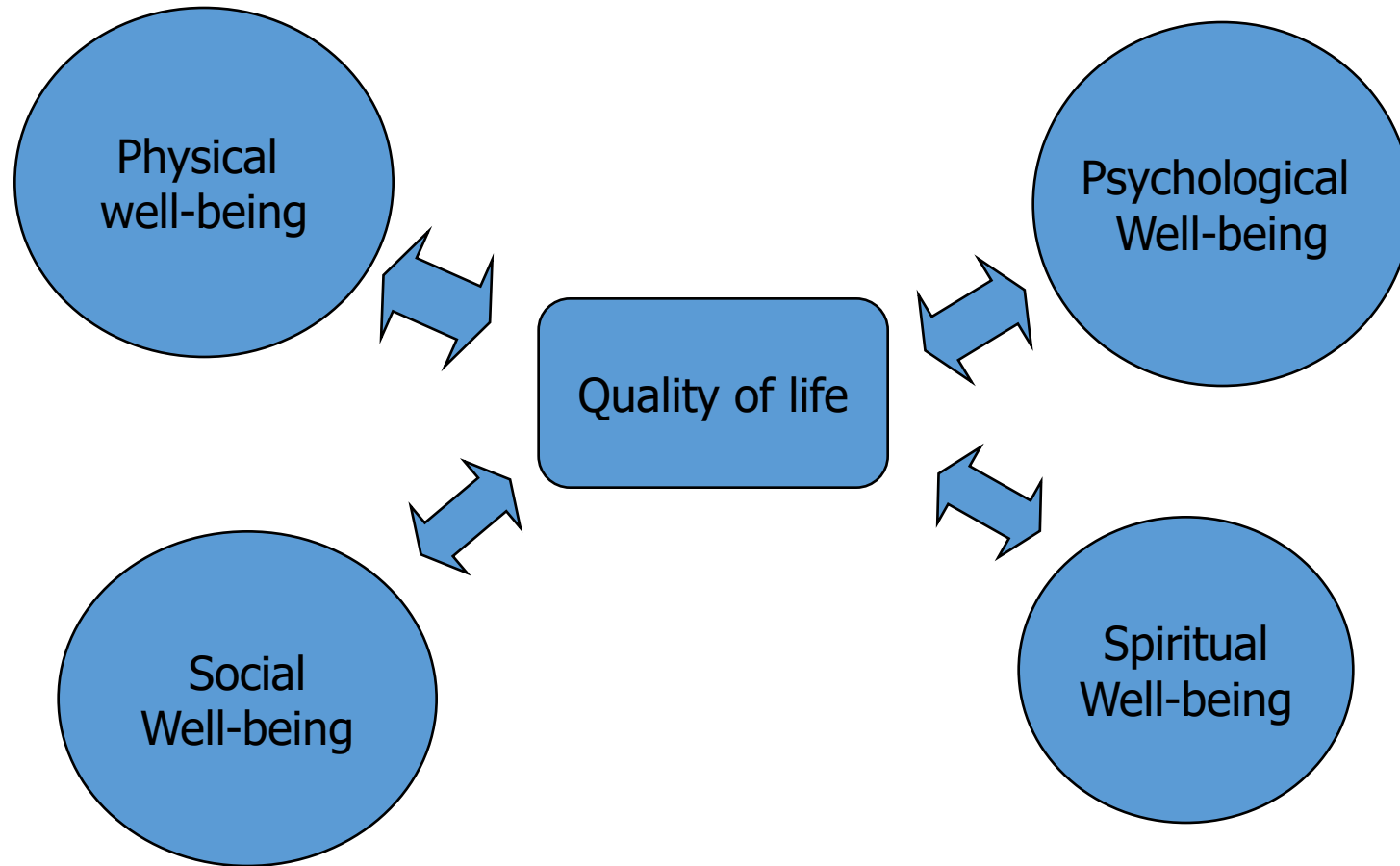
It goes beyond health or treatment and includes comfort, dignity, happiness, relationships & the ability to do what matters most to you.

# Issues to consider

- Quality of life changes over time
  - Age
  - Symptom control
  - Advancing disease
  - Response/adaptation to situation
- What about social differences?
- What QoL did the patient have pre illness?

What do I need to know about you as a person  
to give you the best care possible?

# Domains of quality of life



( Ferrell et al 1995)

# Challenges to QoL

QoL can drop if symptoms are not well managed.

Assessing need holistically will help you tailor the care and support you provide. It has the potential to enhance:

- Choice & control
- Social Connections & Relationships
- Maintain independence
- Person centred dignity & support
- The physical environment
- Cultural & Spiritual Needs
- Involving family and friends
- Maintaining purpose & enjoyment

# Physical

- What's wrong?
- Since when?
- How long for ?
- What impact?
- What helps?
- What doesn't help
- Why not?



# Emotional

- How are you feeling?
- How has your life been affected since your diagnosis?
- How does that make you feel?
- Who cares for you and how are they feeling?
- Are you able to talk about how you are feeling?



# Social

- Who are you?
- Who do you live with?
- Who cares for you?
- What does that care involve?
- How suitable is your house/environment?
- Are you receiving benefits- if so are they the appropriate ones?
- Would you benefit from any other help?



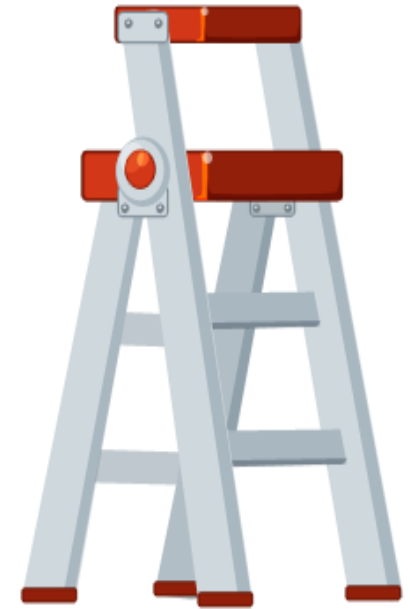
# Spiritual

- What matters most to you in life?
- Why does it matter so much?
- What experiences in life have you had?
- What have you most enjoyed?
- What have you not enjoyed?
- What makes you afraid, worried or frightened?
- What/who helps you to cope?
- How do you view the future?

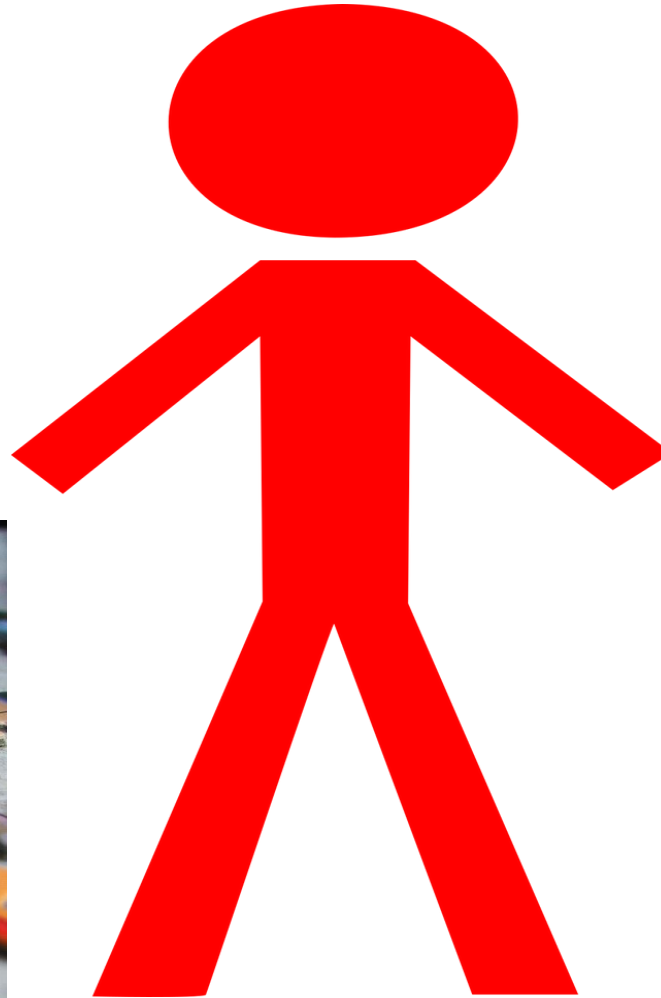


# The next step

- How do I put what I have heard into words?
- What should I document?
- What is the priority? Take time to discuss this with the patient.
- What are the implications for care planning?
- Separate into sections
  - physical, social, emotional, spiritual



# Look at the whole person



# Identifying and promoting hope

Nurses are key in identifying and fostering hope in patients.

Hope has been linked to positive health outcomes in healthy and ill populations. Inversely, hopelessness (or lack of hope) has been associated with increased adverse clinical events in some illness conditions.

Hope is a multidimensional concept with affective, cognitive,  
and behavioural dimensions...

or in other words

Hope has different parts; it involves our feelings, our  
thoughts, and our actions.

# A Final Thought !

*The value of life lies not in the length of the days but in the use you make of them.*

Montaigne, Essais, Bk1, Ch 20.