

End of Life Care / DNR

Recent articles and reports

Jan 18 – Jun 18

Guidelines

The following new guidance has recently been published:

Adult Parenteral Nutrition Policy.

Brighton and Sussex University Hospitals NHS Trust (BSUH);2018.

<https://nww.bsuh.nhs.uk/clinical/clinical-policies-and-guidelines/clinical-and-medicines-management-policies/?assetdet946769=395569&p=5>

This policy is designed to guide those who are considering the initiation of PN and to ensure that, when used, PN is clinically indicated and the patient receives the appropriate care for the duration of PN administration.

Falls prevention: cost-effective commissioning

Public Health England (PHE);2018.

<https://www.gov.uk/government/publications/falls-prevention-cost-effective-commissioning>

A resource to help commissioners and communities provide cost-effective falls prevention activities. The return on investment tool pulls together evidence on the effectiveness and associated costs for interventions aimed at preventing falls in older people living in the community. The second report summarises the findings from a literature review carried out to identify cost-effective interventions.

Freely available online

Managing Delirium in Frail/Older People.

Brighton and Sussex University Hospitals NHS Trust (BSUH);2018.

<https://nww.bsuh.nhs.uk/clinical/clinical-policies-and-guidelines/clinical-and-medicines-management-policies/?assetdet946769=396221&p=4>

This policy has been updated to include clarity on who we mean by 'Frail/Older adults'. It also reflects the changing practice in the trust in screening for delirium – we should now use SQiD (single question in delirium). It also includes details of the change in guidance on the use of sedation in delirium and post sedation management. This policy aims to give advice to staff working with confused patients at ward level.

Oesophago-gastric cancer: assessment and management in adults.

National Institute for Health and Care Excellence (NICE);2018.

<https://www.nice.org.uk/guidance/ng83>

This guideline covers assessing and managing oesophago-gastric cancer in adults, including radical and palliative treatment and nutritional support. It aims to reduce variation in practice through better organisation of care and support, and improve quality of life and survival by giving advice on the most suitable treatments depending on cancer type, stage and location.

Freely available online

[Pressure Injury Prevention and Treatment Policy.](#)

Brighton and Sussex University Hospitals NHS Trust (BSUH);2018.

<https://www.bsuh.nhs.uk/clinical/clinical-policies-and-guidelines/clinical-and-medicines-management-policies/?assetdet946769=395678&p=4>

The aim of this policy is to ensure that the necessary risk assessments are completed to prevent avoidable pressure injuries developing whilst patients are under the care of BSUH and to ensure best practice by following national guidance, minimising the potential of inconsistency of care and standardising approaches to pressure injury prevention and management.

[Pressure ulcers: safeguarding adults protocol.](#)

Department of Health and Social Care;2018.

<https://www.gov.uk/government/publications/pressure-ulcers-safeguarding-adults-protocol>

Guidance from the Chief Social Worker on responding to individuals at risk of developing pressure ulcers, and preventing harm where they occur.

Articles

The following journal articles are available from the Library and Knowledge Service electronically or in print.

[A safe procedure: best practice for intravenous peripheral cannulation.](#)

Bitmead J. *British Journal of Nursing* 2018;27(Supplement 2):1-7.

The article discusses safe methods for nurses' peripheral intravenous catheterization (PIVC), or cannulation, in a patient, including so as to prevent the complication of a bloodstream infection. An overview nurses' assessment of veins in the hand suitable for PIVC is provided.

[A systematic review and discussion of symptom specific cognitive behavioural approaches to delusions and hallucinations.](#)

Lincoln T. *Schizophrenia research* 2018;:In press article.

Studies on cognitive behavioural therapy for psychosis (CBTp) have developed from evaluating generic approaches to focusing on specific symptoms. The evidence for targeted studies on delusions and hallucinations was reviewed by authors from Institute of Psychiatry and South London and Maudsley Trust..

[Breathlessness services as a new model of support for patients with respiratory disease.](#)

Bausewein C. *Chronic Respiratory Disease* 2018;15(1):48-59.

This article is based on a systematic review evaluating randomized controlled trials (RCTs) and quasi-RCTs which examine the effectiveness of services aiming to improve breathlessness of patients with advanced disease. The Munich Breathlessness Service (MBS) is described in detail as an example of a recently set-up specialist service.

Freely available online

[Current thinking on catheter securement and infection prevention.](#)

Gabriel J. *British Journal of Nursing* 2018;27(2):S15-S16.

The article discusses research on catheter securement to prevent infections and other complications. Topics include the significance of vascular access device (VAD) or central venous access device (CVAD) placement as part of nursing, infection risks due to suturing and the importance of sterile dressing use.

[Endovascular treatment for acute ischaemic stroke in routine clinical practice: prospective, observational cohort study \(MR CLEAN Registry\).](#)

Jansen IGH. *BMJ* 2018;360:k949.

To determine outcomes and safety of endovascular treatment for acute ischaemic stroke, due to proximal intracranial vessel occlusion in the anterior circulation, in routine clinical practice.

[Essential practice for infection prevention and control: RCN guidance for nursing staff, 2/2.](#)

Sunley K. *British Journal of Healthcare Assistants* 2018;12(1):28 - 33.

'The Royal College of Nursing (RCN) has issued recent guidance (RCN, 2017) on one of the most important topics for all healthcare staff: infection prevention and control.' This document highlights best practice for infection control and prevention.

[Home parenteral nutrition for patients with intestinal failure due to advanced cancer.](#)

Murray K. *British Journal of Nursing* 2018;27(Supplement 4a):S3-S8.

The article discusses the use of home parenteral nutrition (HPN) in the care of advanced cancer patients with intestinal failure (IF), including to prevent malnutrition. An overview of the complications associated with advanced cancer, including weight loss and loss of appetite, is provided.

[Hydration: essential to life.](#)

Nazarko L. *British Journal of Healthcare Assistants* 2018;12(1):16 - 22.

'Fluid is essential to life; however, older people admitted to hospital are vulnerable to dehydration. Dehydration can affect all aspects of health and wellbeing and can increase the risk of confusion, pressure ulcers and falls—and may require intensive medical intervention to correct. The healthcare assistant's role in enabling the older person to drink can reduce complications and promote health.'

[Impact Brief: Best cancer care: Macmillan's one-to-one support workers, 2/2.](#)

Macmillan Cancer Support. *British Journal of Healthcare Assistants* 2017;11(11):542 - 547.

Support workers help clinical nurse specialists (CNSs) and other healthcare professionals to use their skills where they are most needed. The first of these two articles (Macmillan Cancer Support, 2017) described the background to the cancer charity's decision to create a new support role: the aim of Macmillan's One-to-One support workers is to enable people living with cancer with non-complex needs to self-manage.

[Incontinence-associated dermatitis from a urinary incontinence perspective.](#)

Wilson M. *British Journal of Nursing* 2018;27(9):S4-S17.

This article looks at incontinence-associated dermatitis (IAD) from the perspective of urinary incontinence (UI). UI should be assessed, treated and either resolved or managed to reduce the risk of IAD. The skin's anatomy and physiology are discussed and the changes from IAD are explained. IAD can be treated by cleansing, moisturising and protecting the skin as appropriate. IAD can be confused with grade 1 and 2 pressure ulcers, and the article points out the visual differences between these.

[Oncology nurses' beliefs and attitudes towards the double-check of chemotherapy medications: a cross-sectional survey study.](#)

Schwappach DLB. *BMC Health Services Research* 2018;18(1):123.

Double-checking medications is a widely used strategy to enhance safe medication administration in oncology, but there is little evidence to support its effectiveness. The proliferated use of double-checking may be explained by positive attitudes towards checking among nurses. This study investigated oncology nurses' beliefs towards double-checking medication, its relation to beliefs about safety and the influence of nurses' level of experience and proximity to clinical care.

[Our approach to patient safety: NHS Improvement's focus in 2017/18.](#)

NHS Improvement. *British Journal of Healthcare Assistants* 2018;12(2):96–99. NHS Improvement (NHSI) is the body responsible for overseeing foundation trusts and NHS trusts, as well as independent providers that provide NHS-funded care. It supports providers to give patients consistently safe, high-quality, compassionate care within local health systems that are financially sustainable. We publish highlights from an important recent statement NHSI has made on patient safety (NHS Improvement, 2017).

[Pressure ulcer prevention: heels at a glance.](#)

Lumbers M. *British Journal of Nursing* 2018;27(6):S6-S8.

The article discusses prevention and management strategies for the treatment of pressure ulcers that occur in the heel of the foot. It provides information on offloading methods of preventing pressure on the Achilles tendon, pressure redistribution surfaces, and prophylactic treatments such as dressings, creams, and barriers.

[Preventing skin damage and incontinence-associated dermatitis in older people.](#)

Yates A. *British Journal of Nursing* 2018;27(2):76-77.

The article discusses the prevention of skin damage and dermatitis related to incontinence in older people. Topics include risk factors for urinary and bowel incontinence in older people, the multifaceted nature of incontinence-associated dermatitis (IAD), and the use of barrier products to protect skin in older people suffering from incontinence.

[Reducing harm to patients caused by avoidable adverse drug reactions.](#)

Glasper A. *British Journal of Nursing* 2018;27(8):456-457.

The author discusses a research report on the causes and effects of avoidable adverse drug reactions and drug errors on NHS patients in England.

[The risk of microbial contamination associated with six different needle-free connectors.](#)

Casey AL. *British Journal of Nursing* 2018;27(2):S18-S26.

The aim of this study was to identify any differences between microbial ingress into six different connectors (three neutral-displacement, one negative-displacement and two anti-reflux connectors). The findings suggest that there may be differences in the risk of internal microbial contamination with different types of connectors and that even 15 seconds of decontamination may not fully eradicate microorganisms from the injection ports of some devices.

[Using tube feeding and levodopa-carbidopa intestinal gel application in advanced Parkinson's disease.](#)

Lex KM. *British Journal of Nursing* 2018;27(5):259-262.

The inability to achieve adequate nutrition and weight loss are serious problems for patients with advanced Parkinson's disease (PD). To ensure the optimal intake of nutrition and fluids and to administer levodopa-carbidopa intestinal gel (LCIG) (which patients need to increase or maintain their mobility as long as possible), different artificial feeding tubes can be used. The authors aimed to examine the use and consequences of providing nutrition and LCIG via gastrostomy tubes.

[What causes psychosis? An umbrella review of risk and protective factors.](#)

World psychiatry 2018;17(1):49-66.

Psychosis is a heterogeneous psychiatric condition for which a multitude of risk and protective factors have been suggested. This umbrella review aimed to classify the strength of evidence for the associations between each factor and psychotic disorders whilst controlling for several biases. Authors include researchers from IoP and SLAM.

Freely available online

Do-not-resuscitate orders as part of care planning in patients with COPD

Raskin, J. *ERJ open research*; Jan 2018; 4(1)

The authors discuss growing awareness of the need for advance care planning in patients with chronic obstructive pulmonary disease (COPD). However, do-not-resuscitate (DNR) order implementation remains a challenge in clinical practice.

The effects of the interventions on the DNR designation among cancer patients: A systematic review

Chen, L. *Palliative and supportive care*; Jun 2018; 1-12

The aims of this systematic review were to examine the effects of the different types of interventions on the do-not-resuscitate (DNR) designation, and the time between DNR and death among cancer patients.

Do-Not-Resuscitate orders in older adults during hospitalization: a propensity score-matched analysis

Patel, K. *Journal of the American geriatrics society* May 2018; 66 (5); 924-929

The authors explore the effect of the presence and timing of a do-not-resuscitate (DNR) order on short-term clinical outcomes, including mortality.

The interactive effect of advanced cancer patient and caregiver prognostic understanding on patients' completion of Do Not Resuscitate orders

Shen, M. *Psycho-oncology*, April 2018

This study examined the association between the main and interactive effects of advanced cancer patient and caregivers' prognostic understanding on DNR order completion.

Clinical inquiries: how well do POLST forms assure that patients get the end-of-life care they requested?

Collier, J. *The journal of family practice*; April 2018; 67 (4); 249-251

The authors report that most patients who select "do not resuscitate" (DNR) on their Physician's order for life-sustaining treatment (POLST) forms are allowed a natural death without attempted CPR across a variety of settings (community, skilled nursing facilities, emergency medical facilities, emergency medical services, and hospice).

Reports

The following report(s) may be of interest:

Deaths involving malnutrition have been on the rise. NHS neglect is not to blame.

Office for National Statistics (ONS); 2018.

<https://blog.ons.gov.uk/2018/02/14/deaths-involving-malnutrition-have-been-on-the-rise-but-nhs-neglect-is-not-to-blame/>

An increase in the number of people dying in hospital with a diagnosis of malnutrition has prompted understandable concern. One leading charity has described the figures as "shocking." But many factors other than poverty or neglect lie behind the data.

Freely available online

Polyurethane Foam Dressings for the Prevention of Pressure Ulcers: Clinical and Cost-Effectiveness and Guidelines.

Canadian Agency for Drugs and Technologies in Health (CADTH); 2017.

<https://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0097409/>

The purpose of this report is to examine the clinical effectiveness, cost-effectiveness, and evidence-based guidelines regarding the preventive use of polyurethane foam dressings in adult patients at risk for developing pressure ulcers in any setting.

Freely available online

KGH Knowledge and Library Service

Phone: 01536 492862

Email: library.index@kgh.nhs.uk

Library Website:

<http://kghlibrary.koha-ptfs.co.uk>



[@KGHNHSLibrary](https://twitter.com/KGHNHSLibrary)

Would you like help to find information to support CPD and revalidation?

Or to receive personal alerts to articles and reports on topics of particular interest to you?

Ask us about **KnowledgeShare** to receive fortnightly emails highlighting relevant reports and articles